## Form **990**

## **Return of Organization Exempt from Income Tax**

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

OMB No. 1545-0047

Depa	artment of the Treasury		(except black lur	•	•		•			Open to P	
	nal Revenue Service The organization may have to use a copy of this return to satisfy state reporting require							ts.		<u> </u>	
_		dar year, o	or tax year beginning 6/0	1	, 2004, an	d endin			٠,	2005	
В	Check if applicable:	Please use	THE THINTOD LEACHE		TTT TNO	,				ntification Number	
	Address change	IRS label or print	THE JUNIOR LEAGUE 2405 CRESTMOOR RD.	OF NASHVI	LLLE, INC	- •	-			6815	
	Name change	or type. See	NASHVILLE, TN 3721	5				E Telepho			
	Initial return	specific instruc-					-			69-9393	<del> </del>
	Final return	tions.						F Accoun			Accrual
	Amended return	<u> </u>							` '	ecify)	
	Application pending	Section	on 501(c)(3) organizations and table trusts must attach a com	4947(a)(1) no	nexempt		I are not applica				37
			n 990 or 990-EZ).	picted Scried	uic A	, ,	Is this a group			1	X No
G	Web site: ► HTTI	://JLN	ASHVILLE.ORG/			` `	If 'Yes,' enter r				
J	Organization type					H (c)	Are all affiliate (If 'No,' attach			11	No
,	(check only one)	▶	X 501(c) 3 ◀ (insert no	o.) 4947(a)	(1) or 527	7				•	
K	Check here ► i	f the organ	nization's gross receipts are no	rmally not mo	re than	H (a)	Is this a separ organization c				V
			eed not file a return with the IR			-			•	103	X No
	received a Form 990 Package in the mail, it should file a return without financial data.  Some states require a complete return.					_					
_		-		2 064 900	)	M			9	ation is <b>not</b> require J. 990-EZ. or 990-P	
Pa			8b, 9b, and 10b to line 12 ► 3			lanasa		`	111 330	i, 330-LZ, 01 330-1	).
Га			, <u>, , , , , , , , , , , , , , , , , , </u>		r Fullu Da	iances	(See mstru	ctions)			
			ants, and similar amounts recei		1	1.	779,	600			
	· ·					1a 1b	119,	090.			
		• • •				1 c		_			
			ons (grants)						1 d	770	,698.
			ue including government fees a						2	119	, 090.
	~		assessments		•	, 11116 9.	7 Y		3		
			I temporary cash investments.						4		
		•	from securities			<b></b>			5	97	,007.
				- 1		6a			,	07	,007.
						6b		_			
		•	oss) (subtract line 6b from line	63)		OD			6с		
_		-	ne (describe	<i>Oa).</i>					7		
R E V E N				(A) Secu	urities		(B) Other		_		
E			es of assets other			8a	(-)				
U		,	is and sales expenses			8b					
Е			le) STATEMENT . 1			8c					
			bine line 8c, columns (A) and			<u> </u>			8d	235	,238.
			ivities (attach schedule). If any			heck he	re ►	_	-		,
			luding \$ 150,7								
					1	9a	374,	025.			
		•	other than fundraising expense			9b	207,				
		•	om special events (subtract line		<u> </u>		S.TATEME.	NT 2	9с	166	,818.
			y, less returns and allowances		1	0a	60,	848.			
	<b>b</b> Less: cost of	goods sol	- d		1	0 b	37,	438.			
	c Gross profit or (	loss) from sa	les of inventory (attach schedule) (subt	ract line 10b from	ı line 10a)		STATEME	NT. 3	0с	23	,410.
	11 Other revenu	e (from Pa	art VII, line 103)						11		
			s 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c,						2	1,292	, 171.
Е			n line 44, column (B))						13	1,004	$\overline{077}$ .
X	-		ral (from line 44, column (C)).						4		
E N			44, column (D))						15	229	,561.
S E S	16 Payments to	affiliates (	(attach schedule)					[1	16		
S	17 Total expens	es (add lir	nes 16 and 44, column (A))	<u> </u>	<u></u>	<u></u> .	<u></u>	1	17	1,233	,638.
Δ			he year (subtract line 17 from						18	58	,533.

Net assets or fund balances at end of year (combine lines 18, 19, and 20) . . . .

Net assets or fund balances at beginning of year (from line 73, column (A)).....

20

21

THE JUNIOR LEAGUE OF NASHVILLE, INC. 62-0476815

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

Do not include amounts reported on lin 6b, 8b, 9b, 10b, or 16 of Part I.	ne	(A) Total	<b>(B)</b> Program services	(C) Management and general	(D) Fundraising	
22 Grants and allocations (att sch) SEE ST	M 5					
(cash \$ 294,222.		204 222	204 222			
	22	294,222.	294,222.			
<ul><li>Specific assistance to individuals (att sch)</li><li>Benefits paid to or for members (att sch)</li></ul>						
25 Compensation of officers, directors, etc		100,105.	80,239.		19,866.	
<b>26</b> Other salaries and wages		60,102.	48,175.		11,927.	
<b>27</b> Pension plan contributions		7,214.	5,807.		1,407.	
28 Other employee benefits		,	,		,	
<b>29</b> Payroll taxes		15,753.	13,354.		2,399.	
<b>30</b> Professional fundraising fees	30	·	,		,	
31 Accounting fees	31					
<b>32</b> Legal fees	32					
<b>33</b> Supplies		17,241.	10,619.		6,622.	
<b>34</b> Telephone		,	,		,	
35 Postage and shipping		21,372.	13,524.		7,848.	
<b>36</b> Occupancy						
<b>37</b> Equipment rental and maintenance.	37	33,747.	12,919.		20,828.	
<b>38</b> Printing and publications	38	65,496.	42,282.		23,214.	
<b>39</b> Travel	39	30,828.	14,574.		16,254.	
<b>40</b> Conferences, conventions, and meetings	40	8,527.	8,427.		100.	
<b>41</b> Interest	41	87,284.	52,868.		34,416.	
<b>42</b> Depreciation, depletion, etc (attach schedule).	42	124,289.	118,993.		5,296.	
<b>43</b> Other expenses not covered above (itemize):						
a SEE STATEMENT 6	43 a	367,458.	288,074.		79,384.	
b	43 b					
c	43 c					
d	43 d					
e	43 e	. 11				
Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D) carry these totals to lines 13 - 15	44	1,233,638.	1,004,077.	0.	229,561.	
Joint Costs. Check. If you are follow		2.			<u> </u>	
Are any joint costs from a combined educa	ational campa	ign and fundraising soli	citation reported in (B) F	rogram services?	. ► Yes X No	
f 'Yes,' enter (i) the aggregate amount of t	these joint cos	sts \$		mount allocated to Prog		
	nt allocated to	o Management and gen	eral \$	; and <b>(iv)</b> th	e amount allocated	
o Fundraising \$	<u> </u>					
Part III Statement of Program					I	
What is the organization's primary exempt		<u>COMMUNITY</u> S			Program Service Expenses (Required for 501(c)(3) and	
All organizations must describe their exem clients served, publications issued, etc. Dis zations and 4947(a)(1) nonexempt charital	pt purpose ac scuss achieve	chievements in a clear a ments that are not mea	and concise manner. Sta surable. (Section 501(c)	ate the number of	(4) organizations and 4947(a)(1) trusts; but optional for others.)	
					optional for others.)	
a TRAINS WOMEN FOR VOLUN		-				
	COMMUNITY PROGRAM SUPPORT WITH AN EMPHASIS ON THE JUNIOR LEAGUE HOME					
AT VANDERBILT CHILDREN'S HOSPITAL.						
		(Grants and	l allocations \$	)	1,004,077.	
b						
		(Grants and	allocations \$	)		
c						
<u>-</u>		(Grants and	allocations \$	)		
d						
- ·		`	l allocations \$	)		
e Other program services			allocations \$	)	1 004 055	
f Total of Program Service Expenses	(should equa	ı iine 44, column (B), P	rogram services)		1,004,077.	

## Part IV Balance Sheets (See Instructions)

Note	: l	Where required, attached schedules and amounts within to olumn should be for end-of-year amounts only.	he de	escription	<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	4	5 Cash — non-interest-bearing			331,884.	45	203,619.
	4	Savings and temporary cash investments			•	46	
	4	7a Accounts receivable	47 a				
		<b>b</b> Less: allowance for doubtful accounts	47 b		1,066.	47 c	
	4	<b>Ba</b> Pledges receivable	48 a	412,768.			
		<b>b</b> Less: allowance for doubtful accounts	48 b		967,718.	48 c	412,768.
	4	9 Grants receivable				49	
A S S E T S	5	Receivables from officers, directors, trustees, and key employees (attach schedule)	/ 			50	
Ē	5	1 a Other notes & loans receivable (attach sch)	51 a				
s		<b>b</b> Less: allowance for doubtful accounts	51 b			51 c	
	5	2 Inventories for sale or use			72,069.	52	42,244.
		3 Prepaid expenses and deferred charges				53	
		4 Investments – securities (attach schedule)SEES	ST 7	► Cost X FMV	9,944,409.	54	10,072,855.
	5	5a Investments – land, buildings, & equipment: basis.	55 a				
		<b>b</b> Less: accumulated depreciation (attach schedule).	55 b			55 c	
	5	Investments — other (attach schedule)				56	
		7a Land, buildings, and equipment: basis	57 a	3,447,050.			
		<b>b</b> Less: accumulated depreciation (attach schedule)	57 b	903,640.	2,633,413.	57 c	2,543,410.
	5	B Other assets (describe ►	0, 5	300/0101	61,533.	58	2,010,110.
		9 Total assets (add lines 45 through 58) (must equal lines 45 through 58)	ne 74)		14,012,092.	59	13,274,896.
	6				155,884.	60	32,657.
Ļ	6	· -	<b>4</b>		879,230.	61	585,158.
LIABILITIES	6	2 Deferred revenue	$A_{\nu}$		298,835.	62	299,838.
İ	6	3 Loans from officers, directors, trustees, and key employees (attach	chedu	e)		63	
Ļ	6	4a Tax-exempt bond liabilities (attach schedule)				64a	
į		<b>b</b> Mortgages and other notes payable (attach schedule)SEI	E . S.1	CATEMENT. 9	1,125,000.	64b	375,567.
Š	6	5 Other liabilities (describe ►. <u>SEE STATEMENT</u>	10	)		65	20,876.
		Total liabilities (add lines 60 through 65)			2,458,949.	66	1,314,096.
N	Org	anizations that follow SFAS 117, check here ► X an	d con	nplete lines 67			
N E T		through 69 and lines 73 and 74.					
	6	7 Unrestricted			2,393,131.		2,722,246.
ASSETS	6			The state of the s	9,160,012.	68	9,238,554.
Š	6	,	_	F		69	
O R	Org	anizations that do not follow SFAS 117, check here ►		and complete lines			
	_	70 through 74.					
F U N D	_	Capital stock, trust principal, or current funds		F		70	
	7	3,		F		71	
Ê		2 Retained earnings, endowment, accumulated income		Ţ.		72	
BALANCES	7	Total net assets or fund balances (add lines 67 throu 72; column (A) must equal line 19; column (B) must	gh 69 equal	or lines 70 through line 21)	11,553,143.	73	11,960,800.
3		4 Total liabilities and net assets/fund balances (add lin	14,012,092.	74	13,274,896.		

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

BAA

Par	Financia	iliation of Rever al Statements w urn (See instruc	ith	Revenue	Part	IV-B Reconcili Financial per Retur	Statements with	es n E	per Audited xpenses
а	Total revenue, gains, an	nd other support atements	а	2,219,330.	а	Total expenses and financial statements	losses per audited	а	1,811,673.
b	Amounts included not on line 12, For	on line <b>a</b> but		, ,	b	Amounts included or on line 17, Form 990	n line <b>a</b> but not		
(1)	Net unrealized	\$ <u>349,124.</u>			(1)	Donated services and use of facilities			
(2)	Donated services and use of facilities	\$ <u>333,390.</u>			(2)	Prior year adjust- ments reported on line 20, Form 990 \$	3		
` '	Recoveries of prior year grants § Other (specify):	\$			` ´	Losses reported on line 20, Form 990	3		
( )	SEE STM 11 S	\$ 244,645. (1) through (4)	b	927,159.		SEE STMT 12 \$ Add amounts on lines (1)		b	578,035.
С	Line <b>a</b> minus line <b>b</b>		С	1,292,171.	С	Line <b>a</b> minus line <b>b</b> .		С	1,233,638.
d	Amounts included Form 990 but not of	on line 12, on line <b>a:</b>			d	Amounts included or Form 990 but not on	n line 17,		,
	Investment expenses not included on line 6b, Form 990	\$				Investment expenses not included on line 6b, Form 990 \$ Other (specify):	3		
(2)	Other (specify).				(2)	Other (specify).			
	Add amounts on lii	\$	d			Add amounts on line	es (1) and (2)	d	
е	Total revenue per	line 12, Form		1 202 171	е	Total expenses per	ine 17, Form		1 222 620
Par		e d)		1,292,171. rustees, and Key		990 (line c plus line			1,233,638.
	(A) Name ar			B) Title and average hoper week devoted to position		(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benefi plans and deferre compensation	to t	(E) Expense account and other allowances
SEE	STATEMENT 1	.3	1						
			-			100,105.	5,00	5.	0.
						,	·		
			-						
			-						
			7						
75	than \$100,000 fro \$10,000 was pro	om vour organization	an orga	employee receive aggreç d all related organizatio anizations?	ns. of	which more than		▶ [	Yes X No

Pa	rt VI Other Information (See instructions.)		Yes	No	
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,'			Х	
attach a detailed description of each activity					
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		Х	
If 'Yes,' attach a conformed copy of the changes.					
	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78a 78b	N,	X / 2\	
	·	700	11/	71	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement.	79		Х	
٥٨.	a Is the organization related (other than by association with a statewide or nationwide organization) through common				
00 6	membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80a	Χ		
k	of If 'Yes,' enter the name of the organization FRIENDS OF JUNIOR LEAGUE OF NASH., INC.				
	and check whether it is $X$ exempt or nonexempt.				
	a Enter direct and indirect political expenditures. See line 81 instructions			3.7	
	b Did the organization file Form 1120-POL for this year?	81 b		Х	
82 a	a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	Х		
	b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)				
	a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X		
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	V	
	a Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Х	
k	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N,	/ A	
85	501(c)(4), (5), or (6) organizations. <b>a</b> Were substantially all dues nondeductible by members?	85a		/A	
	b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N,		
	If 'Yes' was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a				
	waiver for proxy tax owed for the prior year.				
	Dues, assessments, and similar amounts from members				
	d Section 162(e) lobbying and political expenditures				
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices				
	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85 q	N	/ Z	
		osg	11/	71	
,	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N,	/A	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on				
	line 12				
	Gross receipts, included on line 12, for public use of club facilities				
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders				
	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)				
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX.	88		Х	
	a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:  section 4911 ► 0. ; section 4955 ► 0.				
ŀ					
	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b		Х	
	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.			0.	
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.	
3U 8	a List the states with which a copy of this return is filed ► <u>TENNESSEE</u> • Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90b		$\frac{1}{4}$	
				4	
٠,	The books are in care of $\blacktriangleright$ COURTNEY ELY Telephone number $\blacktriangleright$ (615) 269-93 Located at $\blacktriangleright$ 2405 CRESTMOOR RD., NASHVILLE, TN ZIP + 4 $\blacktriangleright$ 37215	<u> </u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here	. N/	A	▶ 🔲	
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A	

Part VII	Analysis of income-Produc	ing Activities	(See instructions.)			
		Unrelated bus	siness income	Excluded by section	on 512, 513, or 514	(E)
<b>Note:</b> Ente otherwise i	er gross amounts unless indicated	(A)	(B)	(C)	(D)	Related or exempt
		Business code	Amount	Exclusion code	Amount	function income
	ogram service revenue:					
a b						
	_					
e						
f Med	dicare/Medicaid payments					
	s & contracts from government agencies					
<b>94</b> Mei	mbership dues and assessments					
95 Inter	rest on savings & temporary cash invmnts					
	idends & interest from securities			14	87,007.	
	rental income or (loss) from real estate:					
	ot-financed property					
	debt-financed property					
	rental income or (loss) from pers prop					
	ner investment income in or (loss) from sales of assets					
oth	er than inventory			18	235,238.	
<b>101</b> Net	income or (loss) from special events			1	166,818.	
	ss profit or (loss) from sales of inventory			2	23,410.	
	ner revenue: a					
b						
104 Cubi	total (add salumna (P) (D) and (F))				512,473.	
	total (add columns (B), (D), and (E))   t <b>al</b> (add line 104, columns (B), (D), a	nd (E))			512,475.	512,473.
	105 plus line 1d, Part I, should equa				··•···································	J12,473.
	Relationship of Activities t			emnt Purnoses	(See instructions)	
Line No.						
<b>∠</b>	Explain how each activity for which of the organization's exempt purpo	i income is reporte ses (other than by	ea in column (E) of providing funds fo	r such purposes).	a importantly to the a	accomplishment
N/A	3 111			1 1 /		
11/ 11	,	OU -				
Part IX	Information Regarding Tax	able Subsidia	ries and Disrec	narded Entities	(See instructions )	
I WITTIN	(A)	(B)	(C		(D)	(E)
Nama						
	address, and EIN of corporation, tnership, or disregarded entity	Percentage of ownership interest	Nature of	activities	Total income	End-of-year assets
N/A		8				
<u> </u>		%				
		%				
		%				
Part X	Information Regarding Tra	nsfers Associ	ated with Perse	onal Benefit Co	ontracts (See instr	uctions.)
<b>a</b> Did the	e organization, during the year, receive any fur	nds, directly or indirectly	y, to pay premiums on a	n personal benefit contra	ct?	. Yes X No
<b>b</b> Did th	ne organization, during the year, pay	premiums, directl	y or indirectly, on a	a personal benefit o	contract?	. Yes X No
Note: /	f 'Yes' to <b>(b),</b> file Form 8870 and For	m 4720 (see instru	uctions).			
	Under penalties of perjury, I declare that I have true, correct, and complete. Declaration of pre	re examined this return,	including accompanying	schedules and statement	s, and to the best of my kn	owledge and belief, it is
Diama	True, correct, and complete. Declaration of pre	parer (other than officer	) is based on all illiointa	mon or which preparer ha	s arry knowledge.	
Please Sign	Signature of officer				Date	
Sign Here	Signature of officer				Date	
	Type or print name and title.					
	Type of print hame and title.			Data	ا ا	renarer's SSN or DTIN (Soc
Paid	Preparer's signature			Date	Sell-	reparer's SSN or PTIN (See eneral Instruction W)
Pre- ˌ		M C HOLDE	DIIC		employed ► N	/A
parer's		N & HOWARD,			. 37 /7	
Use Only	employed), ► 3310 WEST EN		STE. 550		EIN ► N/A	E) 202 (E22
J.11y	ZIP + 4 NASHVILLE, I	N 3/2U3			Phone no. ► (61.	5) 383-6592

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

Department of the Treasury Internal Revenue Service

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

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

Supplementary Information — (See separate instructions.)

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

2004

OMB No. 1545-0047

Employer identification number Name of the organization 62-0476815 THE JUNIOR LEAGUE OF NASHVILLE, INC Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (e) Expense account and other (a) Name and address of each (b) Title and average (c) Compensation (d) Contributions employee paid more than \$50,000 to employee benefit plans and deferred hours per week devoted to position allowances compensation NONE Total number of other employees paid over \$50,000 ... Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services.

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

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

<b>Note:</b> You may use the worksheet in th	e instructions for conv	rerting trom the accru	ai to tne cash method	or accounting.	
Calendar year (or fiscal year beginning in).	<b>(a)</b> 2003	<b>(b)</b> 2002	<b>(c)</b> 2001	<b>(d)</b> 2000	<b>(e)</b> Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,158,069.	952,788.	1,148,487.	1,187,534.	4,446,878.
16 Membership fees received		,		·	·
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	435,583.	409,998.	459,429.	507,404.	1,812,414.
amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	67,195.	120,806.	310,206.	340,025.	838,232.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					
The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets SEE. STMT. 14	1,563.				1,563.
23 Total of lines 15 through 22	1,662,410.	1,483,592.	1,918,122.	2,034,963.	7,099,087.
<b>24</b> Line 23 minus line 17		1,073,594.	1,458,693.	1,527,559.	5,286,673.
<b>25</b> Enter 1% of line 23	·	14,836.	19,181.	20,350.	3/200/073:
26 Organizations described on lines			olumn (e), line 24		
b Prepare a list for your records to show the supported organization) whose total gifts freturn. Enter the total of all these excess	name of and amount contri or 2000 through 2003 exceed	buted by each person (othe led the amount shown in lir	r than a governmental unit one 26a. <b>Do not file this list</b>	or publicly with your	
c Total support for section 509(a)(1					
d Add: Amounts from column (e) for	or lines: 18		19 26b		
	22		26 b	26 d	
e Public support (line 26c minus lin	ne 26d total)			▶ 26e	
f Public support percentage (line 2	26e (numerator) divid	ed by line 26c (denon	ninator))	▶ 26f	%
27 Organizations described on line a For amounts included in lines 15, name of, and total amounts receisuch amounts for each year:	16, and 17 that were	received from a 'disq , each 'disqualified pe	ualified person,' prepa erson.' <b>Do not file this</b>	are a list for your records list with your return.	rds to show the Enter the sum of
(2003)250,000.	(2002)2	50,000. (2001)	243,207	. (2000)	300,000.
<b>b</b> For any amount included in line 1 show the name of, and amount re \$5,000. (Include in the list organi computing the difference betweer (the excess amounts) for each ye	eceived for each year, zations described in line the amount received ear:	that was more than t nes 5 through 11, as and the larger amour	he larger of (1) the ar well as individuals.) <b>D</b> nt described in (1) or (	mount on line 25 for the not file this list with (2), enter the sum of the su	ne year or <b>(2)</b> your return. After hese differences
(2003) 0.	(2002)	<u>0</u> <u>(</u> 2001)	0	<u>      (2000)                            </u>	0.
(2003) 0 .  c Add: Amounts from column (e) for 17 1,  d Add: Line 27a total 1,  e Public support (line 27c total min	or lines: 15	4,446,878.	16		<del>_</del> <b></b>
17 1,	812,414. 20		21	27c	6,259,292.
<b>d</b> Add: Line 27a total 1,	043,207. ar	nd line 27b total	<u></u>	0. <b>27</b> d	1,043,207.
e Public support (line 27c total min	us line 27d total)			▶ 27e	5,216,085.
f Total support for section 509(a)(2	2) test: Enter amount f	rom line 23, column (	(e) ►   <b>27</b> f   7	,099,087.	
g Public support percentage (line 2	27e (numerator) divid	ed by line 27f (denom	inator))	▶ 27g	73.48 %
h Investment income percentage (	line 18, column (e) (nı	umerator) divided by	line 27f (denominator	))▶ 27h	11.81 %

**<sup>28</sup> Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Private School Questionnaire (See instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A Yes No 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . . . . . . 29 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, 30 and scholarships?.... Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?..... 31 If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff?..... 32a **b** Records documenting that scholarships and other financial assistance are awarded on a racially 32b nondiscriminatory basis? . c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 32c with student admissions, programs, and scholarships?..... **d** Copies of all material used by the organization or on its behalf to solicit contributions?...... 32d If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.) UBLIC CO 33 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 33a 33b **b** Admissions policies? c Employment of faculty or administrative staff? 33 c **d** Scholarships or other financial assistance?..... 33d e Educational policies?... 33e f Use of facilities?.... 33f **g** Athletic programs?..... 33h **h** Other extracurricular activities?..... If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) **34a** Does the organization receive any financial aid or assistance from a governmental agency? . . . . 34a **b** Has the organization's right to such aid ever been revoked or suspended? . . . . . 34b If you answered 'Yes' to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.....

THE JUNIOR LEAGUE OF NASHVILLE, INC. 62-0476815 Schedule A (Form 990 or 990-EZ) 2004 Page 5 Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.) (To be completed ONLY by an eligible organization that filed Form 5768) N/A if the organization belongs to an affiliated group. Check ► **b** Check ► a if you checked 'a' and 'limited control' provisions apply. (a) Affiliated group **Limits on Lobbying Expenditures** To be completed for ALL electing totals (The term 'expenditures' means amounts paid or incurred.) organizations 36 Total lobbying expenditures to influence public opinion (grassroots lobbying)...... 36 Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . . . . . 37 37 Total lobbying expenditures (add lines 36 and 37)..... 38 39 39 40 40 Total exempt purpose expenditures (add lines 38 and 39)..... 41 Lobbying nontaxable amount. Enter the amount from the following table -If the amount on line 40 is -The lobbying nontaxable amount is-Over \$500,000 but not over \$1,000,000 . . . . . . . . \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000. . . . . . . . . \$175,000 plus 10% of the excess over \$1,000,000 41 Over \$1,500,000 but not over \$17,000,000...... \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000..... \$1,000,000..... 42 Grassroots nontaxable amount (enter 25% of line 41)..... 42 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36. 43 44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38. . . . . . . . 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720. 4 -Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50.) Lobbying Expenditures During 4 - Year Averaging Period Calendar year (a) (b) (d) (e) (or fiscal vear 2004 2003 2001 Total beginning in) > Lobbying nontaxable amount. Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount 49 (150% of line 48(e)) Grassroots lobbying expenditures. Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See instructions.) N/A During the year, did the organization attempt to influence national, state or local legislation, including any Yes No Amount attempt to influence public opinion on a legislative matter or referendum, through the use of: **b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**) . . c Media advertisements..... **d** Mailings to members, legislators, or the public..... e Publications, or published or broadcast statements..... f Grants to other organizations for lobbying purposes ......

i Total lobbying expenditures (add lines c through h.). If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities.

**g** Direct contact with legislators, their staffs, government officials, or a legislative body..... h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....

## Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did th	ne reporting organization of Code (other than section	directly or in	directly engage in any of the following	g with any other organization described in ag to political organizations?	n section	501(0	c)
			o a noncharitable exempt organization			Yes	No
	, ,	9	, 9	F	51 a (i)		X
					a (ii)		Χ
<b>b</b> Other	transactions:				```		
<b>(i)</b> S	ales or exchanges of asse	ets with a no	oncharitable exempt organization		b (i)		Χ
• • •	ŭ		, ,		b (ii)		Χ
			· •		b (iii)		Χ
(iv)R	eimbursement arrangeme	nts			b (iv)		Χ
					b (v)		Χ
<b>(vi)</b> P	erformance of services or	membershi	p or fundraising solicitations		b (vi)		Χ
<b>c</b> Sharii	ng of facilities, equipment	, mailing list	ts, other assets, or paid employees		С		Χ
<b>d</b> If the the go	answer to any of the abounds, other assets, or servansaction or sharing arrai	ve is 'Yes,' d vices given b naement, sh	complete the following schedule. Colu by the reporting organization. If the or low in column (d) the value of the goo	mn (b) should always show the fair mark ganization received less than fair marke ds, other assets, or services received:	ket value t value in	of 1	
(a)	(b)		(c)	(d)			
Line no.	Amount involved	Name of	noncharitable exempt organization	Description of transfers, transactions, and sh	narıng arran	gement	S
N/A							
				ADI			
				>()\			
				, -			
			2110-				
		\					
descr	ibed in section 501(c) of t	he Code (otl	liated with, or related to, one or more her than section 501(c)(3)) or in section	tax-exempt organizations on 527?	Yes	s X	No
<b>b</b> If 'Yes	s,' complete the following	schedule:					
	(a) Name of organization		<b>(b)</b> Type of organization	<b>(c)</b> Description of relations	ship		
N/A							

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

Department of the Treasury Internal Revenue Service

#### PUBLIC DISCLOSURE COPY

#### **Schedule of Contributors**

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

2004

OMB No. 1545-0047

Name of organization Employer identification number THE JUNIOR LEAGUE OF NASHVILLE, INC 62-0476815 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 -To organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) Special Rules -For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to 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. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year.). Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2004)

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of Part I

THE JUNIOR LEAGUE OF NASHVILLE, INC.

Employer identification number

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Parti	Contributors (See Specific Instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$120,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$31,660.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	CC	\$ 10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$ <u>17,595.</u>	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$50,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		\$25,275.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)

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of Part I

THE JUNIOR LEAGUE OF NASHVILLE, INC.

Employer identification number 62-0476815

Part I	<b>Contributors</b>	(See Specific	Instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$123,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$200,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	C	<b>\$</b> 15,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10		\$10,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
11		\$12,015.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12		\$ <u>15,000</u> .	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Page 3

of 4

of Part I

THE JUNIOR LEAGUE OF NASHVILLE, INC.

Employer identification number

62-0476815

Part I	Contributors (See Specific Instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_13_		\$10,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14_		\$ <u>50,000.</u>	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>15</u>	C-C	\$ 10,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
16_		\$ <u>10,000.</u>	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>17</u>		\$25,969.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
18_		\$15,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)

of Part I

THE JUNIOR LEAGUE OF NASHVILLE, INC.

Page 4 of 4
Employer identification number

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Part I	Contributors (See Specific Instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19_		\$ <u>15,600.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
20		\$45,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	CC	3PY	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		.\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

of 1

of Part II

THE JUNIOR LEAGUE OF NASHVILLE, INC.

Employer identification number

62-0476815

Part II	Noncash Property (See Specific Instructions.)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	SILVER CHARMS		
19			
		15 600	113 D T 0110
	<u> </u>	\$15,600.	<u>VARIOUS</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<del> </del>		
		\$	
(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
	<del>public</del>		
		\$	
(6)	/L-\	(6)	(4)
(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
	<u> </u>		
	<del> </del>		
		\$ <u> </u>	

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2004)

of 1

of Part III

Name of organization

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Employer identification number

THE JUNIOR LEAGUE OF NASHVILLE, INC. 62-0476815

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10)

	organizations aggregating more t	han \$1,000 for the year $\circ$	Complete cols	(a) through (e) and the following line entry.)
	For organizations completing Part III, enter contributions of <b>\$1,000</b> or less for the year.	total of <i>exclusively</i> religious, cha (Enter this information once – s	aritable, etc, see instruction	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A 			
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d)  Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	, • •	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	+		 	·
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee

PAGE 1

THE JUNIOR LEAGUE OF NASHVILLE, INC.

62-0476815

STATEMENT 1 FORM 990, PART I, LINE 8 NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: 1,663,230. COST OR OTHER BASIS: 1,427,992.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ 235,238.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$ 235,238.

#### STATEMENT 2 FORM 990, PART I, LINE 9 NET INCOME (LOSS) FROM SPECIAL EVENTS

SPECIAL EVENTS	GROSS RECEIPTS	LESS CONTRI- BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
DECORATORS' SHOW HOUSE	468,320.	94,295.	374,025.	204,732.	169,293.
DINNER WITH FRIENDS	56,417.	56,417.	0.	2,475.	-2,475.
TOTAL	\$ 524,737.	\$ 150,712.	\$ 374,025.	\$ 207,207.	\$ 166,818.

# STATEMENT 3 FORM 990, PART I, LINE 10 GROSS PROFIT (LOSS) FROM SALES OF INVENTORY

COOKBOOK SALES	\$	60,848.
GROSS SALES LESS RETURNS & ALLOWANCES	\$	60,848.
NET SALES.	\$	60,848.
LESS COST OF GOODS SOLDGROSS PROFIT FROM SALES OF INVENTORY	\$	37,438. 23,410.
	<del></del>	

#### STATEMENT 4 FORM 990, PART I, LINE 20 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAIN ON INVESTMENTS	\$ 349,124.
TOTAL	\$ 349,124.

2004	FEDERAL STATEMENTS	PAGE 2
	THE JUNIOR LEAGUE OF NASHVILLE, INC.	62-0476815
STATEMENT 5 FORM 990, PART II, LINE 22 GRANTS AND ALLOCATIONS	S	
CASH GRANTS AND ALLOCAT	'IONS	
DONEE'S NAME: AMOUNT GIVEN:	ATHENA AWARDS	\$ 1,050.
DONEE'S NAME: AMOUNT GIVEN:	SILOAM FAMILY HEALTH CENTER	55,000.
DONEE'S NAME: AMOUNT GIVEN:	ST. LUKES COMMUNITY HOUSE	5,000.
DONEE'S NAME: AMOUNT GIVEN:	ADVENTURE SCIENCE CENTER	5,000.
DONEE'S NAME: AMOUNT GIVEN:	ALIVE HOSPICE	5,000.
DONEE'S NAME: AMOUNT GIVEN:	CENTERSTONE COMM. MENTAL HLTH	5,000.
DONEE'S NAME: AMOUNT GIVEN:	EASTER SEALS	5,000.
DONEE'S NAME: AMOUNT GIVEN:	EASTER SEALS  EXCHANGE CLUB	5,000.
DONEE'S NAME: AMOUNT GIVEN:	FIRST STEPS	5,000.
DONEE'S NAME: AMOUNT GIVEN:	GILDA'S CLUB NASHVILLE	10,000.
DONEE'S NAME: AMOUNT GIVEN:	MAGDALENE	5,000.
DONEE'S NAME: AMOUNT GIVEN:	NASHVILLE CHILDREN'S THEATRE	5,000.
DONEE'S NAME: AMOUNT GIVEN:	NASHVILLE ZOO	5,000.
DONEE'S NAME: AMOUNT GIVEN:	NASHVILLE'S TABLE	5,000.
DONEE'S NAME: AMOUNT GIVEN:	OASIS CENTER	5,000.
DONEE'S NAME: AMOUNT GIVEN:	OUR KIDS	5,000.
DONEE'S NAME: AMOUNT GIVEN:	PRESTON TAYLOR MINISTRIES	5,000.
DONEE'S NAME:	RECONCILIATION MINISTRIES	

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STATEMENT 5 (CONTINUED) FORM 990, PART II, LINE 22 GRANTS AND ALLOCATIONS		
CASH GRANTS AND ALLOCATI	CONS	
AMOUNT GIVEN:	\$	5,000.
DONEE'S NAME: AMOUNT GIVEN:	RENEWAL HOUSE	5,000.
DONEE'S NAME: AMOUNT GIVEN:	RONALD MC DONALD HOUSE	5,000.
DONEE'S NAME: AMOUNT GIVEN:	READING IS FUNDAMENTAL	2,500.
DONEE'S NAME: AMOUNT GIVEN:	BOOK 'EM	2,500.
DONEE'S NAME: AMOUNT GIVEN:	FRIENDS OF JUNIOR LEAGUE	40,714.
DONEE'S NAME: AMOUNT GIVEN:	CHILDLIFE SERVICES	400.
DONEE'S NAME: AMOUNT GIVEN:	GIRL SCOUT COUNCIL	1,000.
DONEE'S NAME: AMOUNT GIVEN:	ACADEMY FOR WOMEN OF ACHIEVEMT	1,500.
DONEE'S NAME: AMOUNT GIVEN:	CENTER FOR NONPROFIT MGMT.	1,000.
DONEE'S NAME: AMOUNT GIVEN:	HOUSE OF MERCY	1,500.
DONEE'S NAME: AMOUNT GIVEN:	EATING DISORDERS COALITION TN	6,500.
DONEE'S NAME: AMOUNT GIVEN:	VANDERBILT CHILDREN'S HOSPITAL	84,584.
DONEE'S NAME: AMOUNT GIVEN:	SCHOLASTIC BOOK CLUB	724.
DONEE'S NAME: AMOUNT GIVEN:	HANDS ON NASHVILLE	250.
	TOTAL GRANTS AND ALLOCATIONS \$	294,222.

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THE JUNIOR LEAGUE OF NASHVILLE, INC.

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# STATEMENT 6 FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	TOTAL	SERVICES	& GENERAL	FUNDRAISING
ADVERTISING & PROMOTIONS ASSOCIATION DUES	13,529. 77,879.	1,855. 77,879.		11,674.
BUILDING MAINTENANCE	72,153.	64,000.		8,153.
CATERING	46,751.	5,691.		41,060.
COMMUNITY ASSISTANCE	11,213.	8,804.		2,409.
INSURANCE	34,869.	34,869.		
LICENSES, PERMITS, TAXES & FEE	1,631.	760.		871.
OTHER	10,843.	10,421.		422.
PARKING & SHUTTLE	282.	282.		
PROFESSIONAL	26,847.	26,847.		
PROGRAM COSTS	5,040.	5,040.		
SECURITY	13,695.	3,073.		10,622.
UTILITIES	52,726.	48,553.		4,173.
TOTAL	\$ 367,458.	288,074.	\$ 0.	\$ 79,384.

STATEMENT 7 FORM 990, PART IV, LINE 54 INVESTMENTS - SECURITIES	VALUATION	
CORPORATE STOCKS	METHOD	AMOUNT
CORPORATE STOCKS	MARKET VALUE \$	3,532,247.
Por	TOTAL \$	3,532,247.
OTHER SECURITIES	VALUATION METHOD	AMOUNT
STOCKS AND BONDS MUTUAL FUND MONEY MARKET MUTUAL FUND	MARKET VALUE MARKET VALUE	5,094,833. 597,304.

TOTAL \$ 5,692,137.

U.S. GOVERNMENT OBLIGATIONS	VALUATION METHOD	AMOUNT
U.S. TREASURY NOTES	MARKET VALUE	848,471.

848,471. TOTAL \$

TOTAL INVESTMENTS - SECURITIES \$ 10,072,855.

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**STATEMENT 8** FORM 990, PART IV, LINE 57 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	 BASIS	 ACCUM. DEPREC.	 BOOK VALUE
FURNITURE AND FIXTURES BUILDINGS LAND	\$ 554,405. 2,261,645. 631,000.	\$ 358,021. 545,619.	\$ 196,384. 1,716,026. 631,000.
TOTAL	\$ 3,447,050.	\$ 903,640.	\$ 2,543,410.

**STATEMENT 9** FORM 990, PART IV, LINE 64B **MORTGAGES AND OTHER NOTES PAYABLE** 

MORTGAGES PAYABLE

BALANCE DUE

SUNTRUST BANK

150<u>,000.</u> TOTAL MORTGAGES \$ 150,000.

OTHER NOTES PAYABLE

LENDER'S NAME: DATE OF NOTE: MATURITY DATE: INTEREST RATE: SECURITY PROVIDED: PURPOSE OF LOAN: ORIGINAL AMOUNT: BALANCE DUE:

SUNTRUST BANK 3/03/2000 3/03/2006 4.95%

COP' CASH & INVESTMENTS LINE OF CREDIT 2,000,000.

225,567.

TOTAL OTHER NOTES PAYABLE \$ 225,567.

> 375,567. TOTAL \$

**STATEMENT 10** FORM 990, PART IV, LINE 65 OTHER LIABILITIES

PAYABLE TO AFFILIATE 20,876. 20,876. TOTAL \$

**STATEMENT 11 FORM 990, PART IV-A, LINE B(4) OTHER AMOUNTS** 

COST OF GOODS SOLD.	\$ 37,438.
SPECIAL EVENTS DIRECT EXPENSES	207,207.
TOTAL	\$ 244,645.

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STATEMENT 12
FORM 990, PART IV-B, LINE B(4)
OTHER AMOUNTS

COST OF GOODS SOLD.	\$ 37,438.
SPECIAL EVENTS DIRECT EXPENSES	207,207.
TOTAL	\$ 244,645.

## STATEMENT 13 FORM 990, PART V LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
KATHY MORROW	ADMIN DIRECTOR 40 MINIMUM AVG.	\$ 37,759.	\$ 1,888.	\$ 0.
NASHVILLE, TN	40 MINIMOM AVG.			
SUSAN MOLL	MANAGING DIR. 40 MINIMUM AVG.	62,346.	3,117.	0.
NASHVILLE, TN		av		
PATTI HART	PRESIDENT	OPY	0.	0.
NASHVILLE, TN	1,100	,		
MARY LEE BARTLETT	PRESIDENT-ELECT	0.	0.	0.
NASHVILLE, TN	) •			
LISANNE HITT	HOME BOARD CHR	0.	0.	0.
NASHVILLE, TN	1			
MECHEL FROST	VP FINANCE/OPER	0.	0.	0.
NASHVILLE, TN	1			
KAREN MALONE	VP MARKETING	0.	0.	0.
NASHVILLE, TN	1			
GRACE PADEN	VP MEMBERSHIP	0.	0.	0.
NASHVILLE, TN	1			
LISA COLE	CORRESP. SECRET	0.	0.	0.
NASHVILLE, TN	1			
JULIA CASHION	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	<u>.</u>			

## THE JUNIOR LEAGUE OF NASHVILLE, INC.

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## STATEMENT 13 (CONTINUED) FORM 990, PART V LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DARA DICKSON	MEMBER-AT-LARGE	\$ 0.		
NASHVILLE, TN	1			
ALANA O'BRIEN	PARLIAMENTARIAN	0.	0.	0.
NASHVILLE, TN	1			
MARY KATE MOUSER	VP COMMUNITY	0.	0.	0.
NASHVILLE, TN	1			
KIM CARPENTER DRAKE	STRAT. PLAN. CH	0.	0.	0.
NASHVILLE, TN	1			
ANNE JENKINS	TREASURER	0.	0.	0.
NASHVILLE, TN	1	OPI		
JULIE WALKER	SUSTAINER REP.	0.	0.	0.
NASHVILLE, TN	ALIV			
KATHY DAVIS	VP EDUC./TRAIN.	0.	0.	0.
NASHVILLE, TN	1			
ERIN MORRISON	RECORDING SECR.	0.	0.	0.
NASHVILLE, TN	1			
LINDA BIEK	VP DEVELOPMENT	0.	0.	0.
NASHVILLE, TN	1			
	TOTAL	\$ 100,105.	\$ 5,005.	\$ 0.

## STATEMENT 14 SCHEDULE A, PART IV-A, LINE 22 OTHER INCOME

DESCRIPTION		(A	2003	(B)	2002	(C)	2001	(D)	2000	(E)	TOTAL
OTHER INCOME		\$	1,563.	\$	0.	\$	0.	\$	0.	\$	1,563.
	TOTAL	\$	1,563.	\$	0.	\$	0.	\$	0.	\$	1,563.

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THE JUNIOR LEAGUE OF NASHVILLE, INC. 990 PART II, LINE 42  $\,$ 

DEPRECIATION IS CALCULATED USING STRAIGHT-LINE DEPRECIATION FOR BUILDING AND FURNITURE AND FIXTURES AS FOLLOWS:

FURNITURE & FIXTURES 3 - 46 YEAR LIVES BUILDINGS 10 - 40 YEAR LIVES

