

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

**2007**Open to Public  
Inspection**A** For the 2007 calendar year, or tax year beginning **JUL 1, 2007** and ending **JUN 30, 2008****B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Termination  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type. See Specific Instructions

**C** Name of organization**NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Number and street (or P O box if mail is not delivered to street address)

**801 PERCY WARNER BLVD.**

Room/suite

City or town, state or country, and ZIP + 4

**NASHVILLE, TN 37205-4128****D** Employer identification number**62-6065087****E** Telephone number**(615) 352-2275****F** Accounting method☐ Cash ☒ Accrual

Other (Specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**H** and **I** are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No (If "No," attach a list)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☒ Yes ☐ No**I** Group Exemption Number ▶ **1046****M** Check ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)**G** Website: ▶ **N/A****J** Organization type (check only one) ☒ 501(c) ( 3 ) (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **768,366.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	448,594.		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d			
	e	Total (add lines 1a through 1d) (cash \$ 319,381. noncash \$ 129,213.)	1e	448,594.		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	3,067.		
	3	Membership dues and assessments	3	8,060.		
	4	Interest on savings and temporary cash investments	4	28,607.		
	5	Dividends and interest from securities	5	55,889.		
Expenses	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) Subtract line 6b from line 6a	6c			
	7	Other investment income (describe ▶ )	7			
	8a	Gross amount from sales of assets other than inventory	(A) Securities	8a		
	b	Less cost or other basis and sales expenses	214,000.	8b		
	c	Gain or (loss) (attach schedule)	213,799.	8c		
	d	Net gain or (loss) Combine line 8c, columns (A) and (B)	201.	8d	201.	
	9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ 37,848. of contributions reported on line 1b)	9a	9,033.		
Net Assets	b	Less direct expenses other than fundraising expenses	9b	6,273.		
	c	Net income or (loss) from special events Subtract line 9b from line 9a	9c	2,760.		
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c			
	11	Other revenue (from Part VII, line 10)	11	1,116.		
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	548,294.		
	13	Program services (from line 44, column (B))	13	133,250.		
	14	Management and general (from line 44, column (C))	14	11,946.		
	15	Fundraising (from line 44, column (D))	15	3,881.		
Net Assets	16	Payments to affiliates (attach schedule)	16	1,224.		
	17	Total expenses. Add lines 16 and 44, column (A)	17	150,301.		
	18	Excess or (deficit) for the year Subtract line 17 from line 12	18	397,993.		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,296,630.		
	20	Other changes in net assets or fund balances (attach explanation)	20	<116,265.>		
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	1,578,358.		

723001  
12-27-07

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2007)

**NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Form 990 (2007)

62-6065087 Page **2**

**Part II Statement of  
Functional Expenses**

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> • noncash \$ <u>0</u> •) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ <u>77,353</u> • noncash \$ <u>0</u> •) If this amount includes foreign grants, check here <input type="checkbox"/>	77,353.	77,353.	<b>STATEMENT 7</b>	
<b>23</b> Specific assistance to individuals (attach schedule)				
<b>24</b> Benefits paid to or for members (attach schedule)				
<b>25a</b> Compensation of current officers, directors, key employees, etc listed in Part V-A	0.	0.		0.
<b>b</b> Compensation of former officers, directors, key employees, etc listed in Part V-B	0.	0.	0.	0.
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c	28,388.	28,388.		
<b>27</b> Pension plan contributions not included on lines 25a, b, and c				
<b>28</b> Employee benefits not included on lines 25a-27	7,287.	7,287.		
<b>29</b> Payroll taxes	2,177.	2,177.		
<b>30</b> Professional fundraising fees				
<b>31</b> Accounting fees	2,633.		2,633.	
<b>32</b> Legal fees				
<b>33</b> Supplies	85.		85.	
<b>34</b> Telephone	711.	711.		
<b>35</b> Postage and shipping	974.	82.	432.	460.
<b>36</b> Occupancy				
<b>37</b> Equipment rental and maintenance				
<b>38</b> Printing and publications	3,112.		3,112.	
<b>39</b> Travel				
<b>40</b> Conferences, conventions, and meetings	1,051.		1,051.	
<b>41</b> Interest				
<b>42</b> Depreciation, depletion, etc. (attach schedule)	2,795.	2,795.		
<b>43</b> Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g <b>SEE STATEMENT 6</b>	22,511.	14,457.	4,633.	3,421.
<b>44</b> Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	149,077.	133,250.	11,946.	3,881.

**Joint Costs.** Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A, (iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A.

723011  
12-27-07

Form **990** (2007)

**Part III** Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► **SEE STATEMENT 8**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

**Program Service Expenses**  
(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)

**a BUZ-A-BUS: A DOOR TO DOOR DRIVING SERVICE FOR THE ELDERLY TO PROVIDE TRANSPORTATION TO MEDICAL APPOINTMENTS, GROCERY SHOPPING, OR SOCIAL OUTINGS ENABLING THEM TO MAINTAIN THEIR INDEPENDENCE AND REMAIN INVOLVED IN THE COMMUNITY.**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ► ☐

54,935.

**b NATIONAL COUNCIL OF JEWISH WOMEN NATIONAL OFFICE: NCJW EFFECTS POSITIVE SOCIAL CHANGE THROUGH INNOVATIVE PROGRAMS IN THE UNITED STATES AND ABROAD. THESE INITIATIVES SUPPORT NCJW'S MISSION OF IMPROVING THE QUALITY OF LIFE FOR WOMEN, CHILDREN AND FAMILIES, AND ENSURING INDIVIDUAL RIGHTS AND FREEDOMS FOR ALL.**

(Grants and allocations \$ 27,714. ) If this amount includes foreign grants, check here ► ☐

27,714.

**c VANDERBILT CANCER CENTER: PEDIATRIC PALLIATIVE CARE CLINICAL SERVICES PROGRAM**

(Grants and allocations \$ 20,139. ) If this amount includes foreign grants, check here ► ☐

20,139.

**d VANDERBILT HILLEL: SHABBAT DINNER PROGRAM AT THE BEN SCHULMAN CENTER FOR JEWISH LIFE ON THE VANDERBILT UNIVERSITY CAMPUS**

(Grants and allocations \$ 10,000. ) If this amount includes foreign grants, check here ► ☐

10,000.

**e Other program services (attach schedule) SEE STATEMENT 9**

(Grants and allocations \$ 19,500. ) If this amount includes foreign grants, check here ► ☐

20,462.

**f Total of Program Service Expenses** (should equal line 44, column (B), Program services) ►

133,250.

Form 990 (2007)

**NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Form 990 (2007)

62-6065087 Page 4

**Part IV Balance Sheets** (See the instructions)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	45 Cash - non-interest-bearing	41,786.	45	31,992.	
	46 Savings and temporary cash investments	447,790.	46	375,344.	
	47 a Accounts receivable	47a			
	b Less: allowance for doubtful accounts	47b		47c	
	48 a Pledges receivable	48a			
	b Less: allowance for doubtful accounts	48b		48c	
	49 Grants receivable		49		
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b		
	51 a Other notes and loans receivable	51a	122,354.		
	b Less: allowance for doubtful accounts STMT 10	51b			
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53	967.	
	54 a Investments - publicly-traded securities	STMT 12	680,625.	54a	
	b Investments - other securities	STMT 12		54b	1,045,449.
	55 a Investments - land, buildings, and equipment: basis	55a			
	b Less: accumulated depreciation	55b		55c	
	56 Investments - other		56		
57 a Land, buildings, and equipment: basis	57a	32,217.			
b Less: accumulated depreciation STMT 11	57b	32,217.	57c	2,795.	
58 Other assets, including program-related investments (describe ► <u>INTEREST RECEIVABLE</u> )		979.	58	3,778.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58		1,298,156.	59	1,579,884.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses		60		
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable		64b		
	65 Other liabilities (describe ► <u>CUSTODIAL FUND</u> )		1,526.	65	1,526.
	66 <b>Total liabilities.</b> Add lines 60 through 65		1,526.	66	1,526.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	575,613.	67	513,626.	
	68 Temporarily restricted	628,751.	68	986,759.	
	69 Permanently restricted	92,266.	69	77,973.	
	<b>Organizations that do not follow SFAS 117, check here</b> ► <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	1,296,630.	73	1,578,358.	
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	1,298,156.	74	1,579,884.	

Form 990 (2007)

**Part IV-A** Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements		<b>a</b>	N/A
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12:			
<b>1</b>	Net unrealized gains on investments	<b>b1</b>		
<b>2</b>	Donated services and use of facilities	<b>b2</b>		
<b>3</b>	Recoveries of prior year grants	<b>b3</b>		
<b>4</b>	Other (specify): _____	<b>b4</b>		
	Add lines <b>b1</b> through <b>b4</b>		<b>b</b>	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>		<b>c</b>	
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b> :			
<b>1</b>	Investment expenses not included on Part I, line 6b	<b>d1</b>		
<b>2</b>	Other (specify): _____	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b>		<b>d</b>	
<b>e</b>	<b>Total revenue</b> (Part I, line 12). Add lines <b>c</b> and <b>d</b>		<b>e</b>	

<b>Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>	
---	--

<b>a</b> Total expenses and losses per audited financial statements		<b>a</b>	<b>N/A</b>
<b>b</b> Amounts included on line <b>a</b> but not on Part I, line 17:			
<b>1</b> Donated services and use of facilities	<b>b1</b>		
<b>2</b> Prior year adjustments reported on Part I, line 20	<b>b2</b>		
<b>3</b> Losses reported on Part I, line 20	<b>b3</b>		
<b>4</b> Other (specify):	<b>b4</b>		
Add lines <b>b1</b> through <b>b4</b>		<b>b</b>	
<b>c</b> Subtract line <b>b</b> from line <b>a</b>		<b>c</b>	
<b>d</b> Amounts included on Part I, line 17, but not on line <b>a</b> :			
<b>1</b> Investment expenses not included on Part I, line 6b	<b>d1</b>		
<b>2</b> Other (specify):	<b>d2</b>		
Add lines <b>d1</b> and <b>d2</b>		<b>d</b>	
<b>e</b> <b>Total expenses</b> (Part I, line 17). Add lines <b>c</b> and <b>d</b>		<b>e</b>	

**Part V-A** **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated ) (See the instructions )

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE ATTACHED LISTING OF NONCOMPENSATED OFFICERS & DIRECTORS NASHVILLE, TN 37205	DIRECTORS  5.00	0.	0.	0.
----- ----- -----				
----- ----- -----				
----- ----- -----				
----- ----- -----				
----- ----- -----				
----- ----- -----				
----- ----- -----				

**NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Form 990 (2007)

62-6065087 Page 6

<b>Part V-A</b> Current Officers, Directors, Trustees, and Key Employees <i>(continued)</i>		Yes	No
<b>75 a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings <span style="float:right">20</span>			
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s).	75b		X
<b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." If "Yes," attach a statement that includes the information described in the instructions.	75c		X
<b>d</b> Does the organization have a written conflict of interest policy?	75d		X

(A) Name and address <div style="text-align: center;">NONE</div>	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				

<b>Part VI</b> Other Information <i>(See the instructions.)</i>		Yes	No
<b>76</b> Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
<b>78 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? <span style="float:right">N/A</span>	78b		
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
<b>80 a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
<b>b</b> If "Yes," enter the name of the organization <span style="float:right">N/A</span> _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
<b>81 a</b> Enter direct and indirect political expenditures. (See line 81 instructions.) <span style="float:right">81a 0.</span>			
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?	81b		X

Form 990 (2007)

**NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Form 990 (2007)

62-6065087 Page **7**

**Part VI Other Information** (continued)

		Yes	No
<b>82 a</b>	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		<b>X</b>
<b>b</b>	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
<b>82b</b>	N/A		
<b>83 a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	<b>X</b>	
<b>b</b>	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	<b>X</b>	
<b>84 a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>84b</b>	N/A		
<b>85 a</b>	<b>501(c)(4), (5), or (6).</b> Were substantially all dues nondeductible by members?		
<b>85a</b>	N/A		
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
<b>85b</b>	N/A		
<b>c</b>	Dues, assessments, and similar amounts from members		
<b>85c</b>	N/A		
<b>d</b>	Section 162(e) lobbying and political expenditures		
<b>85d</b>	N/A		
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
<b>85e</b>	N/A		
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
<b>85f</b>	N/A		
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
<b>85g</b>	N/A		
<b>h</b>	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
<b>85h</b>	N/A		
<b>86</b>	<b>501(c)(7) organizations.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12		
<b>86a</b>	N/A		
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities		
<b>86b</b>	N/A		
<b>87</b>	<b>501(c)(12) organizations.</b> Enter: <b>a</b> Gross income from members or shareholders		
<b>87a</b>	N/A		
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>87b</b>	N/A		
<b>88 a</b>	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		<b>X</b>
<b>b</b>	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		<b>X</b>
<b>89 a</b>	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
<b>b</b>	<b>501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		<b>X</b>
<b>89b</b>			
<b>c</b>	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>		
<b>d</b>	Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>		
<b>e</b>	<b>All organizations.</b> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		<b>X</b>
<b>89e</b>			
<b>f</b>	<b>All organizations.</b> Did the organization acquire a direct or indirect interest in any applicable insurance contract?		<b>X</b>
<b>89f</b>			
<b>g</b>	<b>For supporting organizations and sponsoring organizations maintaining donor advised funds.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		<b>X</b>
<b>89g</b>			
<b>90 a</b>	List the states with which a copy of this return is filed <b>NONE</b>		
<b>90b</b>			<b>2</b>
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2007		
<b>91 a</b>	The books are in care of <b>LEAH M. BERMAN</b> Telephone no <b>(615) 352-2275</b> Located at <b>727 GREELEY DRIVE, NASHVILLE, TN</b> ZIP + 4 <b>37205</b>		
<b>b</b>	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</b>		<b>X</b>
<b>91b</b>			

Form **990** (2007)

**NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Form 990 (2007)

62-6065087 Page **8**

**Part VI Other Information** (continued) **Yes No**

- c** At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** ☐ ☒  
 If "Yes," enter the name of the foreign country N/A
- 92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ☐  
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>93</b> Program service revenue:					
<b>a</b> BUZ-A-BUS - FARES					3,067.
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					8,060.
<b>95</b> Interest on savings and temporary cash investments			14	28,607.	
<b>96</b> Dividends and interest from securities			14	55,889.	
<b>97</b> Net rental income or (loss) from real estate:					
<b>a</b> debt-financed property					
<b>b</b> not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets					
other than inventory			18	201.	
<b>101</b> Net income or (loss) from special events			12	2,760.	
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue:					
<b>a</b> MEETING INCOME					1,116.
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))		0.		87,457.	12,243.
<b>105</b> Total (add line 104, columns (B), (D), and (E))					99,700.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
<b>93A</b>	INCOME FROM PROGRAM PROVIDING TRANSPORTATION TO THE ELDERLY.
<b>94</b>	RECEIPTS FROM MEMBERS TO FUND EXEMPT PURPOSE PROGRAMS.
<b>103A</b>	RECOVERY OF THE COST OF MEALS AND OTHER EXPENSES INCURRED IN CONNECTION WITH MEMBERSHIP MEETINGS.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

- (a)** Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b)** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Form **990** (2007)



**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
<b>Totals</b>				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
<b>Totals</b>				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes No

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.

Please Sign Here

Signature of officer: Leah Berman Date: 11.12.08

Type or print name and title: Leah Berman, treasurer

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 11/11/08 Check if self-employed: ☐ Preparer's SSN or PTIN (See Gen. Inst. X): \_\_\_\_\_

Firm's name (or yours if self-employed), address, and ZIP + 4: KRAFTOPAS PLLC  
555 GREAT CIRCLE ROAD, SUITE 200  
NASHVILLE, TN 37228-1310

EIN: \_\_\_\_\_ Phone no: (615) 242-7351

Form 990 (2007)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2007**

Name of the organization **NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Employer identification number  
**62 6065087**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions )

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	0	

**NATIONAL COUNCIL OF JEWISH WOMEN,**

Schedule A (Form 990 or 990-EZ) 2007 **NASHVILLE SECTION**

**62-6065087** Page 2

**Part III Statements About Activities** (See page 2 of the instructions)

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	<b>1</b>	<b>X</b>
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
<b>a</b> Sale, exchange, or leasing of property?	<b>2a</b>	<b>X</b>
<b>b</b> Lending of money or other extension of credit?	<b>2b</b>	<b>X</b>
<b>c</b> Furnishing of goods, services, or facilities?	<b>2c</b>	<b>X</b>
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<b>2d</b>	<b>X</b>
<b>e</b> Transfer of any part of its income or assets?	<b>2e</b>	<b>X</b>
<b>3 a</b> Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	<b>3a</b>	<b>X</b>
<b>b</b> Did the organization have a section 403(b) annuity plan for its employees?	<b>3b</b>	<b>X</b>
<b>c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	<b>3c</b>	<b>X</b>
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>3d</b>	<b>X</b>
<b>4 a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g.	<b>4a</b>	<b>X</b>
<b>b</b> Did the organization make any taxable distributions under section 4966?	<b>4b</b>	<b>N/A</b>
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?	<b>4c</b>	<b>N/A</b>
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year	►	<b>N/A</b>
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	►	<b>N/A</b>
<b>f</b> Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	►	<b>0.</b>
<b>g</b> Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	►	<b>0.</b>

Schedule A (Form 990 or 990-EZ) 2007

**NATIONAL COUNCIL OF JEWISH WOMEN,**

Schedule A (Form 990 or 990-EZ) 2007 **NASHVILLE SECTION**

**62-6065087 Page 3**

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions )

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box )

- 5** ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6** ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V )
- 7** ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii).
- 8** ☐ A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state **▶** \_\_\_\_\_
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
- 11a** ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 11b** ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 12** ☐ An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )
- 13** ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization  
☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

**Provide the following information about the supported organizations. (See page 8 of the instructions )**

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b> <b>▶</b>					

- 14** ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions )

**Schedule A (Form 990 or 990-EZ) 2007**

**NATIONAL COUNCIL OF JEWISH WOMEN,**

Schedule A (Form 990 or 990-EZ) 2007 **NASHVILLE SECTION**

**62-6065087** Page 4

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	473,630.	129,685.	91,763.	86,774.	781,852.
<b>16</b> Membership fees received	10,574.	9,210.	8,090.	9,830.	37,704.
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	12,502.	12,366.	12,431.	10,552.	47,851.
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	535,907.	22,869.	13,832.	16,050.	588,658.
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.		1,275.	5,545.	9,356.	16,176.
<b>23</b> Total of lines 15 through 22	1,032,613.	175,405.	131,661.	132,562.	1,472,241.
<b>24</b> Line 23 minus line 17	1,020,111.	163,039.	119,230.	122,010.	1,424,390.
<b>25</b> Enter 1% of line 23	10,326.	1,754.	1,317.	1,326.	
<b>26</b> Organizations described on lines 10 or 11: <b>a</b> Enter 2% of amount in column (e), line 24					28,488.
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					364,592.
<b>c</b> Total support for section 509(a)(1) test. Enter line 24, column (e)					1,424,390.
<b>d</b> Add: Amounts from column (e) for lines 18 <u>588,658.</u> 19 <u>                    </u>					
22 <u>16,176.</u> 26b <u>364,592.</u>					969,426.
<b>e</b> Public support (line 26c minus line 26d total)					454,964.
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					31.9410%
<b>27</b> Organizations described on line 12: <b>a</b> For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year	N/A				
(2006) (2005) (2004) (2003)					
<b>b</b> For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year	N/A				
(2006) (2005) (2004) (2003)					
<b>c</b> Add: Amounts from column (e) for lines 15 <u>                    </u> 16 <u>                    </u>					
17 <u>                    </u> 20 <u>                    </u> 21 <u>                    </u>					N/A
<b>d</b> Add: Line 27a total <u>                    </u> and line 27b total <u>                    </u>					N/A
<b>e</b> Public support (line 27c total minus line 27d total)					N/A
<b>f</b> Total support for section 509(a)(2) test. Enter amount on line 23, column (e)			N/A		
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					N/A %
<b>28</b> Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15	NONE				

**NATIONAL COUNCIL OF JEWISH WOMEN,**

Schedule A (Form 990 or 990-EZ) 2007 **NASHVILLE SECTION**

**62-6065087** Page **5**

**Part V Private School Questionnaire** (See page 9 of the instructions )

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain (If you need more space, attach a separate statement )	<b>31</b>	
<hr/>		
<hr/>		
<hr/>		
<b>32</b> Does the organization maintain the following		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )	<b>32d</b>	
<hr/>		
<b>33</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges?	<b>33a</b>	
<b>b</b> Admissions policies?	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff?	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance?	<b>33d</b>	
<b>e</b> Educational policies?	<b>33e</b>	
<b>f</b> Use of facilities?	<b>33f</b>	
<b>g</b> Athletic programs?	<b>33g</b>	
<b>h</b> Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )	<b>33h</b>	
<hr/>		
<hr/>		
<b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency?	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	<b>34b</b>	
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	<b>35</b>	

Schedule A (Form 990 or 990-EZ) 2007

**NATIONAL COUNCIL OF JEWISH WOMEN,**

Schedule A (Form 990 or 990-EZ) 2007 **NASHVILLE SECTION**

**62-6065087** Page 6

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions )

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ☒ **a** if the organization belongs to an affiliated group Check ☐ **b** if you checked "a" and "limited control" provisions apply

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred )

	(a) Affiliated group totals	(b) To be completed for all electing organizations
	N/A	
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b> Other exempt purpose expenditures	<b>39</b>	
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table -		
If the amount on line 40 is -		
Not over \$500,000	20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	<b>43</b>	
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 13 of the instructions )

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	
<b>45</b> Lobbying nontaxable amount					0.
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					0.
<b>47</b> Total lobbying expenditures					0.
<b>48</b> Grassroots nontaxable amount					0.
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					0.
<b>50</b> Grassroots lobbying expenditures					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions )

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
<b>a</b> Volunteers	<b>X</b>		
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.)	<b>X</b>		
<b>c</b> Media advertisements		<b>X</b>	
<b>d</b> Mailings to members, legislators, or the public		<b>X</b>	
<b>e</b> Publications, or published or broadcast statements		<b>X</b>	
<b>f</b> Grants to other organizations for lobbying purposes		<b>X</b>	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body		<b>X</b>	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		<b>X</b>	
<b>i</b> Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- |        | Yes | No |
|--------|-----|----|
| 51a(i) |     | X  |
| a(ii)  |     | X  |
| b(i)   |     | X  |
| b(ii)  |     | X  |
| b(iii) |     | X  |
| b(iv)  |     | X  |
| b(v)   |     | X  |
| b(vi)  |     | X  |
| c      |     | X  |

**d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

N/A

[illegible]

► ☐ Yes ☒ No

N/A

[illegible]



## 2007 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
6	PROGRAM SERVICES COMPUTER	020300	200DB	5.00	17	2,047.			2,047.	2,047.		0.
7	VAN * 990 PAGE 2 TOTAL PROGRAM SERVICES	030303	SL	5.00	17	27,968.			27,968.	25,173.		2,795.
	MANAGEMENT AND GENERAL					30,015.		0.	30,015.	27,220.	0.	2,795.
3	COMPUTER AND SOFTWARE	102094	SL	5.00	17	1,649.			1,649.	1,649.		0.
4	SOFTWARE * 990 PAGE 2 TOTAL MANAGEMENT AND GENERAL	022795	SL	5.00	17	553.			553.	553.		0.
	* GRAND TOTAL 990 PAGE 2 DEPR					2,202.		0.	2,202.	2,202.	0.	0.
						32,217.		0.	32,217.	29,422.	0.	2,795.

728102  
04-27-07

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

## FOOTNOTES

STATEMENT 1

NO AUDITED FINANCIAL STATEMENT IS ISSUED SO FORM 990 PARTS  
IV-A AND IV-B HAVE BEEN ANSWERED N/A.

---



---

FORM 990      GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES      STATEMENT      2

---

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
FL COMMUNITY BANK CD 5.05%	30,000.	30,000.	0.	0.
WASH. MUTUAL BANK CD 5.05%	30,000.	30,000.	0.	0.
FIRST NAT'L BANK OF OMAHA CD	20,000.	20,000.	0.	0.
PEOPLES NAT'L BANK CD	20,000.	20,000.	0.	0.
PROVIDENT BANK CD	35,000.	34,785.	0.	215.
REPUBLIC BANK CD	30,000.	30,000.	0.	0.
WASH. MUTUAL BANK CD 5.05%	24,000.	24,000.	0.	0.
US T-NOTE 4.875%	15,000.	14,986.	0.	14.
US T-NOTE 5.125%	10,000.	10,028.	0.	<28.>
TO FORM 990, PART I, LINE 8	214,000.	213,799.	0.	201.

---



---

FORM 990      SPECIAL EVENTS AND ACTIVITIES      STATEMENT      3

---

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME OR (LOSS)
LUNCHEON	43,428.	37,848.	5,580.	3,292.	2,288.
YEARBOOK ADS	3,453.		3,453.	2,981.	472.
TO FM 990, PART I, LINE 9	46,881.	37,848.	9,033.	6,273.	2,760.

FORM 990	PAYMENTS TO AFFILIATES	STATEMENT	4
----------	------------------------	-----------	---

## AFFILIATE'S NAME

## AFFILIATE'S ADDRESS

NATIONAL COUNCIL OF JEWISH WOMEN

53 WEST 23RD ST. 6TH FLOOR  
NEW YORK, NY 10010-4204

## PURPOSE OF PAYMENT

## AMOUNT

DUES - PER CAPITA

1,224.

TOTAL TO FORM 990, PART I, LINE 16

1,224.

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	5
----------	--	-----------	---

## DESCRIPTION

## AMOUNT

UNREALIZED INVESTMENT GAIN (LOSS)

&lt;116,265.&gt;

TOTAL TO FORM 990, PART I, LINE 20

&lt;116,265.&gt;

FORM 990	OTHER EXPENSES	STATEMENT	6
----------	----------------	-----------	---

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
MISC. EXPENSE	472.	3.	99.	370.
SENIOR FRIENDS-JEWISH FAMILY SERVICES	631.	631.	0.	0.
OIL AND GAS EXPENSE	5,853.	5,853.	0.	0.
INSURANCE EXPENSE	1,758.	1,758.	0.	0.
MAINTENANCE & REPAIRS, TAXES, LICENSES	5,964.	5,964.	0.	0.
ADVERTISING	95.	0.	95.	0.
SNACK-BOX PROGRAM - CHILDREN'S MEALS	192.	192.	0.	0.
STORAGE	983.	0.	983.	0.
DELEGATE	3,364.	0.	3,364.	0.
DECORATIONS	80.	0.	0.	80.
PARKING & SECURITY	710.	0.	0.	710.
PROGRAMS	244.	0.	0.	244.

## NATIONAL COUNCIL OF JEWISH WOMEN, NASHVI

62-6065087

INVITATIONS	894.	0.	0.	894.
AUDIO/LIGHTS	1,123.	0.	0.	1,123.
BANK CHARGES	6.	6.	0.	0.
STUDY AND SURVEY	92.	0.	92.	0.
DUES	50.	50.	0.	0.
TOTAL TO FM 990, LN 43	22,511.	14,457.	4,633.	3,421.

FORM 990

CASH GRANTS AND ALLOCATIONS  
TO OTHERS

STATEMENT 7

## CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS

AMOUNT

GENERAL FUND NATIONAL COUNCIL OF JEWISH WOMEN 53 WEST 23RD STREET, 6TH FLOOR NEW YORK, NY 10010-4204	27,714.
GENERAL FUND VANDERBILT HILLEL 2421 VANDERBILT PLACE NASHVILLE, TN 37212	10,000.
PG-13 PLAYERS PLANNED PARENTHOOD 50 VANTAGE WAY NASHVILLE, TN 37228	7,000.
GENERAL FUND RENEWAL HOUSE PO BOX 280356 NASHVILLE, TN 37228	5,000.
FENSTERWALD FUND COURT APPOINTED SPECIAL ADVOCATE 601 WOODLAND STREET NASHVILLE, TN 37206	7,500.
GENERAL FUND VANDERBILT CANCER CENTER 2301 VANDERBILT PLACE NASHVILLE, TN 37235	20,139.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22B

77,353.

---



---

FORM 990      STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE      STATEMENT      8

PART III

---

EXPLANATION

RELIGIOUS ORGANIZATION WHICH SUPPORTS AND PROVIDES EDUCATIONAL AND OTHER COMMUNITY SERVICE ACTIVITIES.

---



---

FORM 990      OTHER PROGRAM SERVICES      STATEMENT      9

---

<u>DESCRIPTION OF OTHER PROGRAM SERVICES</u>	<u>GRANTS AND ALLOCATIONS</u>	<u>EXPENSES</u>
SCHOLARSHIP LOAN FUND	0.	88.
SNACK-BOX PROGRAM FOR CHILDREN	0.	193.
COURT APPOINTED SPECIAL ADVOCATE PROVIDES A COMMUNICATION SERVICE TO CHILDREN IN FOSTER HOMES THROUGH LOCAL VOLUNTEERS IN COOPERATION WITH THE JUNIOR LEAGUE OF NASHVILLE. IT IS DESIGNED TO KEEP FOSTER CHILDREN FROM BEING LOST IN THE FOSTER CARE SYSTEM.	7,500.	7,500.
RENEWAL HOUSE: SUPPORT OF SUBSTANCE-ADDICTED WOMEN IN RECOVERY AND THEIR CHILDREN FOR A DRUG-FREE NEW BEGINNING.	5,000.	5,000.
SENIOR FRIENDS - JEWISH FAMILY SERVICES	0.	631.
PG-13 PLAYERS (PEER GUIDANCE) - THROUGH PLANNED PARENTHOOD	7,000.	7,000.
NASHVILLE ATHENA ORGANIZATION	0.	50.
TOTAL TO FORM 990, PART III, LINE E	19,500.	20,462.

---



---

FORM 990      OTHER NOTES AND LOANS RECEIVABLE      STATEMENT      10

---

<u>DESCRIPTION</u>	<u>DOUBTFUL ACCT ALLOWANCE</u>	<u>BALANCE DUE</u>
STUDENT LOANS	0.	122,354.
TOTALS INCLUDED ON FORM 990, PART IV, LINE 51	0.	122,354.

---



---

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT 11
----------	--	--------------

---

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER AND SOFTWARE	1,649.	1,649.	0.
SOFTWARE	553.	553.	0.
COMPUTER	2,047.	2,047.	0.
VAN	27,968.	27,968.	0.
TOTAL TO FORM 990, PART IV, LN 57	32,217.	32,217.	0.

---



---

FORM 990	OTHER SECURITIES	STATEMENT 12
----------	------------------	--------------

---

SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
BONDS AND MUTUAL FUNDS	FMV	1,045,449.
TO FORM 990, LINE 54B, COL B		1,045,449.

---



---

SCHEDULE A	EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS PART III, LINE 3A	STATEMENT 13
------------	--	--------------

---

APPLICANT'S PERSONALITY, CHARACTER, PAST SCHOLARSHIP RECORDS, INTERESTS,  
REFERENCES, GENERAL FITNESS, AND FAMILY'S FINANCIAL STATUS.

---



---

SCHEDULE A	OTHER INCOME	STATEMENT 14
------------	--------------	--------------

---

DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT
MISC. INCOME	0.	1,275.	5,545.	9,356.
TOTAL TO SCHEDULE A, LINE 22	0.	1,275.	5,545.	9,356.

**Depreciation and Amortization** 990  
(Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

**2007**Attachment  
Sequence No 67NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION

Business or activity to which this form relates

Identifying number

FORM 990 PAGE 2

62-6065087

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	125,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	500,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	2,795.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

**Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System**

20a	Class life				S/L	
b	12-year		12 yrs		S/L	
c	40-year	/	40 yrs.	MM	S/L	

**Part IV Summary (see instructions)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	2,795.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	



**NATIONAL COUNCIL OF JEWISH WOMEN,  
NASHVILLE SECTION**

Form 4562-FY (2007)

62-6065087 Page 2

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							<b>25</b>	
<b>26</b> Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
<b>27</b> Property used 50% or less in a qualified business use:								
		%				S/L		
		%				S/L		
		%				S/L		
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							<b>28</b>	
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1								<b>29</b>

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.  
 If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
<b>30</b> Total business/investment miles driven during the year (do not include commuting miles)												
<b>31</b> Total commuting miles driven during the year												
<b>32</b> Total other personal (noncommuting) miles driven												
<b>33</b> Total miles driven during the year. Add lines 30 through 32												
<b>34</b> Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?												
<b>36</b> Is another vehicle available for personal use?												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2007 tax year:					
<b>43</b> Amortization of costs that began before your 2007 tax year					<b>43</b>
<b>44</b> Total. Add amounts in column (f). See the instructions for where to report					<b>44</b>

# Nashville NCJW Board and Committees 2007-2008

## Executive Committee:

### Co-Presidents:

Allison Cutler (Administration) ..... 385-4855  
Barbara Mayden (Community Service) ..... 385-1819  
Diane Sacks (Membership, Programs, Fundraising) ..... 356-1232

Recording/Corresponding Secretary: Terry Fardon ..... 298-5251

Financial Secretary: Tish Doochin ..... 383-7038

Treasurer: Leah Berman ..... 352-2275

Assistant Treasurer: Beth Tannenbaum ..... 279-8033

## Full Board of Directors:

Executive Committee ..... see above

Past Presidents ..... see below

State Public Affairs Chair: LaQuita Martin ..... 297-6289

Directors appointed by Presidents: Michelle Friedenbergl ..... 685-0604

Maria Pargh ..... 665-2266

Diane Kimbrough ..... 297-1524

## Past Presidents:

Bertha Fensterwald\*, 1901-03  
Leah Lebeck\*, 1903-04  
Daisy Bromberg\*, 1904-05  
Marian Wed\*, 1905-11  
Sarah Teisibaum\*, 1911-14  
Ella Lovennan\*, 1914-15  
Della Bloomstein\*, 1915  
Gertrude Weinstein\*, 1915-17  
Selma Schwartz\*, 1917-20  
Laura Abrams\*, 1920-22  
Helen Mills\*, 1922-24  
Celia Ughman\*, 1924-26  
Dorothy Marks\*, 1928-30  
Lydia Korman\*, 1930-31  
Deborah Schwartz Field\*, 1931-33  
Hattie Bubis\*, 1933-35  
Marie Gury\*, 1935-38  
Leah Belle Eskind\*, 1938-41  
Fedora Frank\*, 1941-43

Elizabeth Jones Jacobs, 1943-45  
Sally Zander, 1945-47  
Mary Jane Werthan\*, 1947-49  
Leonryne Keller\*, 1949-51  
Miriam Weinstein\*, 1951-53  
Elsie Steiner, 1953-55  
Leah Rose Werthan\*, 1955-57  
Adelyne Scott\*, 1957-59  
Flo Korman, 1959-61  
Lois Rex, 1961-63  
Mildred Rand\*, 1963-64  
Sis Conn, 1964-66  
Susie Horns\*, 1966-68  
Selma Goldstein, 1968-70  
Ellen Jacobs, 1970-72  
Albee Gutman, 1972-74  
Alice Zimmerman, 1974-76  
Sally Wolfe, 1976-78  
Irma Kaplan, 1978-80

Jackie Kahn Lecker, 1980-81  
Rita Dvornik\*, 1981-84  
Felipa Archer\*, 1984-86  
Dianne Gilbert\*, 1986-88  
Tom Haller, 1988-90  
Kathy Gutow\*, 1990-92  
Neri Speller, 1992-94  
Mary Jones, 1994-96  
Phyllis Herderman, 1996-98  
Sandra Hecklin, 1998-00  
Carol Smith, 1998-00  
Leah Berman, 2000-02  
Gretchen Golostein, 2000-02  
Dianne Berry, 2002-04  
Rae Hirsch, 2002-04  
Judy Mattison, 2004-06  
Mary Jones, 2006-07  
Lori Fisher, 2006-07  
Sandra Hecklin, 2006-07

\* Deceased \*\* Non-residents

## Honorary Past Presidents:

Sandy Schwarcz and Eddy Rosen (former leaders of New Orleans NCJW)