EXTENDED TO NOVEMBER 15, 2023

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.

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

990

Department of the Treasury Internal Revenue Service

Form



Ał	or the	2022 calendar year, or tax year beginning and	ending		
B c	Check if pplicable	c Name of organization		D Employer identific	cation number
	Addres change	HOUSTON VOLUNTEER LAWYERS PROGRAM, INC	!		
	Name change	Doing business as		76-00906	52
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return/	1111 BAGBY STREET FLB 300		713-228-0	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,454,489.
	Amend return	HOUSTON, TX 77002		H(a) Is this a group re	
	Applica tion	F Name and address of principal officer: DESSICA IIOWION SIOC	JL	for subordinates	? Yes 🔀 No
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
11	Tax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions
	Nebsit			H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year	of formation: 1983 N	1 State of legal domicile: TX
Pa	art I	Summary			
Ð	1	Briefly describe the organization's mission or most significant activities: PROV			
anc	:	LOW-INCOME RESIDENTS OF HARRIS, CHAMBERS,			-
Activities & Governance	2	Check this box if the organization discontinued its operations or dispos	sed of more	I _ I	
Š	3				17
ن حە	4	Number of independent voting members of the governing body (Part VI, line 1b)			17
ies	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			37
ivit	6	Total number of volunteers (estimate if necessary)			983
Act	7a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		Current Year
		Contributions and grants (Dart) (III line 1b)		2,971,663.	3,454,474.
ne		Contributions and grants (Part VIII, line 1h)		2,971,005.	<u> </u>
Revenue		Program service revenue (Part VIII, line 2g)		-2,112.	0.
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		20,050.	15.
				2,989,601.	3,454,489.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
				0.	0.
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,208,336.	2,284,353.
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
oen	h b	Total fundraising expenses (Part IX, column (A), line 25) 31,6	81.		
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		712,102.	758,905.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,920,438.	3,043,258.
		Revenue less expenses. Subtract line 18 from line 12		69,163.	411,231.
or				ginning of Current Year	End of Year
ets (20	Total assets (Part X, line 16)		3,136,981.	3,418,876.
Net Assets	21	Total liabilities (Part X, line 26)		903,529.	774,193.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		2,233,452.	2,644,683.
		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.

Sign	Signature of off	icer			Date		
Here	GREG MOO	DRE, CHAIR					
	Type or print na	ime and title					
	Print/Type prep	arer's name	Preparer's signature	Date	Check	PTIN	
Paid	KRISTEN	SIMPSON	KRISTEN SIMPSON	11/09	/23 self-employed	P0126848	32
Preparer	Firm's name	CARR, RIGGS & 1	NGRAM, LLC		Firm's EIN 72-	-1396621	
Use Only	Firm's address	TWO RIVERWAY, 1	5TH FLOOR				
		HOUSTON, TX 770)56		Phone no.713-	621-8090	
May the II	RS discuss this	return with the preparer shown	n above? See instructions			X Yes	No
232001 12-1	3-22 LHA F	or Paperwork Reduction Act	Notice, see the separate instructions.			Form 990	(2022)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2022) HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090652 Page 2 t III Statement of Program Service Accomplishments
r ai	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROMOTE ACCESS TO JUSTICE FOR INDIVIDUALS IN THE HOUSTON AREA BY
	ASSISTING THOSE WHO CANNOT AFFORD LEGAL REPRESENTATION IN CIVIL
	MATTERS.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
	prior Form 990 or 990-EZ?
-	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	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 expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,559,786. including grants of \$) (Revenue \$
	HVL PROVIDES FREE LEGAL SERVICES TO LOW-INCOME INDIVIDUALS IN THE
	GREATER HOUSTON AREA WHO ARE FACING CIVIL LEGAL PROBLEMS (E.G., FAMILY
	LAW, PROBATE, LANDLORD/TENANT) SERVING DIVERSE POPULATIONS (E.G., U.S.
	VETERANS, IMMIGRANT COMMUNITIES, ETC.) HVL HAS A SCREENING PROCESS FOR
	EXTENDED REPRESENTATION SERVICES THROUGH WHICH APPLICANTS ARE CONNECTED
	WITH A PRO BONO LAWYER IN PRIVATE PRACTICE FOR THE LIFE OF THEIR LEGAL
	PROBLEM. HVLP PLACED AN ESTIMATED 958 CLIENT MATTERS WITH PRO BONO
	ATTORNEYS FOR LEGAL REPRESENTATION DURING 2022. IN ADDITION, IN 2022,
	HVL PROVIDED ON-ON-ONE LEGAL ADVICE OR BRIEF SERVICES TO AN ESTIMATED
	4,493 CLIENTS DELIVERING LEGAL ADVICE AND BRIEF SERVICES TO THESE
	INDIVIDUALS. OVERALL, IN 2022 VOLUNTEER ATTORNEYS DONATED PRO BONO
	SERVICES WITH AN ESTIMATED VALUE OF \$12,688,217.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
τu	
4-	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 2,559,786.
4e	Total program service expenses 2,559,786. Form 990 (2022
232002	Form 330 (2022

16341109 794202 94-08976.001

Form 990 (2022) HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090652 Page 3 Part IV Checklist of Required Schedules

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7		-		
'	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		х
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
	Schedule D, Part III	8		<u> </u>
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?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
-		1 IE	- 23	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	4 4 4	х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	<u></u>	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
_	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	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."			
		19		х
20-	complete Schedule G, Part III			X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u></u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	X
232003	i 12-13-22	Form	990	(2022)

3

16341109 794202 94-08976.001

Form 990 (2022) HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090652 Page 4

Par	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
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	<u> </u>
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			v
	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		<u> </u>
C	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		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		<u> </u>
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u>270</u>		<u> </u>
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		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			
	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			
	"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		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
00	"Yes," complete Schedule L, Part IV	28c		X X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
02	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			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	00	23	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 12			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
232004	12-13-22	Form	990	(2022)
	4			

Form	990 (2022) HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090 t V Statements Regarding Other IRS Filings and Tax Compliance (continued)	652	P	age 5
1 41	Statements negaring other mornings and rax compliance (continued)		Vee	Na
20	Enter the number of employees reported on Form W/2. Transmittel of Weas and Tax Statements		Yes	No
Zđ	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 37			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
		20 3a	- 23	x
		3b		
	It "Yes," has it filed a Form 990-1 for this year? If "No" to line 3b, provide an explanation on Schedule O	55		
ти	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
h	If "Yes," enter the name of the foreign country	ти		
, N	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	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?	50 50		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
Uu		6a		х
b	any contributions that were not tax deductible as charitable contributions?	Ua		
D.	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10		
C		7c		х
d	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f		7e 7f		X
	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	N/	
g h	If the organization received a contribution of qualified intellectual property, did the organization me rorm boss as required?	79 7h	N/	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	- 11		
0	$T_{\rm res}$	8		
9	sponsoring organization have excess business holdings at any time during the year? <u>N/A</u> Sponsoring organizations maintaining donor advised funds.	0		
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:	0.0		
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders N/A			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17		
	If "Yes," complete Form 6069.			
232005	12-13-22	Form	990	(2022)

Form	990 (2022) HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090			age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a	"No" ı	respon	ise
	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 17			
	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 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	х	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		x
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
100	taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	1.00		<u>.</u>
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	hle
10	for public inspection. Indicate how you made these available. Check all that apply.	, only)	avana	010
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
13	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			
20	JESSICA HOWTON STOOL - 713-275-0125			
	1111 BAGBY STREET FLB 300, HOUSTON, TX 77002			
232004	3 12-13-22	Form	990	(2022)
202000	6	1 011		1-022)

Form 990 (2022) HOUSTO	N VOLUNTEE	R	LAI	WY	ERS	5 I	PR	OGRAM, INC	76-0090	652 _{Page} 7
Part VII Compensation of Officer			tees	s, K	ley E	Em	plo	yees, Highest Co	mpensated	
Employees, and Indepen	Ident Contracto	ors								
Check if Schedule O contains a	response or note to	any	line	in th	nis Pa	art V	/11			
Section A. Officers, Directors, Trustees,	Key Employees, ar	nd H	lighe	st C	Comp	oens	sate	d Employees		
 1a Complete this table for all persons requir List all of the organization's current of Enter -0- in columns (D), (E), and (F) if no corr 	ficers, directors, tru pensation was paid	stee	s (wł	neth	ier ind	divio	dual	s or organizations), reg	ardless of amount of c	
 List all of the organization's current kee List the organization's five current high who received reportable compensation (box \$100,000 from the organization and any related by the organization's former off reportable compensation from the organization's former direction of the organization's former direction of the organization's former direction of the organization of the organization of the organization's former direction of the organization of the organization's former direction of the organization of the organization's former direction of the organization of the organi	est compensated er 5 of Form W-2, box ted organizations. icers, key employee on and any related of ectors or trustees ion from the organiz list the persons abo	nplo 6 of s, ar orga that atio ove.	nd high nizat rece n and	s (oti m 10 ghe: ions eiveo d an	her tł)99-M st co s. d, in t ıy rela	han /ISC mpe the ated	an (c, ar ensa cap org	officer, director, trustee nd/or box 1 of Form 10 ated employees who rea acity as a former direct ganizations.	, or key employee) 99-NEC) of more than ceived more than \$100 or or trustee of the org	
		Jiga	IIZat			Jena				(E)
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	box,	tional trustee	s per	tion nore th son is I rector/t	both : truste	an :e)	(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ANNE CHANDLER	40.00									
EXECUTIVE DIRECTOR				X				153,352.	0.	16,233.
(2) KERI BROWN	3.00	v		v				0	0	0
IMMEDIATE PAST CHAIR	2.00	Χ		X	\rightarrow	_	-+	0.	0.	0.
(3) DAVID HARRELL DIRECTOR/IMMEDIATE PAST CHAIR	3.00	x		x				0.	0.	0.
(4) GREG MOORE	1.00	_								
CHAIR	2.00	х		x				0.	0.	0.
(5) COLLIN COX	1.00									<u> </u>

DIRECTOR/IMMEDIATE PAST CHAIR	5.00		_ Z	x		υ.	0.	0.
(4) GREG MOORE	1.00							
CHAIR	2.00	x	2	x		0.	0.	0.
(5) COLLIN COX	1.00							
CHAIR-ELECT	2.00	x				0.	0.	0.
(6) EMMA DOINEAU	1.00							
DIRECTOR	2.00	x				0.	0.	0.
(7) JACQUELINE FURLOW	1.00							
DIRECTOR		x				0.	0.	0.
(8) CHANLER LANGHAM	1.00							
DIRECTOR		x				0.	0.	0.
(9) JAMIE LEADER	1.00							
DIRECTOR		X				0.	0.	0.
(10) PETER LOWRY	1.00							
DIRECTOR		X				0.	0.	0.
(11) CASSANDRA MCGARVEY	1.00							
DIRECTOR		X				0.	0.	0.
(12) AUDREY MOMANAEE	1.00							
DIRECTOR		X				0.	0.	0.
(13) AARON REIMER	1.00							
DIRECTOR		X				0.	0.	0.
(14) TERRY ROBERSON	1.00							
DIRECTOR		X				0.	0.	0.
(15) JERRY SIMONEAUX	1.00							
DIRECTOR - EX-OFFICIO		X				0.	0.	0.
(16) TRAMAINE SINGLETON	1.00							
DIRECTOR		X				0.	0.	0.
(17) ANDREW YEH	1.00							
DIRECTOR		X				0.	0.	0.
232007 12-13-22								Form 990 (2022)
				7				

7

16341109 794202 94-08976.001

Form 990		OLUNTEE	R	LA	WY	ER	S	PR	OGRAM, INC	76-009	06	52 F	Page 8
Part VII	Section A. Officers, Directors, Trust	ees, Key Emp	oloye	ees,			ghes	t C	ompensated Employee	s (continued)			
	(A) Name and title	(B) Average hours per week	box,	not c , unles	Pos heck i ss per	rson i	than c s both r/trus	n an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimat amount othe	of
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)		compens from tl organiza and rela organizat	ne ition ited
	ERT PAINTER	1.00											
TREASURE	R IY VISAGE	1.00	Х		X				0.	0	+		0.
DIRECTOR		1.00	х						0.	0			0.
(20) M.	KAYLAN DUNN	1.00											
SECRETAR	Y		X		X				0.	0	+		0.
											+		
											+		
											+		
											\perp		
											\perp		
1b Sub									153,352.	0	_	16,2	
	al from continuation sheets to Part VII al (add lines 1b and 1c)	-							0.	0		16,2	0.
2 Tota	I number of individuals (including but no										•	1072	1
com	pensation from the organization											Yes	No
	the organization list any former officer, 1a? If "Yes," complete Schedule J for su	-		•	•	•		Ŭ	hest compensated emp	2		3	x
	any individual listed on line 1a, is the su related organizations greater than \$150											4 X	
	any person listed on line 1a receive or a												
	lered to the organization? <i>If</i> "Yes." com 3. Independent Contractors	plete Schedule	e J fo	or si	ich i	oers	on .					5	X
1 Com	nplete this table for your five highest cor	•	•							· · ·	satic	on from	
the d	organization. Report compensation for t (A)				0	ith c	or wi	thin	(B)		0.0	(C)	
	Name and business	address	NC	ONE	5				Description of s	services		mpensatio	on
								\neg					
								_					
								-					
2 Tota	I number of independent contractors (ir		nt lin	nitor	1 to 1	thee		ted	above) who received m	ore than	_		
	0,000 of compensation from the organiz	•			0	0)	ucu	above, who received III			000	

232008 12-13-22

Form			HOUSTON V	OLUN	TEER	LAW	YERS	PROGRA	AM,	INC	76-0090	652 F	Page 9
			Check if Schedule O contains a res	sponse	or note to	o anv lin	e in this	Part VIII					
					<u></u>	<u>.</u>		(A) revenue		(B) d or exempt on revenue	(C) Unrelated business revenue	(D) Revenue ex from tax u sections 51	under
ts t	1	а	Federated campaigns 1	a	2,	986.							
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues1	b									
Am 0.			Fundraising events1		100								
Gifi İlar			Related organizations 1		100,0								
ns,			e () –	<u>e 1,</u>	783,4	428.							
er (t	All other contributions, gifts, grants, and		568,	060							
Oth		~	similar amounts not included above 1 Noncash contributions included in lines 1a-1f	r g \$		408.							
		-	Total. Add lines 1a-1f				3.45	4,474.					
<u> </u>					Busines		- /						
θ	2	а											
® vic		b											
Se		с											
ram leve		d										ļ	
Program Service Revenue		е										ļ	
٩			All other program service revenue										
			Total. Add lines 2a-2f										
	3		Investment income (including dividend other similar amounts)										
	4		Income from investment of tax-exempt										
	5		Royalties										
			(i) F	eal	(ii) Per								
	6	а	Gross rents 6a										
		b	Less: rental expenses 6b										
		с	Rental income or (loss) 6c										
			Net rental income or (loss)		1								
	7	а	Gross amount from sales of (i) Sec	urities	(ii) O	ther							
			assets other than inventory 7a										
Ø		b	Less: cost or other basis										
venue		~	and sales expenses 7b Gain or (loss) 7c										
Seve			Net gain or (loss)										
Other Re	8		Gross income from fundraising events (not										
0			including \$ c contributions reported on line 1c). See	'									
			Part IV, line 18	8a									
		b	Less: direct expenses										
			Net income or (loss) from fundraising e										
	9	а	Gross income from gaming activities.										
			Part IV, line 19										
			Less: direct expenses										
			Net income or (loss) from gaming activ	ties	1								
	10	а	Gross sales of inventory, less returns	10									
		h	and allowances Less: cost of goods sold										
			Net income or (loss) from sales of inver										
-					Busines								
sno	11	а	OTHER INCOME		900			15.					15.
ane		b											
Sells		с											
Miscellaneous Revenue			All other revenue					4 -					
_			Total. Add lines 11a-11d				2 4 5	15.			0		1 -
	12		Total revenue. See instructions				კ,45	4,489.		0.	0.	F	15.
232009	9 12-	-13-	22									Form 990	• (2022)

HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090652 Page 10 Form 990 (2022) Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons	se or note to any line in t	his Part IX		
	t include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic ndividuals. See Part IV, line 22				
3 (Grants and other assistance to foreign				
C	organizations, foreign governments, and foreign				
i	ndividuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
t	rustees, and key employees	154,500.	132,533.	20,422.	1,545.
	Compensation not included above to disqualified				
	bersons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	1,703,384.	1,461,195.	225,155.	17,034
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	66,468.	57,017.	8,786.	665.
	Other employee benefits	217,442.	186,526.	28,742.	<u> </u>
	Payroll taxes	142,559.	122,289.	18,844.	1,426
	Fees for services (nonemployees):				-
	Management				
	_egal				
	Accounting	42,960.		42,960.	
	_obbying				
	Professional fundraising services. See Part IV, line 17				
	nvestment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A), amount, list line 11g expenses on Sch 0.)	105,642.	76,659.	28,480.	503.
	Advertising and promotion	2,522.	,	,	2,522
	Diffice expenses	13,611.	12,149.	1,359.	103.
	nformation technology	88,439.	75,923.	11,636.	880.
	Royalties	,	,	,	
	Dccupancy	366,076.	314,027.	48,388.	3,661.
	Travel	2,919.	2,719.	186.	14.
	Payments of travel or entertainment expenses	, - <u>-</u>	, -		
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	5,766.	4,946.	762.	58
	nterest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	79,462.	68,164.	10,503.	795
	nsurance	9,081.	7,790.	1,200.	91
	Other expenses. Itemize expenses not covered		.,		
6 	above. (List miscellaneous expenses on line 24e. If ine 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
	EOUIPMENT RENTAL	15,144.	12,991.	2,002.	151
	OTHER EXPENSES	13,979.	12,253.	1,716.	10
-	PROFESSIONAL DEVELOPMEN	10,801.	10,458.	319.	24
-	MEALS	2,503.	2,147.	331.	25
-	All other expenses	_,	_,,		
	Fotal functional expenses. Add lines 1 through 24e	3,043,258.	2,559,786.	451,791.	31,681
	Joint costs. Complete this line only if the organization	3,010,2001	_,,		,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					Form 990 (2022

PUBLIC DISCLOSURE COPY 76-0090652 Page 11 HOUSTON VOLUNTEER LAWYERS PROGRAM, INC Form 990 (2022) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year **(B)** End of year 1,646,046. 1,614,225. Cash - non-interest-bearing 1 1 2,244. 2,214. Savings and temporary cash investments 2 2 1,209,843. 1,305,161. Pledges and grants receivable, net 3 3 4 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 Assets 8 Inventories for sale or use 8 104,220. 86,777. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 774,745. basis. Complete Part VI of Schedule D _____ 10a 647,758. 206,449. 126,987. 10c b Less: accumulated depreciation 10b 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13

	1				
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	0.	15	251,691.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	3,136,981.	16	3,418,876.
	17	Accounts payable and accrued expenses	130,099.	17	113,370.
	18	Grants payable		18	
	19	Deferred revenue	771,186.	19	308,791.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
litie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	2,244.	25	352,032.
	26	Total liabilities. Add lines 17 through 25	903,529.	26	774,193.
		Organizations that follow FASB ASC 958, check here			
sec		and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	1,060,464.	27	1,314,963.
Ba	28	Net assets with donor restrictions	1,172,988.	28	1,329,720.
Fund Balances		Organizations that do not follow FASB ASC 958, check here			
ц		and complete lines 29 through 33.			
s or	29	Capital stock or trust principal, or current funds		29	
Net Assets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	2,233,452.	32	2,644,683.
	33	Total liabilities and net assets/fund balances	3,136,981.	33	3,418,876.
					Form 990 (2022)

Form **990** (2022)

232011 12-13-22

Form	990 (2022) HOUSTON VOLUNTEER LAWYERS PROGRAM, INC	76-00	90652	Pad	_{ae} 12
Pa	t XI Reconciliation of Net Assets			•	<u> </u>
	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	3,454		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,043		
3	Revenue less expenses. Subtract line 2 from line 1	3		1,2	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,23	3,4	52.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			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	2,644	4,6	83.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				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	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	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				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form **990** (2022)

232012 12-13-22

SCHEDULE A		Dublic Cha	rity Status an	d Duk	lia Su	unnort		OMB No. 1545-0047
(Form 990)			rity Status an nization is a section 501					2022
			47(a)(1) nonexempt cha			or a section		2022
Department of the Treasury Internal Revenue Service			ttach to Form 990 or Fo					Open to Public
		Go to www.irs.gov/	Form990 for instruction	is and the	latest inf	ormation.	F	Inspection
Name of the organizati			EER LAWYERS H		AM, IN	IC		identification number 6-0090652
Part I Reason	for Public C	Charity Status.	(All organizations must c	omplete th	nis part.) S		<u> </u>	0-0090032
			For lines 1 through 12, cl					
			on of churches described			I)(A)(i).		
			Attach Schedule E (Form					
3 A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4 A medical res	search organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
city, and stat	e:							
5 An organizati	on operated fo	or the benefit of a co	llege or university owned	or operat	ed by a go	overnmental u	nit describe	ed in
		Complete Part II.)						
		-	nental unit described in					
-		•	ntial part of its support fr	om a gove	ernmental	unit or from ti	ne general p	bublic described in
		complete Part II.)	(1)(A)(ui) (Complete Dar					
			(1)(A)(vi). (Complete Part in section 170(b)(1)(A)(i)		ad in coniu	unction with a	land-grant	college
			ulture (see instructions).					•
university:		grant benege er agne			lame, enj	, and state of	and conlege	
	on that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
			t to certain exceptions; a					
income and u	unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	ganization a	fter June 30, 1975.
See section	509(a)(2). (Co	mplete Part III.)						
	-	-	ively to test for public saf	•				
-	-	-	vely for the benefit of, to	-			•	
		-	d in section 509(a)(1) o					Check the box on
	•	• •	f supporting organization				-	niuina
		-	upervised, or controlled l gularly appoint or elect a	• • • •	-			
	•	complete Part IV, Se		majority c				ipporting
		•	or controlled in connect	ion with it:	s supporte	ed organizatio	n(s). by hav	ina
		•	anization vested in the sa			0		•
organizatio	n(s). You mus	t complete Part IV,	Sections A and C.	-				
c 📃 Type III fui	nctionally inte	grated. A supportin	g organization operated i	n connect	tion with, a	and functiona	lly integrate	d with,
its support	ed organizatio	n(s) (see instructions). You must complete F	Part IV, Se	ctions A,	D, and E.		
	-		porting organization operation				•	. ,
		0 0	ation generally must sati	•		•	l an attentiv	veness
			nplete Part IV, Sections					
			written determination from			турет, туре	п, туре п	
f Enter the number		·	nally integrated supportir					
g Provide the follow	• •	•	d organization(s).					
(i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed ng document?	(v) Amount o	f monetary	(vi) Amount of other
organizatior	ו		(described on lines 1-10 above (see instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)
Total								

Schedule A (Form 990) 2022 HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090652 Page 2 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.)

See	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.")	4123308.	3575920.	3095991.	2971663.	3454474.	17221356.
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	4123308.	3575920.	3095991.	2971663.	3454474.	17221356.
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.						17221356.
	ction B. Total Support				1	1	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	4123308.	3575920.	3095991.	2971663.	3454474.	17221356.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,		•	050			
	and income from similar sources \dots		9.	252.	571.		832.
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					1 -	
	assets (Explain in Part VI.)				20,050.	15.	20,065.
	Total support. Add lines 7 through 10						17242253.
	Gross receipts from related activities,	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			12	
13	First 5 years. If the Form 990 is for the						
80	organization, check this box and stor ction C. Computation of Publi						·····
	· · · · · · · · · · · · · · · · · · ·						99.88 %
	Public support percentage for 2022 (I		•			14	00.00
	Public support percentage from 2021					15	
108	33 1/3% support test - 2022. If the o						V
Ŀ	stop here. The organization qualifies 33 1/3% support test - 2021. If the o		-		line 15 is 22 1/20/		
L							
170	and stop here. The organization qual						
1/8	10% -facts-and-circumstances test	-					
	and if the organization meets the fact			-	-	vi now the organiz	
F	meets the facts-and-circumstances te 10% -facts-and-circumstances test	-		• • • •	-	7a and line 15 is	10% or
C		•					
	more, and if the organization meets the						
19	organization meets the facts-and-circu Private foundation. If the organization				• •		
10	i mate roundation. It the organizatio	A GIG HOL CHECK & I		a, 100, 17a, 01 170	, oneon une dux al		(Form 990) 2022
						ounequie A	1 JIII JJUJ ZUZZ

232022 12-09-22

Schedule A (Form 990) 2022	IOUSTON V	OLUNTEER	LAWYERS	PROGRAM,	INC	76-0090652	Page 3					
Part III Support Schedule for C	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 b	qualify under the tests listed below, please complete Part II.)											
Section A. Public Support												
Calondar yoar (or fienal yoar beginning in)	(a) 2019	(b) 2010	(a) 202	0 (4) 200	54	(a) 2022 (f)	Total					

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	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness 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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support				_	_	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2022 (I	ine 8, column (f), d	ivided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20)22 (line 10c, colur	nn (f), divided by l	ine 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2022. If the						7 is not
	more than 33 1/3%, check this box ar	-	-		••••		
b	33 1/3% support tests - 2021. If the	•					and
_	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see ins		
23202	23 12-09-22		1 -	:		Schedule /	A (Form 990) 2022
			15	,			

HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090652 Page 4

Part IV Supporting Organizations

Schedule A (Form 990) 2022

(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")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

16

232024 12-09-22

10a 10b Schedule A (Form 990) 2022

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

76-0090652 Page 5 HOUSTON VOLUNTEER LAWYERS PROGRAM, INC Schedule A (Form 990) 2022 Supporting Organizations (continued) Part IV

			Yes	No			
11	Has the organization accepted a gift or contribution from any of the following persons?						
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and						
	11c below, the governing body of a supported organization?	11a					
b	A family member of a person described on line 11a above?	11b					
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide						
	detail in Part VI.	11c					
Section B Type I Supporting Organizations							

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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
2	Did the organization operate for the benefit of any supported organization other than the supported	

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
		4		

the supported organization(s). Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the	e organization used to satisf	v the Integral Part Test durin	a the year (see instructions).
-				

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

c 🗌		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental entit	v (see instruction <u>s)</u>).
-----	--	---	-------------------------	------------------------------------	------------------------------	----

17

- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.

a 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. 232025 12-09-22

3b Schedule A (Form 990) 2022

2a

2b

3a

Yes No

Yes

No

16341109 794202 94-08976.001

Sche	dule A (Form 990) 2022 HOUSTON VOLUNTEER LAWY			76-0090652 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti			
1	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2		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-function	ally integrate	ed Type III supporting org	anization (see

instructions).

Schedule A (Form 990) 2022

232026 12-09-22

Sche Par		TEER LAWYERS PF (a)(3) Supporting Orga			5-0090652 Page 7
Secti	on D - Distributions		(containe		Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	5	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prior	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			10	
Secti	on 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				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years			_	
b	Applied to 2022 distributable amount				
C	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				
e	Excess from 2022				

Schedule A (Form 990) 2022

232027 12-09-22

Schedule A	(Form 990) 2022	HOUSTON	VOLUNTEER	LAWYERS	PROGRAM,	INC	76-0090652	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	mation. Prov , 2, 3b, 3c, 4b, 4 lines 2 and 3; P	ide the explanations 4c, 5a, 6, 9a, 9b, 9c, art IV, Section E, line	required by Part 11a, 11b, and 11 s 1c, 2a, 2b, 3a,	II, line 10; Part II, li c; Part IV, Section and 3b; Part V, line	ine 17a or 1 B, lines 1 a e 1; Part V, 5	7b; Part III, line 12; nd 2; Part IV, Section Section B, line 1e; Pa	C,
	· · · · · · · · · · · · · · · · · · ·							
232028 12-09-2	2						Schedule A (Form 9	90) 2022

PUBLIC DISCLOSURE	COPY

	HEDULE D 1 990)	Complete if the organ Part IV, line 6, 7, 8, 9, 10,	al Financial Statements nization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12		OMB No. 1545-0047
	nent of the Treasury Revenue Service		.ttach to Form 990. 0 for instructions and the latest informa	ation	Open to Public Inspection
	e of the organization	on	LAWYERS PROGRAM, INC		ver identification numbe
Par	t I Organiza	ations Maintaining Donor Advised		or Accounts.	
		n answered "Yes" on Form 990, Part IV, line			
			(a) Donor advised funds	(b) Funds a	and other accounts
1	Total number at er	nd of year			
		f contributions to (during year)			
		f grants from (during year)			
		t end of year			
		on inform all donors and donor advisors in v		ed funds	
	-	on's property, subject to the organization's e	-		Yes N
6		on inform all grantees, donors, and donor a			
	0	oses and not for the benefit of the donor or	0 0	,	
		ate benefit?	, , , ,	5	Yes N
Par		ation Easements. Complete if the org			
1		servation easements held by the organizatio		,	
•		of land for public use (for example, recreat		f a historically imp	ortant land area
		f natural habitat	·	f a certified histor	
		of open space			
2		through 2d if the organization held a qualifi	ied conservation contribution in the form	of a conservation	essement on the last
2	day of the tax year	o o .			Id at the End of the Tax Ye
•					
		onservation easements			
	•		and and the shared in (a)		
		vation easements on a certified historic stru		<u>2c</u>	
		vation easements included in (c) acquired a	• • •		
		isted in the National Register			
	year	vation easements modified, transferred, rele		e organization dur	ing the tax
		where property subject to conservation eas			
5	•	tion have a written policy regarding the peri			
	,	orcement of the conservation easements it			
6	Staff and voluntee	r hours devoted to monitoring, inspecting, I	handling of violations, and enforcing cons	servation easeme	nts during the year
7	Amount of expens	es incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easements d	uring the year
0	Does each conserv	vation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)	
8					
	and Section 170(n)	(4)(B)(ii)?			Yes N
)(4)(B)(ii)? be how the organization reports conservation	on easements in its revenue and expense		Yes N
9	In Part XIII, describ	be how the organization reports conservation	on easements in its revenue and expense	statement and	
9	In Part XIII, describ balance sheet, and	be how the organization reports conservation d include, if applicable, the text of the footn	on easements in its revenue and expense	statement and	
9	In Part XIII, describ balance sheet, and organization's acc	be how the organization reports conservation	on easements in its revenue and expense note to the organization's financial statem	statement and ents that describe	es the
9	In Part XIII, describ balance sheet, and organization's acc t III Organiza	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements.	on easements in its revenue and expense note to the organization's financial statem Art, Historical Treasures, or Ot	statement and ents that describe	es the
9 Par	In Part XIII, describ balance sheet, and organization's acc t III Organiza Complete if	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of f the organization answered "Yes" on Form	on easements in its revenue and expense note to the organization's financial statem Art, Historical Treasures, or Ot 990, Part IV, line 8.	statement and ents that describe ther Similar A	es the ssets.
9 Par	In Part XIII, descrit balance sheet, and organization's acc t III Organizat Complete if If the organization	be how the organization reports conservation d include, if applicable, the text of the footn <u>ounting for conservation easements.</u> ations Maintaining Collections of f the organization answered "Yes" on Form elected, as permitted under FASB ASC 956	on easements in its revenue and expense note to the organization's financial statem Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a	statement and ents that describe ther Similar A and balance sheet	es the ssets.
9 Par	In Part XIII, describ balance sheet, and organization's acco till Organizat Complete if If the organization of art, historical tree	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of f the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub	on easements in its revenue and expense note to the organization's financial statem Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a plic exhibition, education, or research in fu	statement and ents that describe ther Similar A and balance sheet urtherance of pub	es the ssets.
9 Par 1a	In Part XIII, describ balance sheet, and organization's accorn t III Organiza Complete if If the organization of art, historical tre service, provide in	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of if the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finan	on easements in its revenue and expense note to the organization's financial statement Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a plic exhibition, education, or research in funcial statements that describes these item	statement and ents that describe ther Similar A and balance sheet urtherance of pub ns.	es the ssets. t works lic
9 Par 1a	In Part XIII, describ balance sheet, and organization's accor till Organiza Complete if If the organization of art, historical tre service, provide in If the organization	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of if the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finant elected, as permitted under FASB ASC 956	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in funcial statements that describes these item 8, to report in its revenue statement and b	statement and ents that describe ther Similar A and balance sheet urtherance of pub ns. balance sheet wo	es the ssets. t works lic rks of
9 Par 1a b	In Part XIII, describ balance sheet, and organization's acc till Organiza Complete if If the organization of art, historical tree service, provide in If the organization art, historical treas	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of if the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finant elected, as permitted under FASB ASC 956 sures, or other similar assets held for public	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in funcial statements that describes these item 8, to report in its revenue statement and b	statement and ents that describe ther Similar A and balance sheet urtherance of pub ns. balance sheet wo	es the ssets. t works lic rks of
9 Par 1a b	In Part XIII, describ balance sheet, and organization's acc till Organiza Complete if If the organization of art, historical trees service, provide in If the organization art, historical trees provide the followi	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of if the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finan- elected, as permitted under FASB ASC 956 sures, or other similar assets held for public ng amounts relating to these items:	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in funcial statements that describes these item 8, to report in its revenue statement and 1 exhibition, education, or research in furth	statement and ents that describe ther Similar A and balance sheet urtherance of pub hs. balance sheet wo herance of public	es the ssets. t works lic rks of service,
9 Par 1a b	In Part XIII, describ balance sheet, and organization's accor- till Organization Complete if If the organization of art, historical treas provide the followi (i) Revenue inclu-	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. ations Maintaining Collections of f the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finan elected, as permitted under FASB ASC 956 sures, or other similar assets held for public ing amounts relating to these items: ded on Form 990, Part VIII, line 1	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in funcial statements that describes these item 8, to report in its revenue statement and I e exhibition, education, or research in furth	statement and ents that describe ther Similar A and balance sheet urtherance of pub hs. balance sheet wo herance of public	es the ssets. t works lic rks of service,
9 Par 1a b	In Part XIII, describ balance sheet, and organization's acc till Organizat Complete if If the organization of art, historical treas provide the followi (i) Revenue include (ii) Assets include	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. ations Maintaining Collections of f the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finan elected, as permitted under FASB ASC 956 sures, or other similar assets held for public ing amounts relating to these items: ded on Form 990, Part X	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in functial statements that describes these item 8, to report in its revenue statement and I exhibition, education, or research in furth	statement and ents that describe ther Similar A and balance sheet urtherance of pub ns. balance sheet wo nerance of public 	es the ssets. t works lic rks of service,
9 Par 1a b	In Part XIII, describ balance sheet, and organization's accor t III Organizat Complete if If the organization of art, historical trees provide the followi (i) Revenue include (ii) Assets include If the organization	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of f the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finan elected, as permitted under FASB ASC 956 sures, or other similar assets held for public ng amounts relating to these items: ded on Form 990, Part VIII, line 1 end in Form 990, Part X received or held works of art, historical treat	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in funcial statements that describes these item 8, to report in its revenue statement and lic exhibition, education, or research in furth exhibition, education, or research in furth	statement and ents that describe ther Similar A and balance sheet urtherance of pub ns. balance sheet wo nerance of public 	es the ssets. t works lic rks of service,
9 Par 1a b	In Part XIII, describ balance sheet, and organization's accord Complete if If the organization of art, historical trees service, provide in If the organization art, historical trees provide the followi (i) Revenue include (ii) Assets include If the organization the following amount	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of f the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finan elected, as permitted under FASB ASC 956 sures, or other similar assets held for public ng amounts relating to these items: ded on Form 990, Part VIII, line 1 ed in Form 990, Part X received or held works of art, historical treat unts required to be reported under FASB ASC	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in funcial statements that describes these item 8, to report in its revenue statement and l exhibition, education, or research in furth asures, or other similar assets for financia SC 958 relating to these items:	statement and ents that describe ther Similar A and balance sheet urtherance of public balance sheet wo herance of public 	es the ssets. t works lic rks of service,
9 Par 1a b 2 a	In Part XIII, describ balance sheet, and organization's acc till Organiza Complete if If the organization of art, historical trees service, provide in If the organization art, historical trees provide the followi (i) Revenue included If the organization the following amou Revenue included	be how the organization reports conservation d include, if applicable, the text of the footn ounting for conservation easements. Ations Maintaining Collections of f the organization answered "Yes" on Form elected, as permitted under FASB ASC 956 easures, or other similar assets held for pub Part XIII the text of the footnote to its finan elected, as permitted under FASB ASC 956 sures, or other similar assets held for public ng amounts relating to these items: ded on Form 990, Part VIII, line 1 end in Form 990, Part X received or held works of art, historical treat	Art, Historical Treasures, or Ot 990, Part IV, line 8. 8, not to report in its revenue statement a olic exhibition, education, or research in funcial statements that describes these item 8, to report in its revenue statement and I exhibition, education, or research in furth asures, or other similar assets for financia SC 958 relating to these items:	statement and ents that describe ther Similar A and balance sheet urtherance of pub hs. balance sheet wo herance of public \$ al gain, provide \$	es the ssets. t works lic rks of service,

16341109 794202 94-08976.001

26	5	
5	0 F 0 0 0	***

	dule D (Form 990) 2022 HOUSTON	VOLUNTEER ollections of Ar						6-00 Assets			_{age} 2
3	Using the organization's acquisition, accession								(00//0/		
	collection items (check all that apply):	,	,	,	U	0					
а	Public exhibition	(d 🗌	Loan or excl	hange progra	am					
b	Scholarly research				0.0						
с	Preservation for future generations										
4	Provide a description of the organization's co	llections and explai	n how th	ey further th	e organizatio	n's exem	pt purpose	e in Part	XIII.		
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma	aintained as part of t	the organ	ization's col	lection?				Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Compl	lete if the	organizatio	n answered '	'Yes" on F	orm 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for o	ontributions	s or other as	sets not in	cluded				
	on Form 990, Part X?							🗆	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing ta	able:							
									Amoun	t	
с	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f		_		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21, for e	scrow or cu	stodial acco	unt liability	y?	∟	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds. Complete i								-		
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three ye	ars back	(e) Fou	years	back
1 a	Beginning of year balance										
b	Contributions										
С	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 1g	i, column (a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment										
С		%									
	The percentages on lines 2a, 2b, and 2c show	•									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that	t are held an	id administer	ed for the			1		
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		<u> </u>
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the		wment f	unds.							
Fai	t VI Land, Buildings, and Equipm			line 11e C	aa Farm 000	Dent V III	no 10				
	Complete if the organization answered							.	() =		
	Description of property	(a) Cost or o basis (investi		(b) Cost basis			cumulated reciation	1	(d) Boo	k valu	e
1a	Land										
b	Buildings							_			
С	Leasehold improvements			51	7,106.	4	<u>21,41</u> 26,34	6.	9	5,6	90.
d	Equipment			25	7,639.	2	26,34	2.	3	1,2	97.
e	Other									_	
Tota	I . Add lines 1a through 1e. <i>(Column (d) must</i> e	qual Form 990, Part	X, colum	n (B), line 10)c.)				12	5,9	87.

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 HOUSTON VOL Part VII Investments - Other Securities. Complete if the organization answered "Yes"		AS PROGRAM, INC	76-0090652 Page 3
(a) Description of security or category (including name of security)	(b) Book value	-	ost or end-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.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Co	ost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. Complete if the organization answered "Yes"	on Form 990, Part IV, line Description	e 11d. See Form 990, Part X, line 1	15. (b) Book value
(1) OPERATING LEASE ROU ASSETS	•		251,691.
(1) OT HEATTING HEADE NOO ADDETT	5, NH1		251,051.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part >	,
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) IOLTA TRUST ACCOUNT PAYABI			2,214.
(3) CURRENT PORTION OF OPERAT	ING LEASE		153,125.
(4) LONG-TERM OPERATING LEASE			106 602
(5) LIABILITY			196,693.
(6)			
(7)			
(8)			
(9)	25.)		352,032.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 2. Liability for uncertain tax positions. In Part XIII, provide			

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

	dule D (Form 990) 2022 HOUSTON VOLUNTEER LAWYER					0090652 _{Page} 4
Par	t XI Reconciliation of Revenue per Audited Financial State		th Rev	enue per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.				
1					1	16,142,706.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	I.				
а	Net unrealized gains (losses) on investments		10	<u> </u>	-	
b	Donated services and use of facilities		12,	688,217.	-	
С	Recoveries of prior year grants				-	
d	Other (Describe in Part XIII.)	2d				10 600 015
е	Add lines 2a through 2d				2e	12,688,217.
3	Subtract line 2e from line 1				3	3,454,489.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b				_	
b	Other (Describe in Part XIII.)	4b				_
С	Add lines 4a and 4b				4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.)				5	3,454,489.
Pa	t XII Reconciliation of Expenses per Audited Financial Stat		ith Ex	penses per H	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.				
1	Total expenses and losses per audited financial statements				1	15,731,475.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	12,	688,217.		
b	Prior year adjustments	2b				
с	Other losses	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d				2e	12,688,217.
3	Subtract line 2e from line 1				3	3,043,258.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b				4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	3,043,258.
Pa	t XIII Supplemental Information.					

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

HVL	IS	EXEMP	T FRO	M FEL	ERAL	INCO	ME TA	X UND	ER SE	CTIC	DN 5	01 (C	C)(3) C	F THE	
INTE	ERNA	L REV	ENUE	CODE	("IRC	C") A	ND IS	CLAS	SIFIE	D AS	S A	PUBLI	C CHAF	ITY U	NDER
SECT	LION	509(A)(1)	AND	170(F	3)(1)	(A)(V)	I) OF	THE	IRC.	TH	IEREFO	DRE, NO	PROV	ISION
FOR	FED	ERAL	INCON	IE TAX	K HAS	BEEN	MADE	IN T	HESE	FINA	NCI	AL SI	ATEMEN	ITS.	
HVL	ACC	OUNTS	FOR	UNCEF	TAIN	TAX	POSIT	IONS,	WHEN	IT	IS	MORE	LIKELY	THAN	NOT,

THAT SUCH AN ASSET OR A LIABILITY WILL BE REALIZED. AS OF DECEMBER 31,

2022 AND 2021, MANAGEMENT BELIEVES THERE ARE NO UNCERTAIN TAX POSITIONS.

29

Schedule D	(Form <u>99</u> 0) 2022	HOUSTON VO	OLUNTEER	LAWYERS	PROGRAM,	INC	<u>76-</u> 0090652	Page 5
Part XIII	(Form 990) 2022 Supplemental Info	ormation (continued)					
							Schedule D (Form 9	2001 2022

PUBLIC DISCLOSURE COPY

SC	HEDULE J	Compensation Information	(OMB No.	1545-004	47	
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		00	00		
•	,	Compensated Employees		20	ZZ	-	
-		Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.	(Open to	Publ	ic	
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe			
Nam	e of the organizatior		Employer iden	tificati	on nur	nber	
		HOUSTON VOLUNTEER LAWYERS PROGRAM, INC	76-009	9065	2		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form §	3 90,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c		nal use				
	Travel for com						
		ation and gross-up payments Health or social club dues or initiation fees					
	Discretionary s	spending account Personal services (such as maid, chauffeur	r, chef)				
b	-	on line 1a are checked, did the organization follow a written policy regarding payment or					
•		rovision of all of the expenses described above? If "No," complete Part III to explain		1b			
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
3	Indicate which if or	ny, of the following the organization used to establish the compensation of the organization's					
U		ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to				
		ation of the CEO/Executive Director, but explain in Part III.	1110				
	X Compensation						
		ompensation consultant Compensation survey or study					
	·	ther organizations X Approval by the board or compensation of	ommittee				
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a re						
а	Receive a severanc	e payment or change-of-control payment?		4a		X	
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X	
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X	
	If "Yes" to any of lin	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	า				
	contingent on the re						
				<u>5</u> a		X	
b		ation?		5b		X	
_		r 5b, describe in Part III.					
6		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1				
	contingent on the n					v	
				6a		X	
b		ation?		6b			
7		r 6b, describe in Part III.					
1		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		-		x	
0		es 5 and 6? If "Yes," describe in Part III		7			
8							
9	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in						
9	Regulations section			9			
I HA		53.4958-6(c)? eduction Act Notice, see the Instructions for Form 990.	Schedule		n 990)	2022	
			201104410				

Schedule J (Form 990) 2022 HOUSTON VOLUNTEER LAWYERS PROGRAM, INC 76-0090652

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ANNE CHANDLER	(i)	153,352.	0.	0.	7,722.	8,511.	169,585.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						I	

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2022

SCHEDULE O (Form 990) Complete to provide information for responses to specific questions on

HOUSTON VOLUNTEER LAWYERS PROGRAM,

Department of the Treasury Internal Revenue Service Name of the organization 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.



76-0090652

INC

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

GALVESTON, LIBERTY, MONTGOMERY, AND WALLER COUNTIES.

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

A MAJORITY OF THE ORGANIZATION'S BOARD OF DIRECTORS IS APPOINTED BY THE

PRESIDENT OF THE HOUSTON BAR ASSOCIATION.

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

THE 990 IS PESENTED TO THE EXECUTIVE COMMITTEE FOR REVIEW AND DISCUSSION

AND THEN PROVIDED TO THE ENTIRE BOARD PRIOR TO FILING.

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

THE ORGANIZATION'S OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES ARE

REQUIRED TO ANNUALLY DISCLOSE ANY INTERESTS THAT COULD GIVE RISE TO

CONFLICTS. THE BOARD OF DIRECTORS THEN REVIEWS THE INFORMATION DISCLOSED TO

DETERMINE IF A CONFLICT OF INTEREST EXISTS.

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

THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS - INDEPENDENT OF THE

ORGANIZATION'S EXECUTIVE DIRECTOR - RECOMENDS COMPENSATION FOR THE

EXECUTIVE DIRECTOR, AND THE ENTIRE BOARD THEN VOTES ON THE RECOMMENDATION.

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

THE ORGANIZATION MAKES 2019-2021 FORM 990 AVAILABLE ON THE ORGANIZATION'S

WEBSITE. ORGANIZATIONS'S DOCUMENTS ARE AVAILABLE THROUGH WRITTEN REQUEST TO

THE ORGANIZATION.

16341109 794202 94-08976.001

SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

OMB No. 1545-0047

2022 Open to Public Inspection

Employer identification number 76-0090652

Department of the Treasury Internal Revenue Service Name of the organization

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

HOUSTON VOLUNTEER LAWYERS PROGRAM, INC

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
HOUSTON BAR ASSOCIATION - 74-0692895							
1111 BAGBY STREET FLB 300	PROFESSIONAL ORGANIZATION						
HOUSTON, TX 77002	FOR ATTORNEYS	TEXAS	501(C)(6)				х
HOUSTON BAR FOUNDATION - 76-0029594							
1111 BAGBY STREET FLB 300					HOUSTON BAR		
HOUSTON, TX 77002	FUTHERANCE OF JUSTICE	TEXAS	501(C)(3)	LINE 7	ASSOCIATION		х
HOUSTON LAWYER REFERRAL SERVICE - 74-1872485							
1001 FANNIN SUITE 1370	REFER GENERAL PUBLIC TO				HOUSTON BAR		
HOUSTON, TX 77002	LAWYERS	TEXAS	501(C)(6)		ASSOCIATION		х
HOUSTON BAR ASSOC ALT DISPUTE RESOL CTR -							
74-2107776, 49 SAN JACINTO SUITE 220,	CONFLICT RESOLUTION FOR				HOUSTON BAR		
HOUSTON, TX 77002	THE POOR	TEXAS	501(C)(3)	LINE 7	ASSOCIATION		х

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

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022 HOUSTON VOLUNTEER LAWYERS PROGRAM, INC

76-0090652 Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)		j)	(k)		
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign Literation Controlling (state or foreign Literation Controlling entity (related, unr excluded from	Direct controlling entity	domicile (state or foreign discussion of the state of the	Predominant income (related, unrelated, excluded from tax under sections 512-514)	nt income Share of total Share of Inrelated, income end-of-year m tax under assets		dominant income Share of total Sl lated, unrelated, income end ded from tax under a	Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule		eral or aging tner?	Percentage ownership
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	No			
	1													
	1													
										+				
	1													
	4													
	4													

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	(i) ction (b)(13) rolled tity?
		country)						Yes	No
									<u> </u>
								$\left \right $	<u> </u>

Schedule R (Form 990) 2022 HOUSTON VOLUNTEER LAWYERS PROGRAM, INC

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	X	
	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
g		1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
	Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
	Sharing of paid employees with related organization(s)	10	X	
р	Reimbursement paid to related organization(s) for expenses	1p		Х
q	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) HOUSTON BAR FOUNDATION	С	1,100,000.	CASH
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			

Schedule R (Form 990) 2022 HOUSTON VOLUNTEER LAWYERS PROGRAM, INC

76-0090652 Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners se 501(c)(3) orgs.? Yes No	(g) Share of end-of-year assets	(h) Disproj tiona allocatio Yes I	oor- te ns? of S No (F	(i) ode V-UBI unt in box 20 Schedule K-1 orm 1065)	(j) General o managing partner? Yes NO	(k) Percentage ownership

Schedule R (Form 990) 2022

Schedule R	(Form 990) 2022	HOUSTON	VOLUNTEER	LAWYERS	PROGRAM,	INC	76-0090652	Page 5
Part VII	Supplemental Infor	mation			-			0
	Provide additional inform		es to questions on S	Schedule R. See	instructions.			
232165 09-14-2	22			20			Schedule R (Form 9	90) 2022

16341109 794202 94-08976.001