EXTENDED TO APRIL 15, 2021

(Rev. January 2020) 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)

▶ 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

OMB No. 1545-0047

A	רטו נו	ie 20 19 Calendar year, or tax year beginning 0014 1, 2019 and	ending M	AI 31, 2020	
В	Check i applica	fole: C Name of organization		D Employer identifi	cation number
	Add char	JUNIOR LEAGUE OF LUBBOCK, INC.			
	Nam char	e ge Doing business as		75-11817	35
	Initia retur	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
	Fina retur	4205 84TH STREET		(806) 79	4-8874
	term	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	686,414.
L	retur			H(a) Is this a group re	
	App tion pend			for subordinates	
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		xempt status: $X = 501(c)(3)$ $= 501(c)($ $) $ (insert no.) $= 4947(a)(1) c$	or 527		list. (see instructions)
		ite: ▶ WWW.JLLUBBOCK.COM		H(c) Group exemption	
		of organization: X Corporation Trust Association Other	L Year	of formation: 1946 N	🖊 State of legal domicile: ${f T}{f X}$
Р	art I		TIBITOD	T E A CUIE O E	TIDDOGE
e	1	Briefly describe the organization's mission or most significant activities: THE INC IS AN ORGANIZATION OF WOMEN COMMITTED		DOMONTAC VO	TIMMEEDICM
Jan					
Veri	2	Check this box if the organization discontinued its operations or dispose			ssets.
Ĝ	3			3	8
Activities & Governance	5	Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2019 (Part V, line 2a)			1
	6	Total number of volunteers (estimate if necessary)			156
	7.	Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă	';	Net unrelated business taxable income from Form 990-T, line 39			0.
Revenue	†	The difficulties business taxable income from 1000 1, into 00		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		155,886.	155,390.
	9	Program service revenue (Part VIII, line 2g)		0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,001.	21,036.
~	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		282,504.	304,528.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		456,391.	480,954.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		24,126.	23,712.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		35,653.	29,554.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ă	· t	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		312,332.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		372,111.	
. 0	19	Revenue less expenses. Subtract line 18 from line 12		84,280.	•
Net Assets or	3		Ве	ginning of Current Year	End of Year
SSE	20	Total assets (Part X, line 16)		1,526,457. 54,834.	1,674,467.
et A	21	Total liabilities (Part X, line 26)		1,471,623.	66,697. 1,607,770.
	22 art I	Net assets or fund balances. Subtract line 21 from line 20		1,4/1,023.	1,007,770.
		alties of perjury, I declare that I have examined this return, including accompanying schedule:	s and statem	ents, and to the hest of m	v knowledge and helief it is
		ect, and complete. Declaration of preparer (other than officer) is based on all information of wh			y kilowidago alla bollol, it io
	, 00111	Land completes population of property (early trial entirely to become of all information of the	non proparor	That any knowledge.	
Sig	ın	Signature of officer		Date	
He		TINA STONE, PRESIDENT			
	-	Type or print name and title			
		Print/Type preparer's name Preparer's signature			X PTIN
Pai	d	MATT R. WILLIS MATT R. WILLIS	lo	4/01/21 if self-employ	P00419741
Pre	parer	Firm's name ▶ BOLINGER, SEGARS, GILBERT AND MO	OSS LL		75-0882037
Use	Only	Firm's address 8215 NASHVILLE AVENUE			
		LUBBOCK, TX 79423		Phone no. (8	06)747-3806
Ма	y the	IRS discuss this return with the preparer shown above? (see instructions)			X Yes No

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE JUNIOR LEAGUE OF LUBBOCK, INC IS AN ORGANIZATION OF WOMEN
	COMMITTED TO PROMOTING VOLUNTEERISM, DEVELOPING THE POTENTIAL OF WOMEN
	AND IMPROVING THE COMMUNITY THROUGH THE EFFECTIVE ACTION AND
	LEADERSHIP OF TRAINED VOLUNTEERS FOR EDUCATIONAL AND CHARITABLE
2	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	3, 3, 3, 1, 3,
	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
40	revenue, if any, for each program service reported. (Code:) (Expenses \$ 220,333 • including grants of \$ 23,712 •) (Revenue \$)
4a	(Code:) (Expenses \$ 220,333. including grants of \$ 23,712.) (Revenue \$) THE JUNIOR LEAGUE OF LUBBOCK'S CURRENT FOCUS IS ON IMPROVING THE LIVES
	OF THE CHILDREN OF LUBBOCK AND SURROUNDING COMMUNITIES. CURRENT
	PROJECTS INCLUDE, BUT ARE NOT LIMITED TO, FOOD 2 KIDS, A PROJECT IN
	ASSOCIATION SOUTH PLAINS FOOD2KIDS AND LUBBOCK INDEPENDENT SCHOOL
	DISTRICT TO PROVIDE FOOD ON FRIDAYS TO CHILDREN WHO HAVE BEEN
	IDENTIFIED AS BEING AT RISK FOR SUFFERING FROM HUNGER DURING THE
	WEEKEND. KIDS IN THE KITCHEN IS A PROGRAM INITIATED BY JUNIOR LEAGUE
	ASSOCIATIONS FROM ACROSS THE COUNTRY TO ENCOURAGE CHILDREN AND FAMILIES
	TO GET IN THE KITCHEN, PROMOTE HEALTHIER LIFESTYLES AND PROVIDE
	RESOURCES AND HAND ON INSTRUCTION TO FACILITATE THESE GOALS.
	THE COLLECTION OF THE PROPERTY
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	SPARK IS DESIGNED TO EDUCATE UNDER-PRIVILEGED AND UNDERSERVED TEENAGE
	GIRLS IN LUBBOCK. IN SEPTEMBER 2012, THE MEMBERSHIP VOTED TO ACCEPT
	SPARK AS THE NEXT SIGNATURE PROJECT OF THE JUNIOR LEAGUE OF LUBBOCK
	BEGINNING IN JUNE 2013. THE SPARK PROGRAM IGNITES THE POTENTIAL IN
	MIDDLE SCHOOL GIRLS TO DEVELOP INTO SELF-CONFIDENT STUDENTS AND LEADERS
	MAKING A POSITIVE IMPACT IN THEIR COMMUNITY. THIS FOUR-PART PROGRAM
	TEACHES TEAMWORK, SELF-CONFIDENCE, THE VALUE OF EDUCATION AND IMPACT OF
	COMMUNITY INVOLVEMENT THROUGH VOLUNTEERISM. IN ITS INAUGURAL YEAR, WE
	IMPLEMENTED THIS PROGRAM IN FOUR LISD SCHOOLS: WILSON, ATKINS, CAVAZOS
	AND DUNBAR. TEN TO FIFTEEN YOUNG WOMEN FROM EACH SCHOOL WERE
	IDENTIFIED BY TEACHERS AND SCHOOL ADMINISTRATORS AS LEADERS OR
	POTENTIAL LEADERS AMONG THEIR PEERS, BOTH ACADEMICALLY AND SOCIALLY AND
4c	(Code:) (Expenses \$
41	Other many and in a Cheadule O
4 d	Other program services (Describe on Schedule O.)
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 220,333.
70	Total program out viou expenses y

Form 990 (2019) JUNIOR LEAGUE OF LUBBOCK, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			, v
	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		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	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,			٠,,
	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? If "Yes," complete			3,7
	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?			X
40	If "Yes," complete Schedule D, Part IV	9		Λ
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	х	
11	or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10	21	
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		7.7	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		X
L	Schedule D, Parts XI and XII	12a		Α.
D	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	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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,			<u> </u>
~	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		Х
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		Х
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		~	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		X
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		X
20a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		 '`
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
-1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
	O the state of the			

Form **990** (2019)

Form 990 (2019) | Part IV | Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	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			x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			,,
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//f			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
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			x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34		34	Х	
35 a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		77	
Dar	Note: All Form 990 filers are required to complete Schedule 0	38	Х	
Par	T V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Officers in Sofficialities of Contraints a response of flote to any line in this Part V		Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 19		169	140
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

JUNIOR LEAGUE OF LUBBOCK, 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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
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		Х
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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		37	
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?		X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	l _		_~
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	-		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	N/	
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	N/	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711	-17	
Ū	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
	NT / 7	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	44-		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		х
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.	10		

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

	Check if Schedule O contains a response or note to any line in this Part VI				X		
Sec	tion A. Governing Body and Management						
				Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year		8				
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	,	8				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						
_	officer, director, trustee, or key employee?		2		Х		
3	Did the organization delegate control over management duties customarily performed by or under the dir		-				
3	of officers, directors, trustees, or key employees to a management company or other person?	-	3		х		
4			4		X		
	Did the organization make any significant changes to its governing documents since the prior Form 990 v		5		X		
5	Did the organization become aware during the year of a significant diversion of the organization's assets'		6		X		
6 7-	Did the organization have members or stockholders?		-				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		_		x		
	more members of the governing body?		7a				
b			l				
	persons other than the governing body?		7b		X		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by	=		37			
а	The governing body?		8a	X			
b	Each committee with authority to act on behalf of the governing body?		8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached						
	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 Reven	ue 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 chapt	ers, 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 be	fore filing the form?	11a	Х			
b	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	Х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to co	onflicts?	12b	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	describe					
	in Schedule O how this was done		12c	Х			
13	Did the organization have a written whistleblower policy?		13	Х			
14	Did the organization have a written document retention and destruction policy?		14	Х			
15	Did the process for determining compensation of the following persons include a review and approval by	independent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official		15a		Х		
b	Other officers or key employees of the organization		15b		Х		
	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	with a					
	taxable entity during the year?		16a		Х		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its						
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization						
	exempt status with respect to such arrangements?		16b				
Sec	tion C. Disclosure		1.02				
17	List the states with which a copy of this Form 990 is required to be filed NONE						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 9	90-T (Section 501(c)	(3)s onl	/) avail	able		
.5	for public inspection. Indicate how you made these available. Check all that apply.	55 1 (5551011 551(6)	(J) O(11)	, avail	2010		
	X Own website Another's website X Upon request Other (explain on S	Schedule (1)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict		nd fina	ncial			
19	statements available to the public during the tax year.	in an interest policy, a	ii iu iii id	icial			
20	State the name, address, and telephone number of the person who possesses the organization's books	and records					
20	ROBYN TEPPER - (806) 794-8874	and 1600105 F					
	4205 84TH STREET, LUBBOCK, TX 79423						

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.

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

Check this box if neither the organization nor any related (A) (B)								(D)	(E)	(F)
Name and title			(C) Position					Reportable		Estimated
Name and title	Average hours per		(do not check m box, unless pers			than		compensation	Reportable compensation	amount of
	week					r/trus		from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	dire				pa		organization	(W-2/1099-MISC)	from the
	related	tee o	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	al trus	nal tr		loyee	o mp				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	프	lus	#0	Ke.	Hig	For			
(1) LAURA HON	9.00	,,		,,						0
PRESIDENT	1.00	Х		Х				0.	0.	0.
(2) TINA STONE	15.00			l						
PRESIDENT ELECT		Х		Х				0.	0.	0.
(3) ROBYN TEPPER	5.00								_	_
VP FINANCE		Х		Х				0.	0.	0.
(4) LESLIE COLLINS	3.00							_	_	_
VP COMMUNITY IMPACT		Х		Х				0.	0.	0.
(5) SHANNON SPENCER	5.00									
VP FUND DEVELOPMENT		Х		Х				0.	0.	0.
(6) JESSIE CAYTON	5.00									
VP MEMBERSHIP DEVELOPMENT		Х		Х				0.	0.	0.
(7) JENNIFER IRLBECK	5.00									
BYLAWS CHAIRMAN		Х		Х				0.	0.	0.
(8) ROBIN TALBERT	5.00									
SUSTAINING ADVISOR		Х		Х				0.	0.	0.
	1									
	+									
		ł								
	1		\vdash		\vdash					
	1	ı	ı	ı	ı	1		I		

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Part VII Section A. Officers, Directors (A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average hours per week	box,	not c	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related		an	timate nount other	
	(list any hours for related	tee or director	ıstee			ınsated		the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		fr	pensa om the anizat	е
	organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				l	d relate anizatio	
		_											
		_											
		<u> </u>											
		<u> </u>											
		1											
		1											
		 											
1b Subtotal		1						0.		0.			0.
c Total from continuation sheets to	Part VII, Section A							0.		0.			0.
Total number of individuals (including compensation from the organization	g but not limited to th),000 of reportable				C
3 Did the organization list any former of	officer, director, trust	ee, k	кеу е	emp	loye	e, o	hig	ghest compensated emp	oloyee on			Yes	No
line 1a? If "Yes," complete Schedule 4 For any individual listed on line 1a, is								her compensation from			3		Х
and related organizations greater thaDid any person listed on line 1a rece											4		Х
rendered to the organization? If "Yes Section B. Independent Contractors	s," complete Schedu	e J f	or s	uch	pers	son .	<u></u>				5		Х
Complete this table for your five high the organization. Report compensations		-								pens	ation 1	rom	
	(A) siness address		INC					(B) Description of s		C	(C Compe		n
2 Total number of independent contra	ctors (including but r	not lii	mite	d to	tho	se lie	sted	d above) who received n	ore than				
\$100,000 of compensation from the		.5. 111		G 10		0		. a.500, wild 1600ived ii	10.0 (110.1)				

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 30,342. **b** Membership dues 1b 86,100. c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 38,948. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 1g |\$ 155,390. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 21,036. 21,036. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 4,050. 6 a Gross rents 6a 0. **b** Less: rental expenses ... 6b 4,050. c Rental income or (loss) 4,050. 4,050. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses 7b c Gain or (loss) ______7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ _____ 86,100. of contributions reported on line 1c). See $|_{8a}|_{505,833}$ Part IV, line 18 вь 205,460. **b** Less: direct expenses _____ 300,373. 300,373. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities **10 a** Gross sales of inventory, less returns 105 and allowances 0. 10b **b** Less: cost of goods sold 105. 105. **c** Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a b d All other revenue e Total. Add lines 11a-11d 480,954. 0. 325,564. Total revenue. See instructions 12

		complete all columns.		

	Check if Schedule O contains a respon	•		<u> </u>	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21	20,000.	20,000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	3,712.	3,712.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	27,412.		27,412.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2,142.		2,142.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	1,607.		1,607.	
С	Accounting	15,848.		15,848.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	1,225.		1,225.	
13	Office expenses	26,289.		26,289.	
14	Information technology				
15	Royalties				
16	Occupancy	49,555.		49,555.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	18,499.	18,499.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,678.		14,678.	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)	450 100	450 100		
а	COMMUNITY PROJECTS	178,122.	178,122.		
b					
С					
d		2 252			
е	All other expenses	2,978.	000 000	2,978.	
25	Total functional expenses. Add lines 1 through 24e	362,067.	220,333.	141,734.	0.
26	Joint costs . Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				F 000 (0040)

Form 990 (2019)

Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			557,409.	1	705,985.
	2	Savings and temporary cash investments			505,557.	2	523,055.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	7,199.	4			
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of th		5			
	6	Loans and other receivables from other disqui					
		under section 4958(f)(1)), and persons describ	ed in sect	ion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		Г		7	
Assets	8	Inventories for sale or use				8	
Ä	9				3,341.	9	3,031.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	993,812.			
	b	Less: accumulated depreciation	10b	551,416.	452,951.	10c	442,396.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must ed			1,526,457.	16	1,674,467.
	17	Accounts payable and accrued expenses			10,915.	17	21,069.
	18	Grants payable		18			
	19	Deferred revenue		25,214.	19	27,993.	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV o	f Schedule D		21	
es	22	Loans and other payables to any current or fo	rmer office	er, director,			
≣		trustee, key employee, creator or founder, sub	stantial co	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the	ese perso	ns		22	
_	23	Secured mortgages and notes payable to unre	elated third	d parties		23	
	24	Unsecured notes and loans payable to unrela	ted third p	arties		24	
	25	Other liabilities (including federal income tax, p	payables to	o related third			
		parties, and other liabilities not included on lin	es 17-24).	Complete Part X	10 505		45 625
		of Schedule D			18,705.	_	17,635.
	26	Total liabilities. Add lines 17 through 25			54,834.	26	66,697.
ű		Organizations that follow FASB ASC 958, c	heck here	► X			
nce		and complete lines 27, 28, 32, and 33.			1 471 600		1 600 000
alaı	27	Net assets without donor restrictions			1,471,623.	27	1,607,770.
d B	28	Net assets with donor restrictions				28	
Ë		Organizations that do not follow FASB ASC	958, che	ck here 🕨 📖			
Ρ		and complete lines 29 through 33.					
ts (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			1 471 600	31	1 (00 000
Š	32	Total net assets or fund balances			1,471,623.	32	1,607,770.
	33	Total liabilities and net assets/fund balances			1,526,457.	33	1,674,467.

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI				Ш			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	48	0,9	54.			
2	Total expenses (must equal Part IX, column (A), line 25)	2			67.			
3	Revenue less expenses. Subtract line 2 from line 1	3			87.			
4								
5	Net unrealized gains (losses) on investments	5	1,47		60.			
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,	<u> </u>						
	column (B))	10	1,60	7.7	70.			
Pa	rt XII Financial Statements and Reporting		•					
	Check if Schedule O contains a response or note to any line in this Part XII				\mathbf{X}			
				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	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	Separate basis X 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 th	e 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 Sch	nedule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit						
Act and OMB Circular A-133?								
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3h					

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

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

Open to Public Inspection

Employer identification number

JUNIOR LEAGUE OF LUBBOCK, INC. 75-1181735 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2019 JU	JNIOR LEA	GUE OF LU	BBOCK, IN	IC.	75-118	1735 Page 2
Part II Support Schedule for 0	Organizations	Described in	Sections 170)(b)(1)(A)(iv) an	d 170(b)(1)(A)(\	/i)
(Complete only if you checked	I the box on line 5	, 7, or 8 of Part I o	or if the organization	on failed to qualify	under Part III. If the	e organization
fails to qualify under the tests	listed below, plea	se complete Part	III.)			
Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
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						
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)						
6 Public support. Subtract line 5 from line 4.						
Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources						
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.)						

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14		%	,
15	Public support percentage from 2018 Schedule A, Part II, line 14	15		%	į
16a	33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or n	nore,	check this box and		
	stop here. The organization qualifies as a publicly supported organization			ightharpoons	
_					

b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2019

11 Total support. Add lines 7 through 10

Section C. Computation of Public Support Percentage

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	elow, please comp	nete Fart II.)				
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	(,	(-)	(-)	(-,	(-,	(-)
	membership fees received. (Do not						
	include any "unusual grants.")	166,274.	198,672.	126,021.	155,886.	155,390.	802,243.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	500,761.	488,448.	492,264.	470,813.	505,938.	2458224.
3	Gross receipts from activities that	,	,	,	, ,	,	
J	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	667,035.	687,120.	618,285.	626,699.	661,328.	3260467.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
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						0.
(Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						3260467.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	667,035.	(b) 2016 687,120.	(c) 2017 618, 285.	(d) 2018 626, 699.	(e) 2019 661,328.	(f) Total 3260467.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	7,476.	11,980.	12,442.	21,188.	25,086.	78,172.
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975	- A.F.C	11 000	10 110	01 100	05 006	F0 1F0
	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	7,476.	11,980.	12,442.	21,188.	25,086.	78,172.
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.)	674,511.	699,100.	630,727.	647,887.	686,414.	3338639.
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here						>
Se	ction C. Computation of Publi	ic Support Per	rcentage				
15	Public support percentage for 2019 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	97.66 %
16	Public support percentage from 2018	Schedule A, Part	III, line 15			16	98.08 %
Se	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20	19 (line 10c, colum	nn (f), divided by li	ne 13, column (f))		17	2.34 %
18	Investment income percentage from 2	2018 Schedule A, I	Part III, line 17			18	1.92 %
19a	33 1/3 % support tests - 2019. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	
k	more than 33 1/3%, check this box at 33 1/3% support tests - 2018. If the						► X
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organizatio						

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 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		
	0-		
	3a		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	,		
	8		
	0-		
	9a		
	9b		
	9с		
	10a		
	iva		
	10b		
m 9	90 or 99	90-EZ)	2019

Pa	rt IV	Supporting Organizations (continued)			
		continuedy		Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_		the governing body of a supported organization?	11a		
h		ily member of a person described in (a) above?	11b		
		6 controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
		3. Type I Supporting Organizations	110		
000	tion L	5. Type I oupporting Organizations		Yes	No
4	Did +b	diverters twinters or membership of one or mare supported examinations have the negree to		162	NO
1		e directors, trustees, or membership of one or more supported organizations have the power to			
		arly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
		ear? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
		olled the organization's activities. If the organization had more than one supported organization,			
		ibe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
		izations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
	organ	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	II how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
<u>Sec</u>	tion (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 trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
	the su	pported organization(s).	1		
Sec	tion [D. All Type III Supporting Organizations			
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	ization'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			
	organ	ization'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			
	organ	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	ason of the relationship described in (2), did the organization's supported organizations have a			
	signifi	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	suppo	orted organizations played in this regard.	3		
Sec	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	s).	
2		ties Test. Answer (a) and (b) below.		Yes	No
а		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	apported 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,			
		he organization was responsive to those supported organizations, and how the organization determined			
		nese activities constituted substantially all of its activities.	2a		
b		e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		ns for the organization's position that its supported organization(s) would have engaged in these			
		ies but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer (a) and (b) below.			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-		es of each of the supported organizations? Provide details in Part VI.	За		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	anizations	j
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount	·	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	y integra	ated Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Par	TV Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exempt			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
	Excess from 2017			
d	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-E2	Z) 2019 JUNIC	R LEAGUE	OL LORROC	CK, INC.	/5-1181/35 Page	8
Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sect	Information. I lines 1, 2, 3b, 3c, tion D, lines 2 and	Provide the expla 4b, 4c, 5a, 6, 9a, 3; Part IV, Sectio	nations required by 9b, 9c, 11a, 11b, a n E, lines 1c, 2a, 2b	Part II, line 10; Part II, nd 11c; Part IV, Sectior o, 3a, and 3b; Part V, lin	line 17a or 17b; Part III, line 12; n B, lines 1 and 2; Part IV, Section C, e 1; Part V, Section B, line 1e; Part V, ny additional information.	
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Schedule B

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

Department of the Treasury Internal Revenue Service

Organization type (check one):

Schedule of Contributors

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

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

OMB No. 1545-0047

75-1181735

2019

Name of the organization Employer identification number

INC.

JUNIOR LEAGUE OF LUBBOCK,

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

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

JUNIOR LEAGUE OF LUBBOCK, INC.

75-1181735

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	CH FOUNDATION 6102 82ND STREET, #8A LUBBOCK, TX 79493	\$\$	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	UNITED SUPERMARKETS 7830 ORLANDO AVE LUBBOCK, TX 79423	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	WELLS FARGO FOUNDATION 550 SOUTH 4TH ST MINNEAPOLIS, MN 55415	\$\$, 5,150.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Name, audi 655, and Zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

JUNIOR LEAGUE OF LUBBOCK, INC.

75-1181735

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional 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
		. \$	

Employer identification number Name of organization 75-1181735 JUNIOR LEAGUE OF LUBBOCK, INC. 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 Part III 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 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

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

JUNIOR LEAGUE OF LUBBOCK, INC.

Employer identification number 75-1181735

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
•			0(1-)(4)(D)(2)
8	Does each conservation easement reported on line 2(d) above	•	
^	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	•	
	balance sheet, and include, if applicable, the text of the footr	lote to the organization's linancial stater	nents that describes the
Par	organization's accounting for conservation easements. † III Organizations Maintaining Collections or	f Δrt Historical Treasures or (Other Similar Assets
· ui	Complete if the organization answered "Yes" on Form		other emmar 7,000to.
12	If the organization elected, as permitted under FASB ASC 95		and halance sheet works
ıu	of art, historical treasures, or other similar assets held for put	•	
	service, provide in Part XIII the text of the footnote to its final	, ,	•
h	If the organization elected, as permitted under FASB ASC 95		
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	o oximplicity, cadeation, or recognitivities	anoranoe or pasite service,
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
			L .
2	If the organization received or held works of art, historical tre		
_	the following amounts required to be reported under FASB A		g, p. 5 g
а	Revenue included on Form 990, Part VIII, line 1	_	> \$
b	Assets included in Form 990, Part X		

Par	t III Organizations Maintaining Co	ollections of Ar	t, Historical Tr	easures, or	Other	Simila	r Asse	ts (continu	ued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that r	nake sig	nificant ι	use of its		
	collection items (check all that apply):								
а	Public exhibition	d	Loan or excl	hange program	l				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	ne organization	's exem	pt purpo	se in Par	t XIII.	
5	During the year, did the organization solicit or	receive donations o	f art, historical trea	sures, or other	similar a	ssets			
	to be sold to raise funds rather than to be ma	intained as part of th	ne organization's co	ollection?				Yes	☐ No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the organization	n answered "Ye	es" on F	orm 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Part	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contribution	s or other asse	ts not in	ncluded			
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a								
								Amount	
С	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
	Ending balance					1f			
	Did the organization include an amount on Fo					/?		Yes	No No
	If "Yes," explain the arrangement in Part XIII.				-				
Par									
	·	(a) Current year	(b) Prior year	(c) Two years b			ears back	(e) Four	years back
1a	Beginning of year balance	739,461.	720,439.	678,	958.	62	26,973.		601,524.
	Contributions	2,763.	1,930.				823.		2,847.
	Net investment earnings, gains, and losses	12,830.	17,092.	41,	481.	Ę	51,162.		22,602.
	Grants or scholarships	,		,			•		
	Other expenditures for facilities								
•	and programs	100,000.							
f	Administrative expenses	, ,							
	End of year balance	655,054.	739,461.	720,	439.	67	78,958.		626,973.
2	Provide the estimated percentage of the curre		· · · · · · · · · · · · · · · · · · ·	-			, , , , , ,		
	Board designated or quasi-endowment	citt year end balanet	%	ij) ricia as.					
	Permanent endowment 100.00	%							
	Term endowment > 9								
·	The percentages on lines 2a, 2b, and 2c shou	-							
3a	Are there endowment funds not in the posses	=	tion that are held a	nd administere	d for the	organiz	ation		
ou	by:	solon of the organiza	alori triat are ricia a	ria aarriii iiotoro	a 101 tile	organizi	ation	[·	Yes No
	(i) Unrelated organizations								X
	(ii) Related organizations								X
h	If "Yes" on line 3a(ii), are the related organization							· - ` ' -	X
4	Describe in Part XIII the intended uses of the							00	
Par	t VI Land, Buildings, and Equipme		WITICITE IUITUS.						
	Complete if the organization answered		Part IV line 11a S	See Form 990 F	Part X lir	ne 10			
	Description of property	(a) Cost or ot				umulated	- T	(d) Book	value
	bescription of property	basis (investm	' '	l l		eciation	1	(u) Dook	value
10	Land	<u> </u>	•	1,749.	чорго	23,410,1		231	L,749.
	Land			0,497.	4	72,80	06.		7,691.
	Buildings		- 30	·, = / , •		, 2 , 0 0	, , , , 		, 0) 1 •
	Leasehold improvements		Ω	1,566.		78,61	0.		2,956.
	Equipment			-,500		, 0 , 0 1	- ` 		.,,,,,,,,
	Other		V column (P) line 1	00.)				440	396.

Schedule D (Form 990) 2019 JUNIOR LEAGU	JE OF LUBBOCE	K, INC.	75-1181735 _{Page}
Complete if the organization answered "Yes" of	on Form 990 Part IV line	a 11h See Form 990 Part X li	ne 12
(a) Description of security or category (including name of security)	(b) Book value		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" of			
(a) Description of investment	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	5 000 D 1 N/ I'	44 L O . T	4-5
Complete if the organization answered "Yes" o	on Form 990, Part IV, line Description	e 11a. See Form 990, Part X, II	ne 15. (b) Book value
	/escription		(b) Book value
(1)			
(2) (3)			+
(4)			
(5)			
(6)			-
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		•
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Pa	art X, line 25.
1. (a) Description of liability		•	(b) Book value
(1) Federal income taxes			
(2) DUES PAYABLE			17,635
(3)			
(4)			
(F)			

17,635. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

(6) (7) (8)

_	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenu	e per Return.	- 733 Page 1
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		•	
1	T. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expens	ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
· a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	•	t		
			4c	
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)			
_	rt XIII Supplemental Information.		5	
		N/ lines 1b and 0b; De	art V line 4: Dort V line	Or Dord VI
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addir		art v, iirie 4, Part A, iirie	Z, Part AI,
111165	20 and 4b, and Part All, lines 20 and 4b. Also complete this part to provide any addi	lional imormation.		
DΔI	RT V, LINE 4:			
	TI V, HIND I.			
ΤО	SUPPORT THE MISSION AND PROGRAMS OF THE JU	INTOR LEAGII	E OF LUBBOCE	ζ.
	BOTTONT THE MIDDION MAD INCOMMEND OF THE CO	DIVIOR DDMGO	B OI BODDOCI	•
PAI	RT X, LINE 2:			
	11, 21, 21, 21, 21, 21, 21, 21, 21, 21,			
тні	E ORGANIZATION HAS ADOPTED THE "UNCERTAIN T	TAX POSTTIO	NS" PROVISIO	NS OF
	- CHOINTENTION MIS RESTREE THE CHEEKIMIN	IIII IODIIIO	IND INCOVEDED)
ΔCO	COUNTING PRINCIPLES GENERALLY ACCEPTED IN T	онт имтого	ርጥልጥ ድ ር ೧ ፑ ልነ	(ERTCA
AC	CONTING FRINCIPLES GENERABLI ACCEPTED IN 1	THE CHILLD	SIAIES OF AF	IERICA.
וטח	E PRIMARY TAX POSITION OF THE ORGANIZATION	דכ דחכ פדו	דאורי אכי א היא א	Z EVMEDT
тП	FRIMAL IAA POSITION OF THE ORGANIZATION	TO TIO LIL	TING AS A TAZ	CVMCLI.
ידאהן	DIMY MILE ODCINITATION DEMENDATION COLOR TO	TO MODE TT	7777 77 MIIAAT 27	M MII M
ĽIJ'	TITY. THE ORGANIZATION DETERMINED THAT IT	TO MOKE LT	VETI LHWN NO	T THAT
m***	TO MAY DOCUMENTAL MICHAEL TO THE CITCULAR VICES		DV MID TYM	IDNIA T
TH	EIR TAX POSITIONS WOULD BE SUSTAINED UPON E	EXAMINATION	RA THE INTE	KNAL
D	TONIUS CEDUTOS (TDC) OS OSTES CEDES STATES	A	a	
KE'	VENUE SERVICE (IRS). OR OTHER STATE TAXING	AUTHORITH	S •	

Schedule D	(Form 990) 2019 Supplemental Infor	JUNIOR	LEAGUE	OF	LUBBOCK,	INC.	75-1181735	Page 5
Part XIII	Supplemental Infor	mation (con	tinued)					

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

2019

Open to Public Inspection

Employer identification number Name of the organization JUNIOR LEAGUE OF LUBBOCK, INC. 75-1181735 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants ☐ Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

75-1181735 Page 2 Schedule G (Form 990 or 990-EZ) 2019 JUNIOR LEAGUE OF LUBBOCK, INC. Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events HOLIDAY NONE (add col. (a) through HAPPENING col. (c)) (event type) (event type) (total number) Revenue 591,933. 1 Gross receipts 591,933. 86,100. 86,100. 2 Less: Contributions 505,833. 505,833. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 23,722. 23,722. 6 Rent/facility costs 30,972. 30,972. 7 Food and beverages 8 Entertainment 150,766. 150,766. 9 Other direct expenses 205,460. 10 Direct expense summary. Add lines 4 through 9 in column (d) 300,373. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No

b If "Yes," explain:

Sch	nedule G (Form 990 or 990-EZ) 2019 JUNIOR LEAGUE OF LUBBOCK, INC. /5-1	TIST	<u> </u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	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?		es	☐ No
12		ш.		
	Indicate the percentage of gaming activity conducted in:	ا ءمدا		0/
	a The organization's facility	13a		<u>%</u>
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🔲 Y	es/	☐ No
ŀ	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party \$\bigs\tag{\text{\text{\$\sigma}}}\$			
,	If "Yes," enter name and address of the third party:			
•	The root, of the real address of the time party.			
	Name ▶			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	└── Y	es/	└─ No
ŀ	numbers 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	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	ırt III, lin	es 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
	, , , , , , , , , , , , , , , , , , , ,			

Schedule G	G (Form 990 or 990-EZ)	JUNIOR	LEAGUE	OF	LUBBOCK,	INC.	75-1181735	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (cont	inued)					

SCHEDULE 0

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ) Department of the Treasury

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

OMB No. 1545-0047

Inspection

Name of the organization

JUNIOR LEAGUE OF LUBBOCK, INC.

Employer identification number 75-1181735

*** ======= ***
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DEVELOPING THE POTENTIAL OF WOMEN AND IMPROVING THE COMMUNITY THROUGH
THE EFFECTIVE ACTION AND LEADERSHIP OF TRAINED VOLUNTEERS FOR
EDUCATIONAL AND CHARITABLE PURPOSES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PURPOSES.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
INVITED TO PARTICIPATE IN THE PROGRAM. FOR 2019-2020, PARTICIPANTS
WILL REPRESENT NINE MIDDLE SCHOOLS IN LISD: ATKINS, CAVASOS, DUNBAR,
HUTCHINSON, IRONS, MACKENZIE, OL SLATON, SMYLIE WILSON AND TALKINGTON
YWL.
FORM 990, PART VI, SECTION B, LINE 11B:
A COPY OF THE FORM 990 WILL BE PRESENTED TO THE AUDIT COMMITTEE AND THEN
AGAIN TO THE EXECUTIVE BOARD FOR DISCUSSION, REVIEW AND APPROVAL PRIOR TO
FILING.
FORM 990, PART VI, SECTION B, LINE 12C:

MEMBERS WHO ARE PARTICIPATING IN DISCUSSIONS AND VOTES DISCLOSE AT THE TIME OF THE OCCURRENCE THE CONFLICT AND RECUSE THEMSELVES FROM THE VOTE. THIS IS DOCUMENTED IN THE MINUTES.

FORM 990, PART VI, SECTION C, LINE 18:

FORM 1023 AND FORM 990 ARE MADE AVAILABLE TO THE PUBLIC AT THE

Name of the organization JUNIOR LEAGUE OF LUBBOCK, INC.	Employer identification number 75-1181735
ORGANIZATION'S OFFICE IN LUBBOCK, TEXAS AND ON THEIR WEBS	ITE
WWW.JLLUBBOCK.COM.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION WILL MAKE AVAILABLE TO THE PUBLIC THE OR	GANIZATIONS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINA	NCIAL STATMENTS.
ALL DOCUMENTS CAN BE VIEWED AT THE ORGANIZATION'S OFFICE	IN LUBBOCK TEXAS.
FORM 990; PAGE 12; PART XII; LINE 2C	
THE BOARD OF DIRECTORS HAVE ASSIGNED MEMBERS TO AN AUDIT	COMMITTEE TO
OVERSEE THE FINANCIAL STATEMENT AUDIT AND SELECT THE INDE	PENDENT
FINANCIAL STATEMENT AUDITOR. THIS PROCESS HAS NOT CHANGE	D FROM PRIOR
YEARS.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

2019
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

JUNIOR LEAGUE OF LUBBOCK, INC.

Employer identification number 75-1181735

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Total inco	me End-of-yea	r assets Direct	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization a	answered "Yes" on Form 990	D, Part IV, line 34,	because it had one	e or more related tax-ex	empt		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled ity?	
JUNIOR LEAGUE OF LUBBOCK FOUNDATION -	PERMANENT ENDOWMENT FUNDS			501(c)(3))		Yes	No	
75-2831806, 4205 84TH STREET, LUBBOCK, TX 79423	USED TO SUPPORT THE JUNIOR LEAGUE OF LUBBOCK	TEXAS	501(C)(3)	509(A)(3) TYPE I	JUNIOR LEAGUE OF LUBBOCK	X		

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

181735 Page 2

	Identification of Bullet 10 maintains Trackless and Branchis Complete With a second West and Expression Control in the control
Part III	Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related
. art III	organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	າ)	(i)	(j	j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	al Direct controlling Predominant income Share of total Share of Share of			Code V-UBI	IRI General	ral or l	Percentage ownership			
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	_
												_
												_

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(k contr enti	tion b)(13) rolled ity?
		country)		J. 1.25.4		4553.5		Yes	No
									<u> </u>
								 	
									<u> </u>

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	y			. 1a	X					
	Gift, grant, or capital contribution to related organization(s)					X					
С	c Gift, grant, or capital contribution from related organization(s)										
	Loans or loan guarantees to or for related organization(s)					X					
	Loans or loan guarantees by related organization(s)					X					
f	Dividends from related organization(s)				. 1f	X					
g	Sale of assets to related organization(s)				. 1g	X					
h	Purchase of assets from related organization(s)				. 1h	X					
i	Exchange of assets with related organization(s)				. 1i	X					
j	Lease of facilities, equipment, or other assets to related organization(s)				. <u>1j</u>	X					
k	Lease of facilities, equipment, or other assets from related organization(s)				. 1k	X					
-1	Performance of services or membership or fundraising solicitations for related orga	anization(s)			. 11	X					
	Performance of services or membership or fundraising solicitations by related orga					X					
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	ion(s)			. 1n	X					
0	Sharing of paid employees with related organization(s)				. 1o	X					
р	Reimbursement paid to related organization(s) for expenses				. 1p	X					
q	Reimbursement paid by related organization(s) for expenses				. 1q	X					
	Other transfer of cash or property to related organization(s)					X					
s	Other transfer of cash or property from related organization(s)				. 1s	X					
2	If the answer to any of the above is "Yes," see the instructions for information on v	vho must complete t	this line, including covered	relationships and transaction thresholds.							
	(a)	(b)	(c)	(d)							
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount in	nvolved						
		type (a 3)									
۵.											
1)											
2)											
2)											
3)											
<u> </u>											
4)											
-,											
5)											
•											
6)											
3216	3 09-10-19			Schedule	R (Form 9	90) 2019					

Page 4

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

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

Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners 501(c)(orgs.	sec. (3)	Share of total	Share of end-of-year	Disprition	opor- ate ions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag	or Perce	centage
or entity		country)	excluded from tax under sections 512-514)	orgs.	?"	totai	ena-or-year	allocat	ions?				- ق - ا - ا - ا - ا - ا
		Country)	Sections 5 (2-5 (4)			income	assets	uou		of Schedule K-1	partne	? OWIT	nersnip
				Yes	No	lilcome	assets	Yes	No	(FOIII 1065)	Yes N	0	
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Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

illing or t	this form, visit www.ns.gov/e me providers/e me for chair	tioo and r	ion promo.								
Autom	atic 6-Month Extension of Time. Only subm	nit origin	al (no copies needed).								
All corpo	rations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnership	os, REMIC	s, and trusts						
must use	e Form 7004 to request an extension of time to file incom	ne tax retu	rns.								
Type or	Name of exempt organization or other filer, see instru	Taxpaver	Taxpayer identification number (TIN)								
print	The state of state of garmanetre of containing, soo money	(5) 5.	· · · · · · · · · · · · · · · · · · ·								
File by the	JUNIOR LEAGUE OF LUBBOCK,	75-1181735									
File by the due date fo filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. 4205 84TH STREET										
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LUBBOCK, TX 79423										
Enter the	Return Code for the return that this application is for (fil	e a separa	ate application for each return)			0 1					
Application			Application		Return						
ls For		Code	Is For		Code						
Form 990 or Form 990-EZ			Form 990-T (corporation)		07						
Form 990-BL			Form 1041-A	orm 1041-A							
Form 4720 (individual)			Form 4720 (other than individual)	20 (other than individual)							
Form 990-PF			Form 5227	10							
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069			11					
Form 99	0-T (trust other than above) ROBYN TEPPER	06	Form 8870								
Telep If the	ooks are in the care of → 4205 84TH STRED hone No. → (806) 794-8874 organization does not have an office or place of business is for a Group Return, enter the organization's four digit — . If it is for part of the group, check this box	s in the Ur Group Exe	Fax No. ▶ 806-794-88 nited States, check this box	f this is fo	r the whole group,						
the	the organization named above. The extension is for the organization's return for: calendar year or tax year beginning JUN 1, 2019 , and ending MAY 31, 2020 .										
	his application is for Forms 990-BL, 990-PF, 990-T, 4720			0							
	y nonrefundable credits. See instructions.	3a	\$	0.							
	his application is for Forms 990-PF, 990-T, 4720, or 6069	3b	\$	0.							
_		mated tax payments made. Include any prior year overpayment allowed as a credit.									
	ilance due. Subtract line 3b from line 3a. Include your pa	20	e	0.							
using EFTPS (Electronic Federal Tax Payment System). Se				3c	\$ 0070 FO f						
Caution instruction	: If you are going to make an electronic funds withdrawal ons.	(direct de	ıbil) willi lilis Follli 8868, see Form 8	433-EU ar	10 FUIII 68/9-EU 1	or payment					

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

Form 8868 (Rev. 1-2020)