Kraft & Company, PLLC 114 29th Avenue South Nashville, TN 37212

> National Council of Jewish Women, Nashville Section 801 Percy Warner Blvd. Nashville, TN 37205-4128

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November 14, 2023

National Council of Jewish Women, Nashville Section 801 Percy Warner Blvd. Nashville, TN 37205-4128

National Council of Jewish Women, Nashville Section:

Enclosed is the organization's 2022 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2023.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Sincerely,

Kraft & Company, PLLC

Q	879-TE		IR	S e-file S for a T	ignatur av Exe	e Author	izatio r	า	F	OM	B No. 1545-0047
Form O	079-12	Fer colorder w		iscal year beginning					··· 23		
		For calendar ye	ear 2022, or t	-		eep for your red			, 20 <u>2</u> J		2022
	nt of the Treasury evenue Service		Go	to www.irs.gov				ı.			
Name of		nal Coun		of Jewish					EIN or SSN		
		ille Sec			-				62-60	650	87
Name ar	nd title of officer or p	oerson subject to	tax K	imberly I	apidus						
				reasurer							
Part	I Type of	Return and	d Retur	n Informatior	1						
Form 53 or 10a l whicher	below, and the an	er dollars and on that li	cents. For ne for the	all other forms, or return being file	enter whole d d with this for	ollars only. If you m was blank, the	u check the en leave line	box on e 1b, 2 t	line 1a, 2a, 3 5, 3b, 4b, 5b,	3a, 4a, 6b, 7b	5a, 6a, 7a, 8a, 9a,
1a	Form 990 check	here	Хь	Total revenue.	if any (Form	990. Part VIII. co	olumn (A), li	ne 12)		1b	118,585.
2a	Form 990-EZ ch										
3a	Form 1120-POL			Total tax (Forn							
4a	Form 990-PF ch			Tax based on							
5a	Form 8868 chec			Balance due (
6a	Form 990-T che			Total tax (Form							
7a	Form 4720 chec			Total tax (Forn							
8a	Form 5227 chec			FMV of assets							
9a	Form 5330 chec		b	Tax due (Form	5330, Part II,	line 19)					
10a	Form 8038-CP			Amount of cre						10b	
Part	II Declara	ation and Si	gnature	e Authorizatio	on of Offic	er or Person	Subject	to Ta	x		
Under p	penalties of perjur	y, I declare that	t 🚺 la	m an officer of th	e above entit	y or 📃 I am a	a person su	bject to	tax with resp	ect to (name
financia later tha paymer persona	the financial inst al institution to de an 2 business day at of taxes to rece al identification nu	bit the entry to rs prior to the p ive confidential imber (PIN) as i	this acco ayment (s l informati	unt. To revoke a settlement) date. on necessary to	payment, I m I also authoriz answer inquir	ust contact the l ze the financial in ies and resolve i	J.S. Treasu nstitutions i issues relat	ry Finan involved ed to the	cial Agent at in the proces e payment. I	1-888- ssing o have se	353-4537 no f the electronic elected a
	eck one box onl										65087
	L l authorize <u>A</u>	AFI & C	.OMPAI		firm nama			t	o enter my P		r five numbers, but
				ERU	firm name						not enter all zeros
	with a state ag on the return's As an officer o return. If I have	ency(ies) regula disclosure con r person subject e indicated with	ating char isent scre ct to tax w in this ret	lectronically filed ities as part of th en. vith respect to the urn that a copy o PIN on the returr	e IRS Fed/Sta e entity, I will f the return is	ate program, I al enter my PIN as s being filed with	so authoriz my signatu a state age	e the afo ire on th	e tax year 20	I ERO t 22 elec	o enter my PIN ctronically filed
Ciarrat			ont o r my		i a diaciosure	Sonsent Streett.			Date		
Part	of officer or person sub Certific	ation and A	uthenti	cation					Dale		
ERO's	EFIN/PIN. Enter	our six-digit ele	ectronic fi	ling identification	1						
	r (EFIN) followed b	-		-			221796 Do not enter				
submitt	that the above nu ing this return in a ss Returns.	•	-				•				
ERO's si	gnature						Date				
			ED	O Must Data	in Thia Eas	m Soo Inci	ruotiona				
		Do N		O Must Reta nit This Form					So		
										-	0070 TE (0000)

 $\mathsf{LHA} \ \ \, \text{For Privacy Act and Paperwork Reduction Act Notice, see instructions.}$

	-	~ ~	Return of Organization Exempt Fi	rom Ir	ncome Tax	OMB No. 1545-0047				
For	_m g	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C			a 2022				
			Do not enter social security numbers on this form as i		Open to Public					
	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.									
			ar year, or tax year beginning $ { m JUL}1,2022$ and e	nding J	UN 30, 2023					
B	Check if	C Name of	organization		D Employer identific	ation number				
	pplicab		onal Council of Jewish Women,							
	Addre		ville Section							
	Name	pe Doing bu	usiness as		62-606508	37				
	Initial returr	Number	and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number					
	Final returr		Percy Warner Blvd.		(615) 491	L-3362				
	termi ated	City or to	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	127,708.				
	Amer returr		ville, TN 37205-4128		H(a) Is this a group re	turn				
	Appli tion	F Name a	nd address of principal officer: Kimberly Lapidus		for subordinates?	? Yes X No				
	pend	same	as C above		H(b) Are all subordinates inc	cluded? Yes No				
1	Tax-ex	empt status:		527	If "No," attach a l	list. See instructions				
	Nebsi		ncjwnashville.org		H(c) Group exemption					
			X Corporation Trust Association Other	L Year of	of formation: 1901 M	I State of legal domicile: ${f TN}$				
Pa	art I	Summary		-						
Ø	1		e the organization's mission or most significant activities: Relig			zation				
Governance		providi	ng support for educational and comm	unity	services.					
srne	2	Check this bo	if the organization discontinued its operations or dispose	d of more	than 25% of its net ass					
0 Vě	3					17				
	4		ependent voting members of the governing body (Part VI, line 1b) \dots			17				
es	5			1						
iviti	6		of volunteers (estimate if necessary)			0				
Activities &			d 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>		0.				
					Prior Year	Current Year				
e	8		and grants (Part VIII, line 1h)	45,898.	52,879.					
Revenue	9	0	ce revenue (Part VIII, line 2g)		0.	0.				
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)		122,400.	74,829.				
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<u>-3,040.</u> 165,258.	-9,123.				
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		25,129.	<u>118,585.</u> 38,237.				
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		25,129.	<u> </u>				
	14		o or for members (Part IX, column (A), line 4)	41,198.	38,579.					
ses	15		compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.				
en;	108		undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25)	0.	0.	0.				
Expense	17		• • • • • • • • • • • • • • • • • • •		23,096.	17,057.				
	18					93,873.				
	19				75,835.	24,712.				
۲.		i levende leas	expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year				
Net Assets or	20	Total assets (F	Part X, line 16)		2,226,238.	2,399,366.				
ASSE	20		(Part X, line 26)		0.	0.				
Net,	22		fund balances. Subtract line 21 from line 20		2,226,238.	2,399,366.				
	art II	Signature		····· I	, , ,	, ,				
Und	er pen	-	declare that I have examined this return, including accompanying schedules a	and stateme	nts, and to the best of mv	knowledge and belief, it is				
			Declaration of preparer (other than officer) is based on all information of whic							
		1	••• • • • •							

	Signature of officer			Date							
Sign				Dale							
Here	a Kimberly Lapidus, Treasurer										
	Type or print name and title										
	Print/Type preparer's name	Preparer's signature	Date	Check X	PTIN						
Paid	Rachel K. Johnson			self-employed	P01559498						
Preparer	Firm's name Kraft & Company,	PLLC		Firm's EIN 62-	1002003						
Use Only	Firm's address 114 29th Avenue So	outh									
	Nashville, TN 37212 Phone no.(615) 244-399										
May the II	RS discuss this return with the preparer shown abo	ve? See instructions			X Yes No						

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	National Council of Jewish Women,								
	990 (2022) Nashville Section 62-6065087 Page 2								
Pa	t III Statement of Program Service Accomplishments								
	Check if Schedule O contains a response or note to any line in this Part III								
1	Briefly describe the organization's mission:								
	Religious based organization providing support for educational and community services.								
	community services.								
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?								
	prior Form 990 or 990-EZ?								
2									
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No								
	If "Yes," describe these changes on Schedule O.								
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by 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								
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$38,237. including grants of \$38,237.) (Revenue \$)								
4a	The Nashville section of the national council of Jewish women is								
	volunteer organization, inspired by Jewish values. It works through								
	various programs of research, education, advocacy, and community								
	service to improve the quality of life for women, children, and								
	families; and strives to ensure individual rights and freedoms for all.								
	These goals are achieved by providing financial and volunteering								
	support to various external associations, which are directly involved								
	in the programs. In addition, the senior friends and the snack box								
	programs are administered directly. Senior friends is an outreach to								
	senior citizens in the local Jewish community through visits and								
	holiday gifts. The snack box program provides snacks to children and								
	their attendees.								
4b									
ты	(Code:) (Expenses \$ including grants of \$) (Revenue \$) (Revenue \$) (Scholarship/loan fund: offers interest free loans to worthy students,								
	who otherwise may not be able to complete their education. Funding is								
	from public contributions, allocations from the general operations, and								
	repayments by past recipients. The loans are administered by the								
	scholarship loan committee. A recipient may receive up to \$4,000 per								
	year. Currently there are 36 students who have received loans and are								
	continuing to repay the balance.								
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)								
4d	Other program services (Describe on Schedule O.)								
	(Expenses \$ including grants of \$) (Revenue \$)								
4e	Total program service expenses 38,237.								
-10									

National Council of Jewish Women,Form 990 (2022)Nashville SectionPart IVChecklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
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			v
	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,	44-		x
b	Part VI	11a		
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11b	х	
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	arr	- 23	
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
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		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19		X X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		<u> </u>
b 01	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	х	
	domostio government of that it, column (n), internal inters, complete Schedule I, Parts Faho II	4 1	~~	I

National Council of Jewish Women,

Pa	rt IV Checklist of Required Schedules (continued)						
			Yes	No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on						
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current						
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
		23		x			
.	Schedule J	23					
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			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>			
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease						
	any tax-exempt bonds?	24c		<u> </u>			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		 			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit						
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and						
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete						
	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,						
21							
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x			
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27					
28							
	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			
b	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						
	"Yes," complete Schedule L, Part IV	28c		X			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation						
	contributions? If "Yes," complete Schedule M	30		X			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete						
	Schedule N, Part II	32		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						
U T	Part V, line 1	34		x			
35 2	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X			
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		<u> </u>			
a		054					
	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?			v			
	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			37			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X			
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?						
	Note: All Form 990 filers are required to complete Schedule O	38	Х	L			
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>					
			Yes	No			
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0						
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable						

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

Nashville Section

Form 990 (2022)

wish Women,

Form	990 (2022) Nashville Section 62-6065	087	Pa	age 5					
Pa				U					
			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 1								
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?								
	Ba Did the organization have unrelated business gross income of \$1,000 or more during the year?								
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4a		х					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b	If "Yes," enter the name of the foreign country								
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		v					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b							
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>							
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		х					
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0a		- 23					
D	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
, 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								
	to file Form 8282?	7c		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
е									
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?								
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
a	Initiation fees and capital contributions included on Part VIII, line 12 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 h	Gross income from members or shareholders 11a	1							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
с	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, 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?	17							
	If "Yes," complete Form 6069.								

National Council of Jewish Women,

Form 990 (2022) Nashville Section

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
-	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
•	of officers, directors, trustees, or key employees to a management company or other person?	3		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		6		x
7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	<u> </u>		
74	more members of the governing body?	7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	74		
D.		7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10		
		8a	Х	
b		8b	X	
9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00		
5	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.)	5		
	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	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	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		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
-	on Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		x
15	Did the process for determining compensation of the following persons include a review and approval by 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			
	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			
17	List the states with which a copy of this Form 990 is required to be filed $\{TN}$			
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) a	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	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	financ	ial	
	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			
	Kimberly Lapidus - 615-497-0566			
	801 Percy Warner Blvd., Nashville, TN 37205-4128			

	National Council of Jewish Women,		
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest	Compensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		🗌
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
•	ete this table for all persons required to be listed. Report compensation for the calendar year endi	•	-

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B) (C))		(D)	(E)	(F)		
Name and title	Average	(do	Position (do not check more the				one	Reportable	Reportable	Estimated
	hours per	box	ox, unless person is bot			s both	n an	compensation	compensation	amount of
	week					1/		from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 1120)	and related
	below	idual 1	In stitutio nal trustee	5	Key employee	Highest compensated employee	er			organizations
	line)	Indiv	Instit	Officer	Keye	High	Former			-
(1) April Nemer	2.00									
VP Projects		Х		Х				0.	0.	0.
(2) Erin Coleman	2.00									
President		Х		Х				0.	0.	0.
(3) Felicia Abramson	2.00									
VP Membership		Х		Х				0.	0.	0.
(4) Harriet Workman	2.00									
VP Advocacy		Х		Х				0.	0.	0.
(5) Hayley Kupin	2.00									
VP Projects		Х		Х				0.	0.	0.
(6) Julie Fortune	2.00									
Secretary		Х		Х				0.	0.	0.
(7) Katie Wayne	2.00									
VP Membership		Х		Х				0.	0.	0.
(8) Kimberly Lapidus	4.00									
Treasurer		Х		Х				0.	0.	0.
(9) La Quita Martin	2.00									
VP Advocacy		Х		X				0.	0.	0.
(10) Lauren Wachsman	2.00									
VP Programming		Х		X				0.	0.	0.
(11) Marci Kleinrock	2.00									
VP Programming		Х		X				0.	0.	0.
(12) Mollie Perry	2.00									
VP Programming		Х		X				0.	0.	0.
(13) Tracey Leff	2.00									
VP Programming		Х		X				0.	0.	0.
(14) Sherri Rosenberg	2.00									
VP Advocacy		Х		X				0.	0.	0.
(15) Stephanie Korn	2.00							_		
VP Programming		х		X				0.	0.	0.
(16) Stephanie Kirschner	4.00							_		
President		х		X				0.	0.	0.
(17) Liza Star	2.00							_	_	
Treasurer		Х						0.	0.	0.

National	Council	of	Jewish	Women,
Nashville	e Section	n		

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Pai	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)		
	(A) Name and title	(B) Average hours per week	box	not cl , unles	heck i ss per	ition more rson is) than c s both pr/trust	an	(D) Reportable compensation	(E) Reportable compensation	(F) Estima amoun	t of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	othe compens from t organiza and rela organiza	ation he ation ated
(18)	Amy Smith	2.00	-		0	×	1 0					
<u>Imme</u>	ediate Past President		X						0.	0		0.
	Subtotal Total from continuation sheets to Part VI Total (add lines 1b and 1c)								0.0.0.	0 0 0	•	0.0.0.
2	Total number of individuals (including but n compensation from the organization	ot limited to the	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	Yes	0
3	Did the organization list any former officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s	uch individual									3	X
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? If "Yes,	" со	mple	ete S	Sche	edule	J f	or such individual		4	X
<u> </u>	rendered to the organization? If "Yes." con tion B. Independent Contractors	nplete Schedule	e J fo	or su	ıch ı	oers	on .				5	X
1	Complete this table for your five highest co the organization. Report compensation for										ation from	
	(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices	(C) Compensati	on
2	Total number of independent contractors (i \$100,000 of compensation from the organi	•	ot lin	nitec	l to i	thos C		ted	above) who received mo	ore than		

 National Council of Jewish Women,

 Form 990 (2022)
 Nashville Section

 Part VIII
 Statement of Bevenue

Ιa		,	Check if Schedule O contains	a response (or note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt	(C)	(D) Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts	1	cFundraising events1c47,52dRelated organizations1deGovernment grants (contributions)1efAll other contributions, gifts, grants, and		4,670. 47,514. 695.	52,879.				
0 0					Business Code	52,075.			
Program Service Revenue	2		All other program service revenue						
			Total. Add lines 2a-2f						
	3 4 5		Investment income (including divid other similar amounts) Income from investment of tax-exe Royalties	mpt bond pi	roceeds	40,536.			40,536.
		a b		(i) Real	(ii) Personal				
		d							
	7	а		Securities	(ii) Other				
Revenue		с	Less: cost or other basisand sales expensesGain or (loss)7c	4,293. 0. 4,293.					
		d	Net gain or (loss)	·····		34,293.			34,293.
Other Re	8		Gross income from fundraising events including \$ 47,514 contributions reported on line 1c). Part IV, line 18 Less: direct expenses	•_ of See 8a	0. 9,123.				
			Net income or (loss) from fundraisi			-9,123.			-9,123.
	9	а	Gross income from gaming activitie Part IV, line 19 Less: direct expenses	es. See 9a					
			Net income or (loss) from gaming a						
	10	a b	Gross sales of inventory, less return and allowances Less: cost of goods sold						
		С	Net income or (loss) from sales of i	nventory	Business Code				
sn	44	а			Dusiness Code				
Miscellaneous Revenue		a b							
ella sver		c							
lisc			All other revenue						
2			Total. Add lines 11a-11d						
	12		Total revenue. See instructions			118,585.	0.	0.	65,706.

National Council of Jewish Women, Nashville Section

Form	1 990 (2022) Nashville Se rt IX Statement of Functional Expense	ction	.511 WOMEIL,	62-60	65087 Page 10
			r organizations must com	nolete column (A)	
Secti	ion 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a respons			npiele column (A).	
	not include amounts reported on lines 6b.	(A)	(B)	(C)	(D)
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	20 227	20 227		
_	and domestic governments. See Part IV, line 21	38,237.	38,237.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	37,538.		37,538.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,041.		1,041.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	3,593.		3,593.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	409.		409.	
13	Office expenses	6,487.		6,487.	
14	Information technology				
15	Royalties				
16	Occupancy	2,587.		2,587.	
17	Travel				
18	Payments of travel or entertainment expenses				
. 2	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	904.		904.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
-	amount, list line 24e expenses on Schedule 0.) Dues Expense	3,077.		3,077.	
a L		5,077•		5,077.	
b					
C					
d					
	All other expenses	02 072	20 727	55 626	
25	Total functional expenses. Add lines 1 through 24e	93,873.	38,237.	55,636.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Check here

if following SOP 98-2 (ASC 958-720)

Form 990 (2022	2)
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National Council of Jewish Women, Nashville Section

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	rt X				
		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	Cash - non-interest-bearing	49,753.	1	37,030
	2	Savings and temporary cash investments	156,017.	2	120,771
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disgualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
È	9	Prepaid expenses and deferred charges		9	
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	Ь	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	1,744,669.	12	1,961,98
	13	Investments - program-related. See Part IV, line 11		13	2,302,30
	14			14	
	15	Intangible assets	275,799.	15	279,58
	16	Other assets. See Part IV, line 11	2,226,238.	16	2,399,36
	17	Total assets. Add lines 1 through 15 (must equal line 33) Accounts payable and accrued expenses	2,220,230:	17	2,355,30
	18			18	
	19	Grants payable		19	
	20	Deferred revenue		20	
	20	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		20	
				21	
	22	Loans and other payables to any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		00	
		controlled entity or family member of any of these persons		22	
	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			
	00	of Schedule D	0.	25	
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X	0.	26	
		Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			
	07		798,521.	07	798,52
	27	Net assets without donor restrictions	1,427,717.	27	1,600,84
	28	Net assets with donor restrictions	1,427,717.	28	1,000,04
		Organizations that do not follow FASB ASC 958, check here			
	00	and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds	2 226 220	31	2 200 20
	32	Total net assets or fund balances	2,226,238.	32	2,399,360
	33	Total liabilities and net assets/fund balances	2,226,238.	33	2,399,360

Form	National Council of Jewish Women, Nashville Section	62-606	5087	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	118		
2	Total expenses (must equal Part IX, column (A), line 25)	2			73.
3	Revenue less expenses. Subtract line 2 from line 1	3			12.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,226		
5	Net unrealized gains (losses) on investments	5	148	,41	16.
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	2,399	, 30	56.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	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		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u> .	. 3b		

Form 990 (2022)

SCHEDULE A (Form 990)				rity Status an					OMB No. 1545-0047	
-		-	Co	omplete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.						2022
		f the Treasury nue Service		Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.						Open to Public Inspection
		the organization			il of Jewish			ormation.	Employer	identification number
				ville Sect		Womer	-,			2-6065087
Pa	art I	Reason	or Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	s.	
The	organ	ization is not a	private found	ation because it is: (For lines 1 through 12, cl	neck only o	one box.)			
1		A church, cor	vention of ch	urches, or associatio	on of churches described	in sectio	n 170(b)(1	I)(A)(i).		
2		A school dese	cribed in sect	ion 170(b)(1)(A)(ii).(Attach Schedule E (Form	n 990).)				
3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical res	earch 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 state:									
5					llege or university owned	or operate	ed by a go	overnmental u	nit describe	ed in
_		-		Complete Part II.)						
6			-	-	nental unit described in					
7		-		-	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	oublic described in
0		-		omplete Part II.)	(1)(A)(vi) (Complete Ded	• 11 \				
8 9				.,	(1)(A)(vi). (Complete Part in section 170(b)(1)(A)(i	,	nd in coniu	unction with a	land grant	collogo
9		-	-	-	ulture (see instructions).		-		-	-
		university:	n a nornand g	grant conege of agric			ame, ony	, and state of	the conege	
10	X		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	nrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
		See section &	509(a)(2). (Co	mplete Part III.)						
11		An organizati	on organized a	and operated exclusi	ively to test for public saf	ety. See	section 50	09(a)(4).		
12		An organizati	on organized a	and operated exclusi	ively for the benefit of, to	perform t	ne functio	ns of, or to ca	rry out the	purposes of one or
		more publicly	supported or	ganizations describe	d in section 509(a)(1) o	r section !	509(a)(2).	See section	509(a)(3). (Check the box on
		-	-		f supporting organizatior				-	
â				-	upervised, or controlled	• • •	-			
			0		gularly appoint or elect a	majority o	f the direc	tors or truste	es of the su	upporting
L		¬ -		complete Part IV, Se		ion with it	- ou on outo	d organizatio	n(a) hy hay	in a
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e	•	Check this	box if the orga	anization received a	written determination from	m the IRS	that it is a	Туре I, Туре	II, Type III	
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1		er the number of		•						
		vide the followi i) Name of suppo		n about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount o	f monetan/	(vi) Amount of other
	,	organization		(1) 211	(described on lines 1-10	in your governi Yes	ng document? No	support (see ir	-	support (see instructions)
		-			above (see instructions))	103			-	
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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(v) (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 failed to qualify under Part III. If the organization failed to qualify under Part III. Section A. Public Support (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 1 Gits grants, contributions, and membership fees received. (Do not include any 'unusual grants') (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 3 The value of services or facilities furnished by a governmental unit to the organization without charge (c) 2020 (d) 2021 (e) 2022 (f) Total 4 Total. Add lines 1 through 3 (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total Section B. Total Support (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 4 Total. Add lines 1 through 3 (a) 2018 (b) 2019 (c) 2020 (d) 2021 (f) Total Section B. Total Support (a) 2018 (b) 2019 (c) 2020 (f) Total (f) Total A dicens income from interest, dividends, payments received	Sch		ational C ashville		Jewish W	omen,	62-606	5087 Page 2
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Schedule A (Form 990) 2022 Nashville Section Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support Calendar 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 36,486. 42,417. 41,295. 45,898. 52,880. 218,976. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 5,160. 5,160. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization'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 224,136. 41,646. 42,417. 41,295. 45,898. 52,880. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disgualified 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 0 224,136. Public support. (Subtract line 7c from line 6.) Section B. Total Support (b) 2019 (c) 2020 Calendar year (or fiscal year beginning in) (a) 2018 (d) 2021 (e) 2022 (f) Total 9 Amounts from line 6 41,646. 42,417. 41,295. 45,898. 224,136. 52,880. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 90,976. 30,564. 29,753. 32,161. 40,535. 223,989. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 90,976. 30,564. 29,753. 32,161. 40,535. 223,989. 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.) 72,981. 132,622. 71,048. 78,059. 93,415. 448,125. **13** Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** Section C. Computation of Public Support Percentage 50.02 % Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 15 45.17 Public support percentage from 2021 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 49.98 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f) 17 % 54.83 18 Investment income percentage from 2021 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization gualifies as a publicly supported organization Χ 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *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.)

1

Yes

No

National Council of Jewish Women,

Sche	edule A (Form 990) 2022 Nashville Section	62-606508	7 Ра	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 effectively operated, supervised, or controlled the organization's activities. If the organization had more than one sup organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amount of the organization.</i>	officers, ;) pported		
	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.	2		
Sec	ction 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			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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			
3	the organization maintained a close and continuous working relationship with the supported organization(s). 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	2		

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.

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	that the organization used to	satisfy the Integral Part	Test during the vear	(see instructions)

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

с		The organization supported a	governmental entity.	Describe in Part VI how	vou supported a governmer	tal entity (see instructions).
---	--	------------------------------	----------------------	-------------------------	---------------------------	--------------------------------

- 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.*

З

2a

2b

3a

Yes No

National Council of Jewish Women, Nashville Section 62-6065087 Page 6 Schedule A (Form 990) 2022 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 Enter 0.85 of line 1. 2 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 3 Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7

instructions).

Schedule A (Form 990) 2022

National	Council	of	Jewish	Women,
				-

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Sche Par	Jule A (Form 990) 2022 Nashville Sec t V Type III Non-Functionally Integrated 509(nizations (continu		2-6065087 Page 7
	on D - Distributions		nizations (continu	<u>Jea)</u>	Current Year
1	Amounts paid to supported organizations to accomplish exer	mot nurnoses		1	Ourient real
	Amounts paid to supported organizations to accomposition excl			-	
-	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets		, 	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.	5		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				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2022 distributable amount				
<u> i </u>	Carryover from 2017 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	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.				
	Breakdown of line 7:				
<u>a</u>	Excess from 2018				
	Excess from 2019				
C	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

		National	Council of	Jowiah	Women	
Schedule A	(Form 990) 2022	Nashville	Section	UEWISH	women,	62-6065087 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1,	nation. Provide t 2, 3b, 3c, 4b, 4c, 5 ines 2 and 3; Part I	the explanations req 5a, 6, 9a, 9b, 9c, 11a V, Section E, lines 10	i, 11b, and 11c c, 2a, 2b, 3a, ai	; Part IV, Section B, line nd 3b; Part V, line 1; Pa	or 17b; Part III, line 12; s 1 and 2; Part IV, Section C, rt V, Section B, line 1e; Part V,
	(See instructions.)			•		

90	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-0047					
	n 990)		2022							
			, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. .ttach to Form 990.		Open to Public					
	ment of the Treasury I Revenue Service	Go to www.irs.gov/Form99	0 for instructions and the latest information		Inspection					
Nam	ame of the organization National Council of Jewish Women, Employer Nashville Section 6									
Pa	vart I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Con									
		n answered "Yes" on Form 990, Part IV, lin								
			(a) Donor advised funds	(b) Fun	ds and other accounts					
1	Total number at er	nd of year								
2	Aggregate value of	f contributions to (during year)								
3	3 Aggregate value of grants from (during year)									
4		t end of year								
5	-		writing that the assets held in donor advised fu							
			exclusive legal control?		Yes No					
6	•		dvisors in writing that grant funds can be used	•						
			r donor advisor, or for any other purpose confe	-						
Pa			ganization answered "Yes" on Form 990, Part							
1		servation easements held by the organization		iv, in e 7.						
•		of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·	storically	important land area					
		f natural habitat	Preservation of a ce	-						
		of open space								
2			ied conservation contribution in the form of a	conservat	tion easement on the last					
	day of the tax year				Held at the End of the Tax Year					
а	Total number of co	onservation easements		2a						
b										
с	Number of conserv	vation easements on a certified historic stru	ucture included in (a)	. 2c						
d	Number of conserv	vation easements included in (c) acquired a	after July 25,2006, and not on a							
	historic structure listed in the National Register									
3	Number of conserv		eased, extinguished, or terminated by the orga	anization	during the tax					
4		where property subject to conservation easies	sement is located							
5		tion have a written policy regarding the per								
		orcement of the conservation easements it			Yes No					
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	tion ease	ments during the year					
7	Amount of expens	 es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	easement	ts during the year					
8	Does each conserv	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)	B)(i)						
	and section 170(h)	(4)(B)(ii)?			Yes No					
9	In Part XIII, describ	be how the organization reports conservation	on easements in its revenue and expense state	ement an	d					
			note to the organization's financial statements	that desc	ribes the					
Dai	organization's according termination of the second	ounting for conservation easements.	Art, Historical Treasures, or Other	Simila	r Accote					
Fai		the organization answered "Yes" on Form		Simila	A33613.					
10			8, not to report in its revenue statement and b		aat warka					
Id	•		blic exhibition, education, or research in furthe							
			ncial statements that describes these items.		JUDIIC					
b			8, to report in its revenue statement and balar	ce sheet	works of					
2	-		exhibition, education, or research in furtherar							
		ng amounts relating to these items:		oo or par						
	-			:	\$					
					\$					
2	.,		asures, or other similar assets for financial gair							
-		unts required to be reported under FASB A		,						
а	-				\$					
					\$					
		eduction Act Notice, see the Instructions			Schedule D (Form 990) 2022					

	1 1 1	Council d	of Jewisł	n Women,		_			
Sche	dule D (Form 990) 2022 Nashvill	e Section			011	6	2 - 60	65087	Page 2
	t III Organizations Maintaining Co							(contin	ued)
3	Using the organization's acquisition, accessio	n, and other records	s, check any of t	he following that r	nake signi	ficant us	se of its		
	collection items (check all that apply):								
а	Public exhibition	d		exchange progran	n				
b	Scholarly research	e	Other						
С	Preservation for future generations								
4	Provide a description of the organization's col	•		•	•	· ·	e in Part	XIII.	
5	During the year, did the organization solicit or			-				7	
Der	to be sold to raise funds rather than to be mai							Yes	No
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Part		ete if the organiz	ation answered "Y	es" on Fo	rm 990,	Part IV, I	ine 9, or	
19	Is the organization an agent, trustee, custodia		iany for contribut	ions or other asse	ts not incl	uded			
ia	on Form 990, Part X?		-					Yes	No
h	If "Yes," explain the arrangement in Part XIII a						∟	_ 165	
U			iowing table.					Amount	
•	Beginning balance					1c		, ano and	
						1d			
	Additions during the year					1e			
e f	Distributions during the year					1f			
20	Ending balance Did the organization include an amount on Fo							Yes	No
	If "Yes," explain the arrangement in Part XIII.						L		
Par							<u></u>		
		(a) Current year	(b) Prior year			Three ye	ars back	(e) Four	years back
1a	Beginning of year balance	((-,	(-,	(,			(-)	<u>,</u>
	Contributions								
0	Net investment earnings, gains, and losses								
с А	Grants or scholarships								
	Other expenditures for facilities								
e									
	and programs								
	Administrative expenses								
g	End of year balance Provide the estimated percentage of the curre		line 1 a colum						
2	1 0		(0)	r (a)) neid as.					
a L	Board designated or quasi-endowment	%	_%						
u o	Permanent endowment								
С	Term endowment9								
2-	The percentages on lines 2a, 2b, and 2c shou Are there endowment funds not in the posses	-	tion that are had	d and administers	d for the				
38	· · ·	sion of the organiza	llion that are ner	and administere	a for the			Г	Yes No
	organization by:								
	(i) Unrelated organizations							3a(i)	
h	(ii) Related organizations							3a(ii)	
U A	If "Yes" on line 3a(ii), are the related organizat			н?				3b	
Par	Describe in Part XIII the intended uses of the or t VI Land, Buildings, and Equipme	endovent.	wittent lunds.						
	Complete if the organization answered		. Part IV. line 11	a. See Form 990. I	Part X. line	e 10.			
	Description of property	(a) Cost or o basis (investn	ther (b) C	Cost or other sis (other)	(c) Accu		k	(d) Book	value
	Land			(0.1.0.)	30010				
	Buildings								
	Leasehold improvements								
	Equipment		1						
	Other								
	. Add lines 1a through 1e. (Column (d) must eq		X column (P) lir	10c)					0.
- ordi		uai ruitti 990, Parti	<u>л, сошни (В), Ш</u>						•••

Schedule D (Form 990) 2022

National	Council	of	Jewish	Women,
Nashville	e Sectior	ı		

Schedule D (Form 990) 2022 Nashville S	ection	62	2-6065087 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other	1 0 6 1 0 0 0		1
(A) Bonds and Mutual Funds	1,961,982.	End-of-Year Market	Value
(B)			
<u>(C)</u>			
<u>(D)</u>			
(E)			
(F)			
(G) (H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,961,982.		
Part VIII Investments - Program Related.	1,501,502.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-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"		11d. See Form 990, Part X, line 15.	1
	Description		(b) Book value
(1) Interest Receivable			1,715.
(2) Student Loan Receivable			277,868.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin	- 15)		279,583.
Part X Other Liabilities.	e 15.)		275,505.
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990. Part X. line 25	5.
1. (a) Description of liability		, ,	(b) Book value
(1) Federal income taxes			
(1) 1 odolar moorne taxee			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

No) 2022 Nashville Section	
National Council of Jewish Women,	

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Sche	dule D (Form 990) 2022 Nashville Section		62-606508	87 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With Reven	ue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
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	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Pa	t XII Reconciliation of Expenses per Audited Financial Stat	ements With Exper	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments			
с	Other losses	2c		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.			
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.

SCHEDULE I	Grants and Other Assistance to Organizations,							OMB No. 1545-0047	
(Form 990)	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Treasury	Comp		Attach to Form					Open to	
Internal Revenue Service	do to www.irs.gov/Formado for the fatest mormation.							Inspec	
Name of the organizationNational Council of Jewish Women, Nashville SectionEmployer ident 62									n number 5087
Part I General Information on Grants a	nd Assistance								
 Does the organization maintain records t criteria used to award the grants or assis 	tance?	-			-		_	Yes	No No
2 Describe in Part IV the organization's pro									
Part II Grants and Other Assistance to I recipient that received more than S	-				anization answered "Y	es" on Form 990, Part	IV, line 21, for	any	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance		rpose of gr assistance	
Court Appointed Special Advocate 601 Woodland Street Nashville, TN 37206	62-1203459	501(C)3	10,000.	0.			Provide su CASA projec		the
Hillel The Foundation for Jewish Campus Life - 2421 Vanderbilt Place - Nashville, TN 37212	62-6073391	501(C)3	6,000.	0.			Provide ge	neral su	pport.
A step Ahead Foundation of Middle Tennessee, Inc PO Box 15902 - Nashville, TN 37215	47-4931504		7,500.	0.			Provide gen		

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

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

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

National Council of Jewish Women, Nashville Section

Schedule I (Form 990) 2022

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Schedule I (Form 990) 2022

62-6065087

7 Page 2

SCHE	DU	LE	C
(Form	990))	

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

National Council of Jewish Women,

Department of the Treasury Internal Revenue Service Name of the organization M 990 or 990-EZ or to provide any additional informati Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 62-6065087

Form 990, Part VI, Section B, line 11b:

The Treasurer reviews Form 990 prior to filing

Nashville Section

Form 990, Part VI, Section C, Line 18:

The National Council of Jewish Women, Nashville section makes its Form 990

available to the public upon request.

Form 990, Part VI, Section C, Line 19:

The National Council of Jewish Women, Nashville section makes its governing

and financial documents available to the public upon request.