PUBLIC DISCLOSURE COPY

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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 private foundations)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A F	For the	2020 calendar year, or tax year beginning JUN	1, 2020 and	ending M	AY 31, 2021	
	Check if applicable	C Name of organization			D Employer identifi	cation number
	Addres	THE JUNIOR LEAGUE OF NASH	VILLE, INC.			
	Name change	5	,,		62-04768	15
	Initial return	Number and street (or P.O. box if mail is not delivered	to street address)	Room/suite	E Telephone numbe	r
	Final return/	2202 CRESTMOOR ROAD	·		615-269-	
	termin- ated	, , , , , , , , , , , , , , , , , , , ,	foreign postal code		G Gross receipts \$	3,986,949.
L	Amend	MASUATTIE, IN 21712			H(a) Is this a group re	
	Applica tion pendin	F Name and address of principal officer: O EININ I	BARKER		for subordinates	
_		SAME AS C ABOVE			H(b) Are all subordinates in	
			nsert no.) 4947(a)(1)	or 527	1	list. See instructions
		e: ► WWW.JLNASHVILLE.ORG  organization: X Corporation Trust Associati	ion Other	I Voor	H(c) Group exemption	on number ► M State of legal domicile: TN
		Summary	OII UIIIEI	L Year	or formation: 1922  I	VI State of legal domicile; 11
	_	Briefly describe the organization's mission or most signif	icant activities: THE	TUNTOR	LEAGUE OF	NASHVILLE
Se	'	IS AN ORGANIZATION OF WOMEN (				
Governance	2	Check this box  if the organization discontinue				
Ver	3	Number of voting members of the governing body (Part \			3	11
		Number of independent voting members of the governing				11
ري وي	5	Fotal number of individuals employed in calendar year 20				4
/itie	6	Total number of volunteers (estimate if necessary)				1467
Activities &	7 a	Total unrelated business revenue from Part VIII, column (				0.
_	b	Net unrelated business taxable income from Form 990-T	, Part I, line 11		7b	0.
					Prior Year	Current Year
<u>•</u>	1				594,874.	509,488.
Revenue					0.	0.
3e		nvestment income (Part VIII, column (A), lines 3, 4, and 7			366,219.	776,203.
_	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1			-118,254.	36,212.
		Total revenue - add lines 8 through 11 (must equal Part V			842,839.	1,321,903.
	1	Grants and similar amounts paid (Part IX, column (A), line			149,977.	139,007.
		Benefits paid to or for members (Part IX, column (A), line			163,206.	168,199.
ses	15	Salaries, other compensation, employee benefits (Part IX Professional fundraising fees (Part IX, column (A), line 11			0.	0.
Expenses	h .	For the solution of the first state of the first st	53 5'	73.	<u>.</u>	
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-2			322,205.	367,043.
		Fotal expenses. Add lines 13-17 (must equal Part IX, colu			635,388.	674,249.
		Revenue less expenses. Subtract line 18 from line 12			207,451.	647,654.
Or So	3			Be	ginning of Current Year	End of Year
sets	20	Fotal assets (Part X, line 16)			17,794,961.	22,447,402.
Net Assets or Europe	21	Total liabilities (Part X, line 26)			838,109.	608,794.
ESE	22	Net assets or fund balances. Subtract line 21 from line 2	0		16,956,852.	21,838,608.
	art II	Signature Block				
	-	ties of perjury, I declare that I have examined this return, includ				y knowledge and belief, it is
true	, correct	a, and complete. Declaration of preparer (other than officer) is ba	ased on all information of wh	nich preparer	has any knowledge.	
٠.		Signature of officer			 Date	
Sig	- 1	JENNY BARKER, PRESIDENT			Dato	
Her	e	Type or print name and title				
		,	nrer's signature	T	Date Check [	X PTIN
Paid	,	SARA G. MOON			:48:17 -06'00'   if self-emplo	500004554
	parer	Firm's name CHERRY BEKAERT LLP				56-0574444
-	Only	Firm's address 222 SECOND AVE, SOU	TH STE 1240		THIN O LIN	
	-	NASHVILLE, TN 37201			Phone no. 61	5-383-6592
May	the IP	S discuss this return with the preparer shown above? So	ee instructions			X Yes No

. u	Check if Schodule O contains a response or note to any line in this Part III	Х
_	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: THE JUNIOR LEAGUE OF NASHVILLE IS AN ORGANIZATION OF WOMEN COMMITTED	
	TO PROMOTING VOLUNTARISM, DEVELOPING THE POTENTIAL OF WOMEN AND	
	IMPROVING THE COMMUNITY THROUGH THE EFFECTIVE ACTION AND LEADERSHIP OF	
	TRAINED VOLUNTEERS. ITS PURPOSE IS EXCLUSIVELY EDUCATIONAL AND	
_		
2	Did the organization undertake any significant program services during the year which were not listed on the	♬
	prior Form 990 or 990-EZ?	⊾_ No
	If "Yes," describe these new services on Schedule O.	<del>-</del> -
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes	<u>⊾</u> 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	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$	)
	TRAINING WOMEN FOR VOLUNTEER LEADERSHIP, PROVIDING VOLUNTEER SERVICES	
	AND COMMUNITY PROGRAM SUPPORT. THE JUNIOR LEAGUE OF NASHVILLE	
	CONTRIBUTED 25,280 VOLUNTEER HOURS IN 2020 AS WELL AS PROVIDING	
	FINANCIAL SUPPORT IN COMMUNITY GIFTS.	
4h		
4b	(Code:) (Expenses \$	—— <sup>)</sup>
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 ► 620,676.	

			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?	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 Revenue Procedure 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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		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	17		X
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	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	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? If "Yes." complete Schedule I. Parts I and II	21	X	

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			3,7
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		21
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 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		Х
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			- v
	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			x
2F.~	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	SSA		21
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 13			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X 000	

# 020) THE JUNIOR LEAGUE OF NASHVILLE, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 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			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			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	6a		
D		6b		
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	GD		
и а	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	X	
	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
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:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders 11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
100	amounts due or received from them.)  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	ıza		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? 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		X
	If "Yes," see 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		X
	If "Yes," complete Form 4720, Schedule O.			

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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. X Check if Schedule O contains a response or note to any line in this Part VI

Sac	tion A. Governing Body and Management					21
360	tion A. Governing body and Management				<b>V</b>	
		١.	1 11		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	11			
	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.		11			
b	Enter the number of voting members included on line 1a, above, who are independent	1b	11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t 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 9	90 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or			
	more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	olders, or			
	persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by th	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
			,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cor	flicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es." c	lescribe			
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	
	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent v	vith a			
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatio	า'ร			
	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, ar	nd 990	)-T (Section 501(c)(3)	only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website X Another's website X Upon request Other (explain	on S	chedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	l financ	cial	
	statements available to the public during the tax year.		• •			
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks an	d records			
	AIMEE DAVIS - 615-269-9393					
	2202 CRESTMOOR ROAD, NASHVILLE, TN 37215					

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) 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.

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

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

Check this box if neither the organization (A)	(B)			((	C)			(D)	(E)	(F)
Name and title	Average	(do i	not cl	Posi heck i	ition <sub>more</sub>	than o	one	Reportable	Reportable	Estimated
	hours per	box,	unles	ss per	son is	s both	n an	compensation	compensation	amount of other
	week (list any	to						from the	from related organizations	compensation
	hours for	r direc				pa.		organization	(W-2/1099-MISC)	from the
	related	stee o	rustee			oensa		(W-2/1099-MISC)		organization
	organizations below	ual tru	ional t		ploye	t com				and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) AMY SMOTHERMAN	40.00									
MANAGING DIRECTOR				Х				73,949.	0.	13,540.
(2) JENNY BARKER	8.00								_	_
PRESIDENT ELECT		Х		Х				0.	0.	0.
(3) JENNA WATSON	15.00									
EXECUTIVE VICE PRESIDENT		Х		Х		_		0.	0.	0.
(4) ELIZABETH WOOD	8.00	_								
SECRETARY		Х		X				0.	0.	0.
(5) ELISA GOODRICH	8.00									•
NOMINATING CHAIR	15.00	Х		X		_		0.	0.	0.
(6) SARAH WOODALL	15.00	,,		7.7					_	0
PRESIDENT	15.00	Х		X				0.	0.	0.
(7) JEANAI RANERO	15.00	<b>.</b> ,		х					0	0
TREASURER (8) JADE SAMPSON	8.00	Х		Λ				0.	0.	0.
DIRECTOR	8.00	$ \mathbf{x} $						0.	0.	0.
(9) ANGELA MORETTI GODDARD	8.00	<u> </u>						0.	0.	0.
SUSTAINER DIRECTOR	0.00	x						0.	0.	0.
(10) BRITTANY IRBY	8.00							•		
DIRECTOR		$ \mathbf{x} $						0.	0.	0.
(11) CLAUDIA BYERS	8.00									
DIRECTOR		x						0.	0.	0.
(12) SHANA ALFORD ALLSMILLER	8.00									
SUSTAINER DIRECTOR		Х						0.	0.	0.
						$\vdash$				
		Ш					<u> </u>	<u> </u>		<b>– 000</b> (2222)

Form **990** (2020)

	990 (2020) THE JUNIO	OR LEAGU	JΕ	OF	'N	ΙAS	HV	ΊΙ	LLE, INC.	62-04	176	815	P	age 8
Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,			ghes	st C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week	box	not c , unle	Pos heck ss pe	more rson i	than of the state	n an	( <b>D</b> )  Reportable  compensation  from	(E) Reportable compensatio from related	n	an	(F) stimate nount other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr org and	pensa om the anizat d relate anizatio	ie tion ted
			_											
			_											
			_											
			_											
			_											
								Ļ	72.040			1	2 E	4.0
	Subtotal  Total from continuation sheets to Part VI								73,949.		0.		3,5	0.
	Total (add lines 1b and 1c)								73,949.		0.	1	3,5	
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable	;			0
3	Did the organization list any <b>former</b> officer,	director, trust	ee. k	ev e	lame	ove	e. or	hio	nhest compensated emp	lovee on			Yes	No
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150											4		Х
5	Did any person listed on line 1a receive or a	accrue comper	nsati	on fi	rom	any	unre	elate	ed organization or individ	dual for services				37
Sec	rendered to the organization? If "Yes." comtion B. Independent Contractors	plete Schedul	e J f	or su	ıch <u>ı</u>	oers	on					5		X
1	Complete this table for your five highest co the organization. Report compensation for	•	•							•	ensa	tion fro	m	
	(A) Name and business			ONE					(B) Description of s		С	(C Compe		n
	Total number of independent contractors (in \$100,000 of compensation from the organic	•	ot lin	nited	d to	thos (	_	ted	above) who received me	ore than			000	
												Form	コヨリ (*	2020)

62-0476815

		Check if Schedule O contains a respon	se or note to any line	e in this Part VIII			
		Chock if Concadic C Contains a respon		(A)	(B)	(C)	(D)
				Total revenue	Related or exempt		Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
<b>'</b> 0 '0	4.0	Fodoveted compaigns 4.					000110110 0 12 0 1 1
Contributions, Gifts, Grants and Other Similar Amounts	ıa	Federated campaigns 1a	234,613.				
5 2	D	Membership dues 1b					
ts,	С.	Fundraising events 1c	59,620.				
엹펿	d	Related organizations 1d	21 005				
ns,	е	Government grants (contributions) 1e	31,895.				
를	f	All other contributions, gifts, grants, and					
ĔĔ		similar amounts not included above 1f	183,360.				
Ę	g	Noncash contributions included in lines 1a-1f 1g   \$					
<u>ਨੂੰ ਸ਼</u>	h	Total. Add lines 1a-1f		509,488.			
			Business Code				
မွ	2 a	·	_				
e <u>Š</u>	b						
S	С						
eve eve	d	I					
Program Service Revenue	е	·					
P.	f	All other program service revenue					
	g	Total. Add lines 2a-2f	<b></b>				
	3	Investment income (including dividends, in					
		other similar amounts)	<b>&gt;</b>	344,912.			344,912.
	4	Income from investment of tax-exempt bon					
	5	Royalties	· .				
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
		Less: rental expenses 6b					
	c						
		Not rental income or (loss)					
		Gross amount from sales of (i) Securities					
	ı a	assets other than inventory <b>7a</b> 3,071,55	<del>'''</del>				
	<b>.</b>	,					
a	b	Less: cost or other basis and sales expenses 7b 2,640,26	58				
ğ		una sansa sapanasa					
Revenue		( )		431,291.			431,291.
er B		Net gain or (loss)	<b>P</b>	431,231.			431,231.
ا ع	8 а	Gross income from fundraising events (not					
₫		including \$ 59,620. of					
		contributions reported on line 1c). See	60,000				
	_	,	8a 60,990.				
			8b 24,778.	26 212			26.212
		Net income or (loss) from fundraising event	s	36,212.			36,212.
	9 a	Gross income from gaming activities. See					
			9a				
			9b				
		Net income or (loss) from gaming activities	<b></b>				
	10 a	Gross sales of inventory, less returns					
			10a				
	b	Less: cost of goods sold	10b				
$\dashv$	С	Net income or (loss) from sales of inventory					
S			Business Code				
Miscellaneous Revenue	11 a	· <u></u>	_				
ane	b		_				
e Ke	С		_				
Ais	d	All other revenue					
	е	Total. Add lines 11a-11d	<b></b>				
	12	Total revenue See instructions	<b>▶</b>	1 321 903.	0.	1 0	812 415.

Section 501(c)(3) and 501(c)(4) organizations	must complete all columns All other	ar organizations must complete column (A)
Section 30 (C)(3) and 30 (C)(4) organizations	must complete all columns. All other	organizations must complete column (A).

	Check if Schedule O contains a response tinclude amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
	, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
	Grants and other assistance to domestic organizations	139,007.	139,007.		
	nd domestic governments. See Part IV, line 21	139,007.	139,007.		
	Grants and other assistance to domestic				
	ndividuals. See Part IV, line 22				
	organizations, foreign governments, and foreign and individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	rustees, and key employees	73,887.	51,721.		22,166.
	Compensation not included above to disqualified	7370070	31/1210		22,1000
	ersons (as defined under section 4958(f)(1)) and				
	ersons described in section 4958(c)(3)(B)				
	Other salaries and wages	65,297.	45,707.		19,590.
	rension plan accruals and contributions (include	33,2310	10,1010		±2,330°
	ection 401(k) and 403(b) employer contributions	4.164	2,915.		1.249.
	Other employee benefits	4,164.	10,209.		1,249. 4,375.
	Payroll taxes	10,267.	7,187.		3,080.
	ees for services (nonemployees):	20/20/0	7,2070		2,000
	Management				
	egal				
	Accounting	60,900.	60,900.		
	obbying	00/2000	0075000		
	Professional fundraising services. See Part IV, line 17				
	nvestment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
_	olumn (A) amount, list line 11g expenses on Sch O.)	30,181.	30,181.		
	Advertising and promotion	3072020	30,2021		
	Office expenses	20,555.	20,555.		
	nformation technology	22,727.	22,727.		
	Royalties	2277270	22,7270		
	Occupancy	35,127.	35,127.		
	ravel	00/==/	00,122.0		
	Payments of travel or entertainment expenses				
	or any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	nterest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	51,881.	48,768.		3,113.
		32,228.	32,228.		-,
	Ither expenses. Itemize expenses not covered	,	-=,		
a	bove (List miscellaneous expenses on line 24e. If				
	ne 24e amount exceeds 10% of line 25, column (A) mount, list line 24e expenses on Schedule 0.)				
	ASSOCIATION DUES	57,852.	57,852.		
_	MISCELLANEOUS	24,657.	24,657.		
_	EVENT COSTS	22,305.	22,305.		
_	TRAINING AND EDUCATION	8,630.	8,630.		
_	All other expenses	-,	-,		
	otal functional expenses. Add lines 1 through 24e	674,249.	620,676.	0.	53,573.
	oint costs. Complete this line only if the organization	, = = = v	.,		,
	eported in column (B) joint costs from a combined				
	ducational campaign and fundraising solicitation.				
	theck here if following SOP 98-2 (ASC 958-720)				

Form 990 (2020)

Part X | Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	ote to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			417,043.	1	468,732.
	2	Savings and temporary cash investments			101,404.	2	2,986,358.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			8,496.	4	600.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul	ostantial co	ntributor, or 35%			
		controlled entity or family member of any of the	nese persor	ns		5	
	6	Loans and other receivables from other disqualified persons (as defined					
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
Ø	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
As	9	Prepaid expenses and deferred charges		9	8,670.		
	10a	Land, buildings, and equipment: cost or other	.				
		basis. Complete Part VI of Schedule D	10a	1,875,193.			
	b	Less: accumulated depreciation	10b		409,465.	10c	385,910.
	11	Investments - publicly traded securities			15,889,315.	11	17,458,263.
	12	Investments - other securities. See Part IV, lin				12	
	13	Investments - program-related. See Part IV, lin	e 11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			969,238.	15	1,138,869.
	16	Total assets. Add lines 1 through 15 (must e			17,794,961.	16	22,447,402.
	17	Accounts payable and accrued expenses	29,200.	17	21,233.		
	18	Grants payable		591,928.	18	391,928.	
	19	Deferred revenue			185,086.	19	195,633.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV of	Schedule D		21	
es	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, sul					
iab		controlled entity or family member of any of the				22	
	23	Secured mortgages and notes payable to unr		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	•	·	21 005		0
		of Schedule D			31,895.		0.
	26			► ▼	838,109.	26	608,794.
တ္		Organizations that follow FASB ASC 958, c	heck here				
nce		and complete lines 27, 28, 32, and 33.			5,923,613.	07	7,400,657.
alaı	27	Net assets without donor restrictions			11,033,239.	27	14,437,951.
d B	28	Net assets with donor restrictions			11,033,239.	28	14,437,931.
Ē		Organizations that do not follow FASB ASC	958, cnec	k nere			
P		and complete lines 29 through 33.	4.			00	
sts	29	Capital stock or trust principal, or current fund				29	
SSE	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			16,956,852.	31 32	21,838,608.
ž	32	Total net assets or fund balances			17,794,961.	33	22,447,402.
	33	Total liabilities and net assets/fund balances			11,134,3U1.	<b>ა</b> პ	44,441,404.

Form **990** (2020)

Form **990** (2020)

Ра	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	.,32	1,9	03.
2	Total expenses (must equal Part IX, column (A), line 25)	2		67	4,2	49.
3	Revenue less expenses. Subtract line 2 from line 1	3		64	7,6	54.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16	,95	6,8	52.
5	Net unrealized gains (losses) on investments	5	4	1,23	4,1	02.
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	21	.,83	8,6	08.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?	•		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin					
	Act and OMB Circular A-133?	•		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed auc	lit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3h		

### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF NASHVILLE, INC.

Employer identification number

62-0476815

Pa	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.								
The	organ	nization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	I)(A)(i).		
2		A school described in secti	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990 or 99	90-EZ).)			
3		A hospital or a cooperative					i).		
4	一	A medical research organization					•	the hospital's name.	
•		city, and state:	a.i.o., opolatoa .i. oo.	nganisansin man a nisepitan		0001.0		and noophal o name,	
5		An organization operated for	or the benefit of a col	llege or university owned	l or operate	ed by a go	vernmental unit describe	ed in	
		section 170(b)(1)(A)(iv). (Complete Part II.)							
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in							
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in <b>section 170(b)(</b>	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a land-grant	college	
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the r	name, city	, and state of the college	or	
		university:							
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership fees, and	d gross receipts from	
		activities related to its exem	npt functions, subjec	t to certain exceptions;	and (2) no	more than	33 1/3% of its support f	rom gross investment	
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	ıfter June 30, 1975.	
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclusi	ively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform tl	he functio	ns of, or to carry out the	purposes of one or	
		more publicly supported org	ganizations describe	d in <b>section 509(a)(1)</b> d	r <b>section</b> :	509(a)(2).	See <b>section 509(a)(3).</b> (	Check the box in	
		lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and 12g.		
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving	
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustees of the su	pporting	
		organization. You must o	omplete Part IV, Se	ections A and B.					
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by hav	ring	
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported	
		organization(s). You mus	t complete Part IV,	Sections A and C.					
c	: [	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,	
		its supported organization	n(s) (see instructions)	). You must complete I	Part IV, Se	ctions A,	D, and E.		
c		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection v	vith its supported organiz	zation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and an attentiv	/eness	
		requirement (see instructi	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	V.		
e		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type II, Type III		
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						
		vide the following information							
	(	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) IS the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other	
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
_									
Tota	al								

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	535,737.	597,979.	539,016.	594,874.	509,488.	2777094.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	535,737.	597,979.	539,016.	594,874.	509,488.	2777094.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						13,222.	
	Public support. Subtract line 5 from line 4.						2763872.	
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
	Amounts from line 4	535,737.	597,979.	539,016.	594,874.	509,488.	2777094.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,	005 017	200 676	250 102	252 622	244 010	1 ( 4 ) ) 4 1	
	and income from similar sources	285,017.	308,676.	350,103.	353,633.	344,912.	1642341.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)						4419435.	
	<b>Total support.</b> Add lines 7 through 10	-1- /	>			40	354,963.	
12	Gross receipts from related activities,	-				12	334,303.	
13	First 5 years. If the Form 990 is for the	-					▶□	
Sec	organization, check this box and storetion C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •				
	D. I. II			column (f))		14	62.54 %	
15	Public support percentage from 2019					15	63.89 %	
	<b>33 1/3% support test - 2020.</b> If the o							
	stop here. The organization qualifies	-					. (77)	
b	33 1/3% support test - 2019. If the o	. ,	•					
	and <b>stop here.</b> The organization qual							
17a	10% -facts-and-circumstances test							
	and if the organization meets the facts	-						
	meets the facts-and-circumstances te						<b>.</b> —	
b	10% -facts-and-circumstances test	•	•					
	more, and if the organization meets th	ū				•		
	organization meets the facts-and-circu						<b>&gt;</b>	
18	<b>Private foundation.</b> If the organizatio							

# 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organizat	ion,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2019					16	65.84 %
	ction D. Computation of Inves						
17	Investment income percentage for 20					17	%
18	Investment income percentage from					18	33.48 %
19	a 33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization quali	fies as a publicly s	supported organiza	tion	▶□
k	33 1/3% support tests - 2019. If the	•			•	•	
	line 18 is not more than 33 1/3%, che	ck this box and st	t <b>op here.</b> The orga	nization qualifies a	as a publicly suppo	orted organization	▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	

# Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in 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 in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
-		
2		
За		
- Ou		
3b		
3с		
4-		
4a		
4b		
4c		
5a		
5b		
5c		
6		L
-		
7		
8		
9a		
Ja		
9b		
9с		
10a		
10b		
n 990 or 99	90-EZ)	2020
	- <b></b> /	

Par	t 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 in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in <b>Part VI.</b>	11c		
Sect	ion 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 one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the toxy year?			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
	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		
Sect	ion 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			
Soot	the supported organization(s). ion D. All Type III Supporting Organizations	1		
Seci	DI D. All Type III Supporting Organizations		l	Γ
			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			
0	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	2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
3	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 <b>Part VI</b> the role the organization's			
	, , , , , , , , , , , , , , , , , , ,	3		
Sect	supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns)		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instruction	ns)	
2	Activities Test. Answer lines 2a and 2b below.	,	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in 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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
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.

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

5

6

Schedule A	(Form	990	or 990	)-EZ)	2020

5

Income tax imposed in prior year

instructions).

**Distributable Amount.** Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Sche	dule A (Form 990 or 990-EZ) 2020 THE JUNIOR LEA			6	2-04/6815 Page <b>7</b>
Pai	rt V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continu</sub>	ıed)	
Sect	ion D - Distributions				Current Year
_1_	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
_3_	Administrative expenses paid to accomplish exempt purpose	es 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 (describe in Part VI). See instructions.			6	
_7_	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which th	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ıs	(iii) Distributable Amount for 2020
_1_	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7:				
а	Applied to underdistributions of prior years				

Schedule A (Form 990 or 990-EZ) 2020

**b** Applied to 2020 distributable amount

Part VI. See instructions.

and 4c. 8 Breakdown of line 7: a Excess from 2016 **b** Excess from 2017 c Excess from 2018 d Excess from 2019 e Excess from 2020

c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2021. Add lines 3j

Schedule A	(Form 990 or 99	90-EZ) 20	20 THE	JUNIOR	LEAGUE	OF	NAS	HVILLE,	INC.	62-0476815 P	age 8
Part VI	Supplemer	ntal Info	ormation	1. Provide the	explanations	require	ed by Pa	art II, line 10; I	Part II, line 17	7a or 17b; Part III, line 12;	
	Part IV, Section	on A, lines	s 1, 2, 3b, 3	3c, 4b, 4c, 5a,	6, 9a, 9b, 9c,	11a, 1	1b, and	11c; Part IV,	Section B, Iir	nes 1 and 2; Part IV, Section C, Part V, Section B, line 1e; Part \	,
	Section D, line	es 5, 6, ar	nd 8; and F	Part V, Section	E, lines 2, 5, a	and 6.	Also co	mplete this pa	art for any ad	ditional information.	ν,
	(See instruction	ons.)									
	<u> </u>										
-											
- <u></u>											
	<u> </u>										

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

0000

2020

OMB No. 1545-0047

Name of the organization

Employer identification number

THE JUNIOR LEAGUE OF NASHVILLE, 62-0476815 INC. Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

Employer identification number

THE JUNIOR LEAGUE OF NASHVILLE, INC.

62-0476815

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_		\$12,500.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$15,000.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$31,895.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

# THE JUNIOR LEAGUE OF NASHVILLE, INC.

62-0476815

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Name of organization **Employer identification number** THE JUNIOR LEAGUE OF NASHVILLE, INC. 62-0476815 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(e) Transfer of gift

(c) Use of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(d) Description of how gift is held

(a) No. from

Part I

(b) Purpose of gift

# **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF NASHVILLE, INC. **Employer identification number** 62-0476815

Part	Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in v	•	
	are the organization's property, subject to the organization's		
	Did the organization inform all grantees, donors, and donor a	· ·	-
	for charitable purposes and not for the benefit of the donor o		
Part	impermissible private benefit?		
			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	`	Control of the Contro
	Preservation of land for public use (for example, recrea	· —	of a historically important land area
	Protection of natural habitat	Preservation c	of a certified historic structure
2	Preservation of open space	fied concernation contribution in the form	of a conservation assement on the last
	Complete lines 2a through 2d if the organization held a qualif day of the tax year.	ned conservation contribution in the form	Held at the End of the Tax Year
	<del>-</del>		0.
	Number of conservation easements on a certified historic stru	usture included in (a)	
	Number of conservation easements included in (c) acquired a		
	., .	· ·	
	listed in the National Register  Number of conservation easements modified, transferred, rel		
	year	eased, extinguished, or terminated by the	e organization during the tax
	Number of states where property subject to conservation eas	sement is located	
	Does the organization have a written policy regarding the per	•	-
	violations, and enforcement of the conservation easements it	0, . ,	
	Staff and volunteer hours devoted to monitoring, inspecting,		
Ĭ		rialianing of violations, and officioning con-	isolvation oddomento daring the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
		amig of violations, and officioning consolve	ation bacomonic damig the year
	Does each conservation easement reported on line 2(d) abov	re satisfy the requirements of section 170	)(h)(4)(B)(i)
	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footn	·	
	organization's accounting for conservation easements.	<u> </u>	
Part		f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet works
(	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in f	urtherance of public
,	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these iter	ns.
b I	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	balance sheet works of
á	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
-	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
			<b>.</b> .
	If the organization received or held works of art, historical treation		
	the following amounts required to be reported under FASB A		
	Revenue included on Form 990, Part VIII, line 1	_	<b>&gt;</b> \$
	Assets included in Form 990, Part X		

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		125,000.		125,000.
<b>b</b> Buildings		1,426,932.	1,181,259.	245,673.
c Leasehold improvements				
d Equipment				
e Other		323,261.	308,024.	15,237.
Total, Add lines 1a through 1e. (Column (d) must equa	J Form 990 Part V colum	nn (P) lino 10c )		385,910.

Schedule D (Form 990) 2020

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 end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	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 end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
<u>(8)</u> (9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	_ I		
Complete if the organization answered "Yes'	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a	) Description		(b) Book value
(1) BENEFICIAL INTEREST IN FU	IND		1,138,869.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
Total. (Colymn (b) must equal Form 990, Part X, col. (B) lir	20.15 \		1,138,869.
Part X Other Liabilities.	<u>le 13.,                                    </u>		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	05.)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin		o the organization's financial statements that	

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

	dule D	FOR 990, 2020 1111 0 014 1011 11110 0 1 14110 11 411	<u>, uu</u>	1110.	0 2	Offooto rage
Pai	rt XI	Reconciliation of Revenue per Audited Financial Statement	s Witl	n Revenue per Re	turn.	
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total r	evenue, gains, and other support per audited financial statements			1	5,580,783.
2	Amour	nts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net un	realized gains (losses) on investments	2a	4,234,102.		
b	Donate	ed services and use of facilities	2b			
С		eries of prior year grants	2c			
d		(Describe in Part XIII.)	2d	24,778.		
е	Add lir	nes 2a through 2d			2e	4,258,880.
3	Subtra	ct line <b>2e</b> from line <b>1</b>			3	1,321,903.
4		nts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investr	ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b			
С	Add lir	nes <b>4a</b> and <b>4b</b>			4c	0.
5	Total r	evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,321,903.
Pa	rt XII	Reconciliation of Expenses per Audited Financial Statemen	its Wi	th Expenses per F	Retur	n.
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total e	expenses and losses per audited financial statements			1	699,027.
2	Amour	nts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donate	ed services and use of facilities	2a		.	
b	Prior y	ear adjustments	2b		.	
С	Other	osses	2c		.	
d	Other	(Describe in Part XIII.)	2d	24,778.		
е	Add lir	nes 2a through 2d			2e	24,778.
3	Subtra	ct line <b>2e</b> from line <b>1</b>			3	674,249.
4		nts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investr	ment expenses not included on Form 990, Part VIII, line 7b	4a		.	
b	Other	(Describe in Part XIII.)	4b			
С	Add lir	nes <b>4a</b> and <b>4b</b>			4c	0.
5	Total e	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	674,249.

## Part XIII Supplemental Information.

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

### PART V, LINE 4:

THE ORGANIZATION'S APPROACH TO THE BOARD DESIGNATED INVESTMENTS IS TO MAINTAIN THE ACCUMULATED BALANCES AND PROTECT THE PRINCIPAL INVESTED. LEAGUE HAS IMPOSED A RESTRICTION ON THE ENDOWMENT FUND THAT NOTHING MAY BE SPENT UNTIL THE VALUE OF THE ENDOWMENT EXCEEDS \$1 MILLION.

THE LEAGUE'S INTENTION WITH REGARD TO THE PERMANENT ENDOWMENTS IS TO MAINTAIN THE INITIAL GIFT IN PERPETUITY; INVESTMENT EARNINGS MAY BE USED TO SUPPLEMENT THE ANNUAL OPERATING BUDGET OF THE LEAGUE AT THE DIRECTION THE BOARD OF DIRECTORS, OR MAY BE USED TO PROVIDE STRATEGIC INVESTMENTS TO THE COMMUNITY THAT ALIGN WITH THE LEAGUE'S MISSION AND VISION.

Schedule D (Form 990) 2020 THE JUNIOR LEAGUE OF NASHVILLE, INC.	62-0476815 Page <b>5</b>
Part XIII   Supplemental Information (continued)	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENTS DIRECT EXPENSES	24,778.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENTS DIRECT EXPENSES	24,778.

### **SCHEDULE G**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization						Employer ide	ntification number
THE JUN	IOR LEAGUE OF NASH	VILI	LΕ,	INC.		62-0476	815
Part I Fundraising Activities. required to complete this par	<ul> <li>Complete if the organization answet.</li> </ul>	red "Y	'es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais	e Solicita	tion of	non-g gover	overnment grants nment grants			
<ul> <li>2 a Did the organization have a written of key employees listed in Form 990, P</li> <li>b If "Yes," list the 10 highest paid individendments of the compensated at least \$5,000 by the</li> </ul>	art VII) or entity in connection with providuals or entities (fundraisers) pursua	rofessi	onal fu	undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	to (d	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
			<b>•</b>				
List all states in which the organization or licensing.	on is registered or licensed to solicit o	ontrib	utions	or has been notified	it is e	exempt from re	gistration

S	2	Cash prizes								
Direct Expenses	3	Noncash prizes								
irect E	4	Rent/facility costs								
	5	Other direct expenses						_		
	6	Volunteer labor		│ Yes % │ No	Yes % No		│ Yes │ No	. %		
	7	Direct expense summary. Add lines 2 through	5 in	ı column (d)	 			▶		
	8	Net gaming income summary. Subtract line 7	from	n line 1, column (d)	 					
9	En	er the state(s) in which the organization condu	cts g	gaming activities: _						
		he organization licensed to conduct gaming ac No," explain:							Yes	☐ No
	_									
		re any of the organization's gaming licenses re				year?	·		Yes	No No
	_									
03208	2 11	-25-20					Schedule G	(Form	990 or 990	-EZ) 2020

Sch	edule G (Form 990 or 990-EZ) 2020 THE JUNIOR LEAGUE OF NASHVILLE, INC. 62-0	14768	15 Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?	Ye	es 🔲 No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Ye	es No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
		13b	
	An outside facility	130	90
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	<b></b> Ye	es No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party > \$		
С	s If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Ye	es No
h	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
-	organization's own exempt activities during the tax year > \$		
Pa	irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III is a column of the	t III lines	9 9h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	t III, III 163	5 5, 50, 100,

Schedule G	i (Form 990 or 990-EZ)	THE	JUNIOR	LEAGUE	OF	NASHVILLE,	INC.	62-0476815	Page 4
Part IV	(Form 990 or 990-EZ) <b>Supplemental Info</b>	rmation	(continued)						

# SCHEDULE (Form 990)

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

OMB No. 1545-0047

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

► Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

Open to Public Inspection **Employer identification number** 

62-0476815

Name of the organization

Department of the Treasury Internal Revenue Service

X 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection General Information on Grants and Assistance criteria used to award the grants or assistance? Part I

INC.

NASHVILLE

P

THE JUNIOR LEAGUE

**ջ** 

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

1 (a) Name and address of organization or government     (b) EIN     (c) IRC section (d) Amount of (f applicable)	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							FUNDING WAS PROVIDED TO
BOOK 'EM							SUPPORT PROGRAMMING THAT
161 RAINS AVENUE							INCREASES ACCESS TO
NASHVILLE, TN 37203	58-2000621	501(C)3	15,785.	0.			LITERARY MATERIALS AND
							FUNDING WAS PROVIDED FOR
END SLAVERY TENNESSEE							THE CREATION AND PRINTING
P.O. BOX 160069							OF MARKETING MATERIALS,
NASHVILLE, TN 37216	45-4955577	501(C)3	14,130.	0.			INCLUDING A POP-UP
							FUNDING WAS PROVIDED FOR
MCNEILLY CHILD CARE CENTER							CLASSROOM LITERACY
100 MERIDIAN STREET							ACTIVITIES, LITERACY
NASHVILLE, TN 37207	62-0479366	501(C)3	11,116.	0.			CELEBRATIONS, AND
MONROE CARELL JR. CHILDREN'S							FUNDING WAS PROVIDED TO
HOSPITAL - 2200 CHILDREN'S WAY -							SUPPORT HOME PROGRAMS AT
NASHVILLE, TN 37212	35-2528741	501(C)3	6,293.	0.			VANDERBILT
							FUNDING WILL ALLEVIATE
MONROE HARDING							SOME OF THE EXPENSES OF
1 VANTAGE WAY SUITE 1-165							YOUNG ADULTS MEALS,
NASHVILLE, TN 37228	62-0476670	501(C)3	8,500.	0			GROCERIES, AND
							FUNDING WAS PROVIDED FOR
MOVES AND GROOVES							THE READING CORNER,
2275 MURFREESBORO PIKE #101							NOTEBOOKS AND OTHER
NASHVILLE, TN 37217	68-0516440 501(C)3	501(C)3	7,700.	0.			SUPPLIES, STUDENT LAPTOPS
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	d government org	anizations listed in the					13.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

(a) Name and address of organization or government	( <b>a</b> )	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OASIS CENTER 1704 CHARLOTTE AVENUE, STE 200 NASHVILLE, TN 37203	62-0968273	501(C)3	11,989.	0			FUNDING WAS PROVIDED TO SUPPORT THE STREET OUTREACH PROGRAM AND EMERGENCY SHELTER.
PENCIL, INC 7199 COCKRILL BEND BLVD NASHVILLE, TN 37209	58-1475675	501(C)3	.996,9	.0			FUNDING WAS PROVIDED FOR LITERACY ACTIVITIES, INCLUDING INCREASE ACCESS TO LITERARY MATERIALS, ENGINEER OF THE PROVIDED INC.
RENEWAL HOUSE P.O. BOX 280356 NASHVILLE, TN 37228	62-1631055	501(C)3	6,000.	.0			FUNDING WAS PROVIDED TO SUPPORT HUMAN TRAFFICKING PREVENTION EFFORTS, INCLUDING EDUCATIONAL
SAFE HAVEN FAMILY SHELTER 1234 3RD AVE S NASHVILLE, TN 37210	62-1807653	501(C)3	13,403.	.0			FUNDING WAS PROVIDING FOR SAFE HAVEN FAMILY SHELTER RESIDENTS' TUITION TO VANDERBILT READING CLINIC
SEXUAL ASSAULT CENTER 101 FRENCH LANDING DR NASHVILLE, TN 37228	62-1043294 501(C)3	501(C)3	6,000.	.0			FUNDING WAS PROVIDED TO CREATE TWO PREVENTION VIDEOS, EACH HIGHLIGHTING DIFFERENT AUDIENCE'S AND
YOU HAVE THE POWER 2401 WHITE AVENUE NASHVILLE, TN 37204	62-1616253	501(C)3	10,000.	•0			FUNDING WAS PROVIDED FOR THE SPANISH TRANSLATION, TRANSCRIPTION, AND SUBTITLES OF THE "NO
YOUTH VILLAGES 3310 PERIMETER DRIVE NASHVILLE, TN 37211	58-1716970	501(C)3	10,500.	0.			FUNDING WAS PROVIDED FOR LITERACY ACTIVITIES, INCLUDING INCREASE ACCESS TO LITERARY MATERIALS,
							Schedule I (Form 990)

INC. THE JUNIOR LEAGUE OF NASHVILLE,

Page 2

62-0476815

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. Schedule I (Form 990) 2020

Part III Grants and Oth

(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		e 2; Part III, column (	Part I, line 2; Part III, column (b); and any other additional information.	ditional information.	
PART I, LINE 2:					
AS A PART OF RECEIVING FUNDS FROM THE		R LEAGUE O	JUNIOR LEAGUE OF NASHVILLE,	s, THE	
ENTITY MUST ALLOW A JUNIOR LEAGUE MEMBER	IEMBER TO	ACT AS A	TO ACT AS A LIAISON AND MONITOR	) MONITOR	
THE AGENCIES PERFORMANCE, FINANCIAL VIABILITY,	. VIABILI	TY, AND USE	0 된	THE JUNIOR LEAGUE	
FUNDS.					

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: BOOK'EM

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED TO SUPPORT

PROGRAMMING THAT INCREASES ACCESS TO LITERARY MATERIALS AND EDUCATIONAL SUPPORT AND DECREASES ACHIEVEMENT GAPS FOR AT-RISK CHILDREN AND FAMILIES.

NAME OF ORGANIZATION OR GOVERNMENT: END SLAVERY TENNESSEE

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED FOR THE

CREATION AND PRINTING OF MARKETING MATERIALS, INCLUDING A POP-UP BANNER,

BROCHURES AND BOOSTING SOCIAL MEDIA POSTS.

NAME OF ORGANIZATION OR GOVERNMENT: MCNEILLY CHILD CARE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED FOR CLASSROOM

LITERACY ACTIVITIES, LITERACY CELEBRATIONS, AND TAKE-HOME BOOKS AND

WRITING MATERIALS FOR CHILDREN AND FAMILIES AT THE MCNEILLY CHILD CARE

CENTER.

NAME OF ORGANIZATION OR GOVERNMENT: MONROE HARDING

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WILL ALLEVIATE SOME OF THE

EXPENSES OF YOUNG ADULTS MEALS, GROCERIES, AND TRANSPORTATION AS THEY

SEEK MENTAL AND EMOTIONAL HELP, A MORE STABLE JOB, AND / OR PURSUE THEIR

EDUCATION.

NAME OF ORGANIZATION OR GOVERNMENT: MOVES AND GROOVES

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED FOR THE READING

CORNER, NOTEBOOKS AND OTHER SUPPLIES, STUDENT LAPTOPS AND HEADPHONES AND

STUDENT INCENTIVES.

NAME OF ORGANIZATION OR GOVERNMENT: PENCIL, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED FOR LITERACY

ACTIVITIES, INCLUDING INCREASE ACCESS TO LITERARY MATERIALS, EDUCATIONAL

SUPPORT AND IDENTIFY AND MINIMIZE THE ACHIEVEMENT GAPS FOR AT-RISK

CHILDREN

NAME OF ORGANIZATION OR GOVERNMENT: RENEWAL HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED TO SUPPORT

HUMAN TRAFFICKING PREVENTION EFFORTS, INCLUDING EDUCATIONAL MATERIALS,

ACCESS TO PROGRAMS TO PREVENT AN INCREASE IN THE NUMBER OF VICTIMS AND

PROGRAMS THAT ASSIST SURVIVORS OF HUMAN TRAFFICKING TO BEGIN RECOVERY.

NAME OF ORGANIZATION OR GOVERNMENT: SAFE HAVEN FAMILY SHELTER

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDING FOR SAFE HAVEN

FAMILY SHELTER RESIDENTS' TUITION TO VANDERBILT READING CLINIC AND

TRANSPORTATION TO THE CLINIC AND OTHER LITERACY-BASED EVENTS.

NAME OF ORGANIZATION OR GOVERNMENT: SEXUAL ASSAULT CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED TO CREATE TWO

PREVENTION VIDEOS, EACH HIGHLIGHTING DIFFERENT AUDIENCE'S AND ASPECTS OF

PREVENTION WORK.

NAME OF ORGANIZATION OR GOVERNMENT: YOU HAVE THE POWER

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED FOR THE SPANISH

TRANSLATION, TRANSCRIPTION, AND SUBTITLES OF THE "NO GIRLS DREAM"

DOCUMENTARY.

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH VILLAGES

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WAS PROVIDED FOR LITERACY

ACTIVITIES, INCLUDING INCREASE ACCESS TO LITERARY MATERIALS, EDUCATIONAL

SUPPORT AND IDENTIFY AND MINIMIZE THE ACHIEVEMENT GAPS FOR AT-RISK

Schedule I	(Form 990)	THE JUNIOR	LEAGUE O	F NASHVILLE,	INC.	62-0476815	Page 2
Part IV	(Form 990) Supplemental Inf	ormation					
CHILDF	REN						

## **SCHEDULE 0**

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

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

**Open to Public** 

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

THE JUNIOR LEAGUE OF NASHVILLE,

**Employer identification number** 62-0476815

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:						
DEVELOPING THE POTENTIAL OF WOMEN AND IMPROVING THE COMMUNITY THROUGH						
EFFECTIVE ACTION AND LEADERSHIP OF TRAINED VOLUNTEERS.						
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:						
CHARITABLE.						
FORM 990, PART VI, SECTION A, LINE 7A:						
THE NOMINATING COMMITTEE OF THE BOARD PREPARES A SLATE BASED ON						
QUALIFICATIONS OF CANDIDATES FOR UPCOMING BOARD POSITIONS. THE SLATE IS						
PRESENTED TO THE ENTIRE MEMBERSHIP FOR VOTE.						
FORM 990, PART VI, SECTION A, LINE 7B:						
BYLAW CHANGES ARE VOTED ON BY ALL MEMBERS.						
FORM 990, PART VI, SECTION A, LINE 8B:						
MINUTES AT COMMITTEE MEETINGS ARE NOT TAKEN.						
FORM 990, PART VI, SECTION B, LINE 11B:						
A DRAFT COPY OF THE 990 IS EMAILED TO THE BOARD FOR REVIEW PRIOR TO FILING.						
FORM 990, PART VI, SECTION B, LINE 12C:						
ANY CONFLICTS THAT ARISE ARE DISCUSSED AT BOARD MEETINGS AND DOCUMENTED.						
EACH CONFLICT THAT ARISES IS DEALT WITH ON A CASE BY CASE BASIS.						

Name of the organization THE JUNIOR LEAGUE OF NASHVILLE, INC.	Employer identification number 62-0476815
COMPENSATION IS DETERMINED BY THE BOARD, AND IS BASED ON P	ERFORMANCE AND
MARKET VALUE FOR THAT POSITION.	
FORM 990, PART VI, SECTION C, LINE 19:	
ANNUAL FINANCIAL STATEMENTS CAN BE FOUND ON WWW.GIVINGMATT	ERS.COM.
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE ON	ILY MADE AVAILABLE
UPON REQUEST TO WOMEN WHO ACTIVELY PARTICIPATE IN THE ORGA	NIZATION'S
EFFORTS.	