			EXTENDED TO APRIL 18,	2022		
	Ω	00	Return of Organization Exempt F			OMB No. 1545-0047
Form 990			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue			
Department of the Treasury			Do not enter social security numbers on this form a	as it may b	pe made public.	Open to Public
Intern	al Reve	enue Service	Go to www.irs.gov/Form990 for instructions and			Inspection
<u>A</u> F	or th	e 2020 calend	ar year, or tax year beginning $ m JUN1$, 2020 and e	ending M	AY 31, 2021	
B C a	heck if pplicab	le: C Name o	forganization		D Employer identifie	cation number
	Addre	JUNI	OR LEAGUE OF LUBBOCK, INC.			
	Name chang	ge Doing b	usiness as		75-11817	35
	Initial	Number	and street (or P.O. box if mail is not delivered to street address)			
	Final	<i>V</i>	84TH STREET		(806) 79	
	termir ated Amen	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	170,046.
	Ireturn		OCK, TX 79423		H(a) Is this a group re	
L	Applion tion pendi	^{ing} F Name a	nd address of principal officer:LESLIE COLLINS AS C ABOVE		for subordinates H(b) Are all subordinates ir	
ΙT	ax-ex	empt status:	X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	r 📃 527		list. See instructions
			JLLUBBOCK . COM		H(c) Group exemptio	
κF	orm o	f organization:	X Corporation Trust Association Other ►	L Year	of formation: 1946	A State of legal domicile: TX
Pa	nrt I					
ø	1	Briefly describ	be the organization's mission or most significant activities: $\begin{array}{cc} \mathtt{THE} & \mathtt{J} \end{array}$	UNIOR	LEAGUE OF	LUBBOCK ,
Governance		INC IS	AN ORGANIZATION OF WOMEN COMMITTED) TO P	ROMOTING VO	LUNTEERISM,
ern	2		x 🕨 📖 if the organization discontinued its operations or dispose	ed of more	1 1	-
20K	3					8
	4		lependent voting members of the governing body (Part VI, line 1b) of individuals employed in calendar year 2020 (Part V, line 2a)			8
ies		1				
Activities &			of volunteers (estimate if necessary)		156	
Act			d business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	·····		0.
					Prior Year	Current Year
ne	8		and grants (Part VIII, line 1h)		155,390. 0.	106,359.
Revenue	9	•	ce revenue (Part VIII, line 2g)		21,036.	15,122.
Re			come (Part VIII, column (A), lines 3, 4, and 7d)		304,528.	-9,803.
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		480,954.	111,678.
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		23,712.	22,633.
			nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
			to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)		29,554.	33,221.
sec			undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses			ing expenses (Part IX, column (D), line 25)	0.		
Ă			es (Part IX, column (A), lines 11a-11d, 11f-24e)		308,801.	274,466.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		362,067.	330,320.
			expenses. Subtract line 18 from line 12		118,887.	-218,642.
Net Assets or Fund Balances					ginning of Current Year	End of Year
sets alano	20	Total assets (Part X, line 16)		1,674,467.	1,447,841.
ASS			(Part X, line 26)		66,697.	66,553.
Fun	22	Net assets or	fund balances. Subtract line 21 from line 20		1,607,770.	1,381,288.
Pa	irt II					
Unde	er pena	alties of perjury,	I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	y knowledge and belief, it is
true,	corre	ct, and complete	Declaration of preparer (other than officer) is based on all information of whi	ich preparer	has any knowledge.	
Sig	ו				Date	
Her	е	TRAC	I SIEBENLIST, VP FINANCE			

	Type or print name and title									
	Print/Type preparer's name	Preparer's signature								
Paid	MATT R. WILLIS	MATT R. WILLIS		22 if P00419741						
Preparer Firm's name BOLINGER, SEGARS, GILBERT AND MOSS LLP Firm's EIN 75-088										
Use Only	Firm's address 📐 8215 NASHVILLE A									
	LUBBOCK, TX 79423 Phone no. (806)747-3806									
May the IF	May the IRS discuss this return with the preparer shown above? See instructions									
020001 10 0	20001 10 00 00 LUA For Paperwork Poduction Act Notice, see the separate instructions									

032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2020)

Form	JUNIOR LEAGUE OF LUBBOCK, INC.	75-1181735	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	Χ
1	Briefly describe the organization's mission: THE JUNIOR LEAGUE OF LUBBOCK, INC IS AN ORGANIZATION O	F WOMEN	
	COMMITTED TO PROMOTING VOLUNTEERISM, DEVELOPING THE PO		MEN
	AND IMPROVING THE COMMUNITY THROUGH THE EFFECTIVE ACTI		
	LEADERSHIP OF TRAINED VOLUNTEERS FOR EDUCATIONAL AND C	HARITABLE	
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	XNo
_	If "Yes," describe these new services on Schedule O.		v
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s?Yes ∣	XNo
4	If "Yes," describe these changes on Schedule O. 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 c		
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 147,829 • including grants of \$ 22,633 •) (Re)
	THE JUNIOR LEAGUE OF LUBBOCK'S CURRENT FOCUS IS ON IMP		/ES
	OF THE CHILDREN OF LUBBOCK AND SURROUNDING COMMUNITIES		
	PROJECTS INCLUDE, BUT ARE NOT LIMITED TO, FOOD 2 KIDS, ASSOCIATION SOUTH PLAINS FOOD2KIDS AND LUBBOCK INDEPEN	A PROJECT IN DENT SCHOOL	
	DISTRICT TO PROVIDE FOOD ON FRIDAYS TO CHILDREN WHO HA		
	IDENTIFIED AS BEING AT RISK FOR SUFFERING FROM HUNGER		
	WEEKEND. KIDS IN THE KITCHEN IS A PROGRAM INITIATED B		JE
	ASSOCIATIONS FROM ACROSS THE COUNTRY TO ENCOURAGE CHIL	DREN AND FAMII	LIES
	TO GET IN THE KITCHEN, PROMOTE HEALTHIER LIFESTYLES AN		
	RESOURCES AND HAND ON INSTRUCTION TO FACILITATE THESE	GOALS.	
4b			
40	(Code:) (Expenses \$including grants of \$) (Re SPARK IS DESIGNED TO EDUCATE UNDER-PRIVILEGED AND UNDE	venue \$ RSERVED TEENAO	GE '
	GIRLS IN LUBBOCK. IN SEPTEMBER 2012, THE MEMBERSHIP VC		
	SPARK AS THE NEXT SIGNATURE PROJECT OF THE JUNIOR LEAG	UE OF LUBBOCK	
		POTENTIAL IN	
		DENTS AND LEAD	
	MAKING A POSITIVE IMPACT IN THEIR COMMUNITY. THIS FOU TEACHES TEAMWORK, SELF-CONFIDENCE, THE VALUE OF EDUCAT	R-PART PROGRAM	
	COMMUNITY INVOLVEMENT THROUGH VOLUNTEERISM. IN ITS IN		
	IMPLEMENTED THIS PROGRAM IN FOUR LISD SCHOOLS: WILSON,		
	AND DUNBAR. TEN TO FIFTEEN YOUNG WOMEN FROM EACH SCHO	OL WERE	
	IDENTIFIED BY TEACHERS AND SCHOOL ADMINISTRATORS AS LE		
	POTENTIAL LEADERS AMONG THEIR PEERS, BOTH ACADEMICALLY		
4c	(Code:) (Expenses \$ including grants of \$) (Re	venue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 147,829.	O(90 (2020)
032002	2 12-23-20 SEE SCHEDULE O FOR CONTINUATION		<i>iu</i> (2020)

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	330	

 Form 990 (2020)
 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)?		77	
_	If "Yes," complete Schedule A	1	X X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Δ	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	•		x
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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,			
	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	8		x
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	0		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	~	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100		x
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		- 23
b	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		x
14a		14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		77	
	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,"			v
~	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		x
		<u> </u>		

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FUIII	990	(2020)

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			v
••	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	0.4-		x
h	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		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		<u> </u>
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
. .	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			x
33	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 33		
0-1	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	x	<u> </u>
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		<u> </u>	
	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
с	(gambling) winnings to prize winners?	1c		
	(3			

Form 990	
Part V	Sta

			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 1						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
b	If "Yes," enter the name of the foreign country						
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a							
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
юа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	60		x			
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		- 23			
U	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).	00					
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х				
b	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						
	to file Form 8282?	7c		x			
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	N/	Х			
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b					
10	Section 501(c)(7) organizations. Enter:						
a L	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:						
11							
a h	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 Image: Comparison of the sources against Image: Comparison of the sources against						
5	amounts due or received from them.) 11b						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
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 13c						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
	excess parachute payment(s) during the year?	15		X			
	If "Yes," see instructions and file Form 4720, Schedule N.			17			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X			
	If "Yes," complete Form 4720, Schedule O.						

Form **990** (2020)

	Check if Schedule O contains a response or note to any line in this Part VI		
Sec	tion A. Governing Body and Management		
		1 1	
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	
	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 0.		
b	Enter the number of voting members included on line 1a, above, who are independent	1b	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	. ,	
	officer, director, trustee, or key employee?		
3	Did the organization delegate control over management duties customarily performed by or under the		
	of officers, directors, trustees, or key employees to a management company or other person?		
4	Did the organization make any significant changes to its governing documents since the prior Form		
5	Did the organization become aware during the year of a significant diversion of the organization's as		
6	Did the organization have members or stockholders?		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a		
	more members of the governing body?		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders,	or
	persons other than the governing body?		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by the follow	/ing:
	The governing body?		
b	Each committee with authority to act on behalf of the governing body?		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re		
200	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue Code	e.)
a b 9	Did the organization contemporaneously document the meetings held or written actions undertaken during the year The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	ear by the ached at	follow the

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 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 before filing the form?	11a		Х		
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 conflicts?	12b	Х			
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 participation					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's					
	exempt status with respect to such arrangements?	16b				
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) avail	able		
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O)					

Form 990 (2	2020) J	JUNIOR	LEAGUE	OF	LUBBOCK,	INC.	75-1181735	Page 6
Part VI	Governance, Ma	anagemer	nt, and Dis	closı	u re For each "Yes	" response	to lines 2 through 7b below, and for a "No" re	sponse
	to line 8a, 8b, or 10b l	below, desci	ribe the circur	nstanc	es, processes, or	changes on	Schedule O. See instructions.	

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

X

Х

Х

Х

Х

Х

Х

Х

Х

No Х

х

Х

Yes

Yes No

8

8

2

3

4

5

6

7a

7b

8a

8b

9

10a

19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial
	statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records LAUREN MACLASKEY - (806) 794-8874

ΤХ 79423 4205 84TH STREET, LUBBOCK,

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.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition	l than	one	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week					1/		from	from related	other
	(list any	ndividual trustee or director						the	organizations	compensation from the
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	ruste	ll trus		vee	mpen		(** 2/1000 10100)		and related
	below	d ual 1	Institutional trustee	L	mplo	est co oyee	Ŀ			organizations
	line)	Indivi	In stitu	Officer	Key employee	Highest compensated employee	Former			0
(1) TINA STONE	15.00									
PRESIDENT	1.00	Х		X				0.	0.	0.
(2) LESLIE COLLINS	3.00									
PRESIDENT ELECT	1.00	Х		Х				0.	0.	0.
(3) JESSIE CAYTON	5.00									
VP COMMUNITY IMPACT		Х		Х				0.	0.	0.
(4) KACEE HOGG	5.00									
VP MEMBERSHIP DEVELOPMENT		Х		Х				0.	0.	0.
(5) LAUREN MACLASKEY	5.00									
VP FINANCE	1.00	Х		х				0.	0.	0.
(6) KRISTIN TEINERT BOLES	5.00									
BYLAWS CHAIRMAN		Х		X				0.	0.	0.
(7) JENNY TURNER	5.00									
VP FUND DEVELOPMENT	1.00	Х		X				0.	0.	0.
(8) DAWN ZUERKER	5.00									•
SUSTAINING ADVISOR		X		X				0.	0.	0.
		1								
		1								
	-		-	-						

	1 990 (2020) JUNIOR LE									75-11	817	735	Pa	ge 8
Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	box	not c , unle	ss pe	ition ^{more} rson i	than o is botl pr/trus	n an	(D) Reportable compensation from	(E) Reportable compensation from related		Esti amo	(F) mateo ount c ther	
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	>)	orgai	m the nizatio relate	on ed
											+			
											_			
											\square			
											+			
											+			
											\square			
	Subtotal								0.		0.			0.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)								0.		0. 0.			0.
2	Total number of individuals (including but no compensation from the organization							io r	eceived more than \$100),000 of reportable				0
												١	ſes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for so				•	•			ghest compensated emp	-		3		х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150		le co	omp	ensa	ation	n and	l ot	her compensation from			4		x
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i>	accrue comper	nsat	ion f	rom	any	unr	elat	ted organization or indiv	idual for services		5		х
Sec	tion B. Independent Contractors			0/ 00		00/0					···	<u> </u>		
1	Complete this table for your five highest con the organization. Report compensation for t										ensa	ation fro	om	
	(A) Name and business	address	N	ONE	2				(B) Description of s	services	Cc	(C) ompens		1
								_						
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz		ot li	mite	d to		se lis)	stec	d above) who received n	nore than				

Pa	rt VII	Statement of Revenue					
		Check if Schedule O contains a response or n	ote to any line				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Fundraising events1c3Related organizations1d3Government grants (contributions)1eAll other contributions, gifts, grants, and	26,575. 57,077. 52,855. 9,852.	106,359.			
			siness Code				
Program Service Revenue	2 a b c d e f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest, a other similar amounts) Income from investment of tax-exempt bond proce	eeds	15,122.			15,122.
	5 6 a b c		i) Personal				
		Net rental income or (loss)		1,108.			1,108.
Revenue	7 a b	Gross amount from sales of assets other than inventory (i) Securities Less: cost or other basis and sales expenses 7b	(ii) Other				
eve		Gain or (loss) 7c					
٦		Net gain or (loss) Gross income from fundraising events (not	►				
Othe		including \$ <u>37,077.</u> of contributions reported on line 1c). See Part IV, line 18 8a 4	7, <u>44</u> 7. 8,368.				
		Net income or (loss) from fundraising events		-10,921.			-10,921.
	9 a	Gross income from gaming activities. See Part IV, line 19 9a					
		Less: direct expenses 9b					
	10 a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances	10.				
		Less: cost of goods sold 10b	0.	1.0			10
	С	Net income or (loss) from sales of inventory		10.			10.
Miscellaneous Revenue	11 a		siness Code				
lan€	b						
Sev	с						
Mis		All other revenue					
		Total. Add lines 11a-11d		111 670		0	E 210
	12	Total revenue. See instructions		111,678.	0.	0.	5,319.

JUNIOR LEAGUE OF LUBBOCK, INC.

Form 990 (2020)

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Page **9**

JUNIOR LEAGUE OF LUBBOCK, INC.

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

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	· ·	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	20,000.	20,000.		
~	and domestic governments. See Part IV, line 21	20,000.	20,000.		
2	Grants and other assistance to domestic	2,633.	2,633.		
2	individuals. See Part IV, line 22	2,055.	2,055.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
5	trustees, and key employees				
6	Compensation not included above to disqualified				
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	30,856.		30,856.	
' 8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
9 10	Payroll taxes	2,365.		2,365.	
11	Fees for services (nonemployees):				
 a	Management				
b		726.		726.	
c	• · · · · · · · · · · · · · · · · · · ·	21,969.		21,969.	
d					
e e					
f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch O.)	1,500.		1,500.	
12	Advertising and promotion	1,692.		1,692.	
13	Office expenses	16,385.		16,385.	
14	Information technology				
15	Royalties				
16	Occupancy	68,100.		68,100.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,359.	3,359.		
20	Interest	-			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,311.		18,311.	
23	Insurance	10,295.		10,295.	
24	Other expenses. Itemize expenses not covered	-			
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	COMMUNITY PROJECTS	121,837.	121,837.		
b					
c					
d					
e	All other expenses	10,292.		10,292.	
25	Total functional expenses. Add lines 1 through 24e	330,320.	147,829.	182,491.	(
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)				

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JUNIOR LEAGUE OF LUBBOCK, I	NC
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Fa					
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	705,985.	1	334,747.
	2	Savings and temporary cash investments	523,055.	2	665,016.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges	3,031.	9	3,517.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,014,289.	,		
	b	Less: accumulated depreciation 10b 569,728.	. 442,396.	10c	444,561.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,674,467.	16	1,447,841.
	17	Accounts payable and accrued expenses	21,069.	17	6,629.
	18	Grants payable		18	
	19	Deferred revenue		19	31,004.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iabi		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	17,635.	25	28,920.
	26	Total liabilities. Add lines 17 through 25	66,697.	26	66,553.
s		Organizations that follow FASB ASC 958, check here \blacktriangleright X			
Net Assets or Fund Balances		and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions	1,607,770.	27	1,381,288.
B	28	Net assets with donor restrictions		28	
nuc		Organizations that do not follow FASB ASC 958, check here 🕨 📃			
г Г		and complete lines 29 through 33.			
tsc	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ťĄ	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ne	32	Total net assets or fund balances	1,607,770.	32	1,381,288.

Total net assets or fund balances

Total liabilities and net assets/fund balances

1,447,841. Form 990 (2020)

33

1,607,770. 1,674,467.

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_		
Form	990	(2020)

032012	12-23-20		

				1 -	— ~
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,6	
2	Total expenses (must equal Part IX, column (A), line 25)	2			20.
3	Revenue less expenses. Subtract line 2 from line 1	3			42.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,60		
5	Net unrealized gains (losses) on investments	5	_	7,8	40.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,38	1,2	88.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				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	0.	-		
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				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	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				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
	Act and OMB Circular A-133?	-	3a		x
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ		···· Ju		
~	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		Зb		
			50	000	

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

Form **990** (2020)

Part XI	Reco	nciliation	of Net	Ass	ets
Form 990	(2020)		JUNI	OR	LE.

SCHEDULE A

(Form	990	or	990-EZ))
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Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2020
Open to Public Inspection

Department of the Treasury				Attach to Form 990 or F	orm 990-	·EZ.			Open to Public	
Internal Revenue Service			Go to www.irs.go	/Form990 for instruction	ons and t	he latest i	nformation.		Inspection	
Nan	ne of	the organizati								identification number
			JUNI	OR LEAGUE	OF LUBBOCK,	INC.				5-1181735
Ра	rt I	Reason	for Public	Charity Status.	(All organizations must o	omplete t	his part.) S	see instruction	าร.	
The	orgar				(For lines 1 through 12, o		,			
1	Щ	A church, co	nvention of ch	nurches, or association	on of churches describe	d in sectio	on 170(b)(*	1)(A)(i).		
2	Щ	A school des	cribed in sect	tion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990 or 9	90-EZ).)			
3	Щ	•	•		anization described in s e					
4		A medical res	search organiz	zation operated in co	njunction with a hospita	l describe	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and stat	:e:							
5		An organizat	ion operated f	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit describ	ed in
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, sta	ate, or local go	vernment or governr	mental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organizat	ion that norma	ally receives a substa	antial part of its support f	irom a gov	vernmental	unit or from	the general	public described in
		section 170(b)(1)(A)(vi). (C	Complete Part II.)						
8		A community	rtrust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultur	al research org	ganization described	l in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college
		or university	or a non-land-g	grant college of agric	culture (see instructions).	Enter the	name, city	y, and state c	f the colleg	e or
		university:								
10	X	An organizat	ion that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	ship fees, ar	nd gross receipts from
		activities rela	ted to its exer	npt functions, subje	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of	its support	from gross investment
		income and ι	unrelated busi	ness taxable income	e (less section 511 tax) fr	om busine	esses acqu	ired by the o	rganization	after June 30, 1975.
		See section	509(a)(2). (Co	mplete Part III.)						
11	Щ	-	-	-	ively to test for public sa	-				
12		An organizat	ion organized	and operated exclus	ively for the benefit of, to	o perform	the function	ons of, or to c	arry out the	purposes of one or
		more publicly	/ supported or	rganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). C	heck the box in
	_	_lines 12a thro	ough 12d that	describes the type of	of supporting organizatio	n and con	nplete lines	s 12e, 12f, an	d 12g.	
а					supervised, or controlled					
		the suppor	ted organizati	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	upporting
		organizatio	n. You must o	complete Part IV, Se	ections A and B.					
b		Type II. A s	supporting org	anization supervised	d or controlled in connec	tion with it	ts support	ed organizati	on(s), by ha	ving
		control or r	management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or man	age the sup	ported
	_	organizatio	n(s). You mus	st complete Part IV,	Sections A and C.					
С		Type III fui	nctionally inte	egrated. A supportin	g organization operated	in connec	tion with, a	and functiona	ally integrate	ed with,
	_	_ its support	ed organizatio	on(s) (see instructions	s). You must complete l	Part IV, Se	ections A,	D, and E.		
d		Type III no	n-functionally	y integrated. A supp	porting organization oper	ated in co	nnection v	vith its suppo	orted organi	zation(s)
		that is not	functionally inf	tegrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attenti	veness
		requiremer	nt (see instruct	tions). You must co r	nplete Part IV, Sections	s A and D	, and Part	V.		
е			0		written determination fro			а Туре I, Туре	e II, Type III	
					onally integrated support		zation.			
f	Ente	er the number	of supported	organizations						
g			-	n about the supporte		(iv) In the orac	nization listed			
	((i) Name of supp organizatior 		(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	anization listed ing document?	(v) Amount o support (see i	-	(vi) Amount of other support (see instructions)
		organization	•	ļ	above (see instructions))	Yes	No	Support (See I	1311 100 115)	
							ļ			

Schedule A (Form 990 or 990-EZ) 2020 JUNIOR LEAGUE OF LUBBOCK, INC.

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	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 \dots						
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)						
	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 \dots						
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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop						▶∟
-	ction C. Computation of Publ		-				
14	Public support percentage for 2020 (14	%
15	Public support percentage from 2019					15	%
16a	33 1/3% support test - 2020. If the c						
	stop here. The organization qualifies						
a	33 1/3% support test - 2019. If the c						
47-	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes		·				
	and if the organization meets the fact					-	
Ŀ	meets the facts-and-circumstances te	•	• •		•	17a, and line 15 is	
a	10% -facts-and-circumstances tes	-					10% 01
	more, and if the organization meets the		-		• •		
10	organization meets the facts-and-circ		•	•			
18	Private foundation. If the organization	n dia not check a		a, 100, 17a, 01 17	D, CHECK THIS DOX	and see instruction	IS 🕨 📖

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 JUNIOR LEAGUE OF LUBBOCK, INC. 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.)

Sec	ction A. Public Support	elow, please comp	nete i art ii.)				
-	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and	(a) 2010	(b) 2017	(c) 2018	(u) 2019	(e) 2020	(1) 10tai
	membership fees received. (Do not	109 672	126,021.	155 886	155,390.	106,359.	742,328.
	include any "unusual grants.")	190,072.	120,021.	100,000.	155,390.	100,359.	142,320.
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the	400 440	400 064	400 010			0004000
	organization's tax-exempt purpose	488,448.	492,264.	470,813.	505,938.	47,457.	2004920.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
e	v v	687,120.	618,285.	626 699	661,328.	153 816	2747248.
	Total. Add lines 1 through 5	55,,120.	510,203.	520,055.	551,520.	100,010.	
7 a	Amounts included on lines 1, 2, and						0.
1-	3 received from disqualified persons Amounts included on lines 2 and 3 received						0.
L.	from other than disgualified persons that						
	exceed the greater of \$5,000 or 1% of the						0
	amount on line 13 for the year						0.
	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						2747248.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d)2019 661,328.	(e)2020 153,816.	(f) Total
9	Amounts from line 6	687,120.	618,285.	626,699.	661,328.	153,816.	2747248.
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources	11,980.	12,442.	21,188.	25,086.	16,230.	86,926.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	11,980.	12,442.	21,188.	25,086.	16,230.	86,926.
	Net income from unrelated business	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	,		20,2001	00,9200
	activities not included in line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
•-	assets (Explain in Part VI.)	600 100	620 707	617 007	686,414.	170 046	2834174.
	Total support. (Add lines 9, 10c, 11, and 12.)	699,100.	-	-	-	-	
14	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organizati	on,
_							
-	ction C. Computation of Public						00.00
15	Public support percentage for 2020 (I					15	96.93 %
16	Public support percentage from 2019					16	97.66 %
Sec	ction D. Computation of Inves	stment Incom	e Percentage				
17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))						17	3.07 %
18	Investment income percentage from 2	2019 Schedule A,	Part III, line 17			18	2.34 %
19a	33 1/3% support tests - 2020. If the					3 1/3% , and line 1	
	more than 33 1/3%, check this box ar						N 17
b	33 1/3% support tests - 2019. If the						
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organizatio						
-	23 01-25-21			,,,			or 990-FZ) 2020

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1	
2	
3a	
3b	
3c	
30	
4a	
14	
4b	
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5a	
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9a	
9b	
9c	
10a	
10-	
10b	

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Schedule A (Form 990 or 990-EZ) 2020 JUNIOR LEAGUE OF LUBBOCK, INC.

1

2

Yes No

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
11c below, the governing body of a supported organization?	11a		
b A family member of a person described in line 11a above?	11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		
Section B. Type I Supporting Organizations			
		Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. <i>If the organization had more than one supported</i> <i>organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i> <i>supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	
2	Did the exception encrote for the banefit of any supported exception other than the supported	Γ

Did the organization operate for the benefit of any supported organization other than the supported 2 organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

Part IV Supporting Organizations (continued)

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). 1
- а ____ The organization satisfied the Activities Test. Complete line 2 below.
- ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. b
- I The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

За

3b

Schedule A (Form 990 or 990 EZ) 2020 JUNIOR LEAGUE OF LUBBOCK, INC.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	tion 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	tion 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):			
а	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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-functiona	Illy integra	ted Type III supporting or	nanization (see

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

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 JUNIOR LEAGUE OF LUBBOCK, INC. Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (c)

га	i v j rype in Non-i unctionally integrated 505	(a)(J) Supporting Org	anizations (continu	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ns	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
с	Excess from 2018				
d	Excess from 2019				
e	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Schedule A	(Form 990 or 990-EZ) 2020	JUNIOR LEA	AGUE OF	LUBBOCK,	INC.	75-1181735 Page 8
Part VI	Supplemental Inforn	nation. Provide th 2, 3b, 3c, 4b, 4c, 5a nes 2 and 3; Part IV	e explanations a, 6, 9a, 9b, 9c, , Section E, line	required by Part 11a, 11b, and 11 s 1c, 2a, 2b, 3a, a	I, line 10; Part II, line 17a c; Part IV, Section B, line and 3b; Part V, line 1; Pai	s 1 and 2; Part IV, Section C, t V, Section B, line 1e; Part V,

Department of the Treasury

or 990-PF)

Int N

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

number

Internal Revenue Service		
Name of the organizatio	n	Employer identification
	JUNIOR LEAGUE OF LUBBOCK, INC.	75-1181735
Organization type (che	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization	
	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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

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).

LHA 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) (2020)

Name of orc	anization
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75-1181735

JUNIOR LEAGUE OF LUBBOCK, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	UNITED SUPERMARKETS 7830 ORLANDO AVE LUBBOCK, TX 79423	\$ <u>16,357.</u>	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	JUNIOR LEAGUE OF LUBBOCK FOUNDATION 4205 84TH STREET LUBBOCK, TX 79423	\$32,855.	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
3	RUSHING FAMILY FOUNDATION 2737 82ND STREET LUBBOCK, TX 79423	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Employer identification number

75-1181735

JUNIOR LEAGUE OF LUBBOCK, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of or	rganization				Employer identification number
	R LEAGUE OF LUBBOCK, IN				75-1181735
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, o Use duplicate copies of Part III if additional	hrough (e) and the followin that the followin that the followin the	a line entry. For o	rganizations	
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Desc	ription of how gift is held
		(e) Transfe	er of gift		
-	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of tra	nsferor to transferee
(a) No					
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Desc	ription of how gift is held
	Transforce's name address or	(e) Transfe		alationabin of tra	noferer to transferee
-	Transferee's name, address, ar				nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Desc	ription of how gift is held
-		(e) Transfe	er of gift		
-	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Desc	ription of how gift is held
F		(e) Transfe	er of gift		
F	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of tra	nsferor to transferee

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form	990)
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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.



Name of the organization

JUNIOR LEAGUE OF LUBBOCK, INC. Employer identification number 75-1181735

Pa			r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6. (a) Donor advised funds	(b) Funds and other accounts
	Tabel work on about of comm		
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		formed a
5	Did the organization inform all donors and donor advisors in	-	
•	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		° n n
Pa		repiration answered "Vee" on Form 900. Der	
			t iv, ille 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (for example, recrea		historically important land area
	Protection of natural habitat		certified historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	Held at the End of the Tax Year
-	day of the tax year.		
a L	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic str		
a	Number of conservation easements included in (c) acquired	-	
2	listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the of	
4	year ► Number of states where property subject to conservation ea	soment is located	
- 5	Does the organization have a written policy regarding the pe		
5	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
Ŭ		nandling of violations, and emotoring conser	valion casements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	n easements during the year
•	Should be should be intering in the intering in the pool ing, that is a standard with the intering in the pool ing, that is a standard with the intering in the pool ing, that is a standard with the intering in the pool ing, that is a standard with the intering in the pool ing, the pool is a standard with the pool in the pool ing, the pool is a standard with the pool in the pool in the pool is a standard with the pool in		n casemente danng the year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)	(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	y	
9	In Part XIII, describe how the organization reports conservati		
•	balance sheet, and include, if applicable, the text of the foot	•	
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and	l balance sheet works
	of art, historical treasures, or other similar assets held for pul		
	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95		ance sheet works of
	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	· · ·	
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1	-	► \$
	Assets included in Form 990, Part X		

Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) a Using the organization accession, and other records, check any of the following that make significant use of ta collection tame (check all that apply): a Police exhibition a Police exhibition d Loan or exchange program b Scholary research c Other	-		LEAGUE OF I					181735 _F	
collection terms (check all that apply): a b b Scholarly research c Other	Pa	rt III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or	Other S	Similar Ass	ets(continued)	
a Public exhibition d L Can or exchange program b Schelarly research e Other	3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that r	make sign	ificant use of it	S	
b Scholary research e Other		collection items (check all that apply):							
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 2 Do the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 2 Do the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 2 Do the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 2 No 1a Indowment FundS. Complete If the organization answered 'Yes' on Form 990, Part X, line 10. 1b Indowment FundS. Complete If the organization answered 'Yes' (No Proryeart A) (In Proryeart A) (In Prory 893, 6	а	Public exhibition	d	Loan or exc	hange program	ו			
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization's collection? Part W Escrow and Custodial Arrangements. Complete if the organization as objection? Part W escrow and a sent trustee, custodian or other intermediary for contributions or other assets not included on form 980, Part X, line 21. Beginning balance	b	Scholarly research	е	Other					
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets Ves No. Part IV Escrow and Custodial Arrangements. Complete if the organization's collection? Ves n. Is the organization an agent, fustlee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. Ine 21. Ves No. Is 1'yes, 'explain the arrangement in Part XII and complete the following table: Ves No. If 'Yes,' explain the arrangement in Part XII and complete the following table: Id Amount 1c Anditions during the year 1d Id 2a Odd the organization angent in Part XII. Check here if the explanation has been provided on Part XII No If 'Yes,' explain the arrangement in Part XII. Check here if the explanation has been provided on Part XII No Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII No 1a Beginning of year balance (a) Current year (b) Phor year lock (c) Two years back (e) four	с	Preservation for future generations							
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Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X // Explain the arrangement in Part XIII and complete the following table: Image: Complete III (Complete) IIII (Complete) IIIII (Complete) IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	5						_		_
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e Other expenditures for facilities and programs 32,855. 100,000. f Administrative expenses 45. g End of year balance 817,223. 655,054. 739,461. 720,439. 678,958. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ 100 % % c Term endowment ▶ % % f(i) The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) Unrelated organizations 3a(i) X 3a(ii) X d Describe in Part XIII the intended uses of the organization's endowment funds.			191,002.	12,000.	±,,		11,101		,102.
and programs 32,855. 100,000. f Administrative expenses 45.		r							
f Administrative expenses 45. 1 720,439. 678,958. g End of year balance 817,223. 655,054. 739,461. 720,439. 678,958. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % % c Term endowment ▶ % mb percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations	e		32 855	100 000					
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The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (a) Cost or other basis (other) (b) So (ther) (c) Accumulated depreciation (c) Accumulated depreciation (d) Equipment (d) Equipment (d) Equipment (d) Equi		·							
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b X 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value 1a Land 231, 749. 231, 749. b Buildings 680, 497. 487, 391. 193, 106. c Leasehold improvements 102, 043. 82, 337. 19, 706.			uld equal 100%.						
by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Buildings c Leasehold improvements d Equipment d Equipment e Other (i) Unrelated organizations (ii) Related organizations (iii) Related orga	3a		•	ation that are held a	nd administere	d for the d	organization		
(ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b X 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other depreciation 1a Land 231, 749. 231, 749. b Buildings 680, 497. 487, 391. 193, 106. c Leasehold improvements 102, 043. 82, 337. 19, 706.		by:	C C				C C	Yes	No
(ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b X 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 231,749. 231,749. 231,749. b Buildings 680,497. 487,391. 193,106. c Leasehold improvements 102,043. 82,337. 19,706. e Other 0 0 0 0		(i) Unrelated organizations						3a(i)	X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b X 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land 231,749. 231,749. b Buildings 680,497. 487,391. 193,106. c Leasehold improvements 102,043. 82,337. 19,706. e Other 0ther 0ther 0ther 0ther								3a(ii) X	
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 231,749. 231,749. 231,749. b Buildings 680,497. 487,391. 193,106. c Leasehold improvements 102,043. 82,337. 19,706. e Other 0ther 0ther 0ther 0ther	b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R?				Зь Х	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 231,749. 231,749. 231,749. b Buildings 680,497. 487,391. 193,106. c Leasehold improvements 102,043. 82,337. 19,706. e Other 111. 111. 111. 111.	4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.					
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land231,749.231,749.231,749.b Buildings680,497.487,391.193,106.c Leasehold improvements102,043.82,337.19,706.e Other102,043.102,043.101,706.	Pa	rt VI Land, Buildings, and Equipm	ent.						
basis (investment) basis (other) depreciation 1a Land 231,749. 231,749. b Buildings 680,497. 487,391. 193,106. c Leasehold improvements 102,043. 82,337. 19,706. e Other 111.251 111.251		Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, F	Part X, line	e 10.		
1a Land 231,749. 231,749. b Buildings 680,497. 487,391. 193,106. c Leasehold improvements 102,043. 82,337. 19,706. e Other 101,043. 101,043. 101,000.		Description of property						(d) Book valu	le
b Buildings 680,497. 487,391. 193,106. c Leasehold improvements 102,043. 82,337. 19,706. e Other 101,043. 101,043. 101,000.	- 1a	Land		· · ·	· /	,		231,7	49.
c Leasehold improvements 102,043. 82,337. 19,706. e Other 101.0000000000000000000000000000000000						48	7,391.		
d Equipment 102,043. 82,337. 19,706. e Other 1000000000000000000000000000000000000					-		-		
e Other				10	2,043.	8	2,337.	19,7	06.
				X, column (B), line 1	0c.)		►	444,5	61.

Schedule D (Form 990) 2020

(1) Fina	ncial derivatives			
	ely held equity interests			
(3) Othe	er			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Co	ol. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨			
Part \	/III Investments - Program Related.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	ol. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨			
Part I				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
		Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	Column (b) must equal Form 990, Part X, col. (B) line	- <i>15</i>)		•
Part >				
	Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 2	5
1.	(a) Description of liability			(b) Book value
	Federal income taxes			
	DUES PAYABLE			17,920.
	PPP LOAN			11,000.
				11,0001
(4)				
(5)				
(6)				
(7)				+
(8)				
(9)		05.)		28,920.
	Column (b) must equal Form 990, Part X, col. (B) line			
	ility for uncertain tax positions. In Part XIII, provide nization's liability for uncertain tax positions under			

Schedule D (Form 990) 2020 JUNIOR LEAGUE OF LUBBOCK, INC.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(b) Book value

Part VII Investments - Other Securities.

(a) Description of security or category (including name of security)

(c) Method of valuation: Cost or end-of-year market value

Sche	dule D (Form 990) 2020 JUNIOR LEAGUE OF LUBBOCK ,	INC.	75-1181735 _P
	t XI Reconciliation of Revenue per Audited Financial Stater		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12		•
1	Total revenue, gains, and other support per audited financial statements		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		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial State	-	enses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.	
1	Total expenses and losses per audited financial statements		
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		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	

c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 a and 4; Part IV, lines 1 b and 2b; Part V, line 4; Part X, line 2; Part XI,

4b

4c

TO SUPPORT THE MISSION AND PROGRAMS OF THE JUNIOR LEAGUE OF LUBBOCK.

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

b Other (Describe in Part XIII.)

PART X, LINE 2:

PART V, LINE 4:

THE ORGANIZATION HAS ADOPTED THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA.

THE PRIMARY TAX POSITION OF THE ORGANIZATION IS ITS FILING AS A TAX EXMEPT

ENTITY. THE ORGANIZATION DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT

THEIR TAX POSITIONS WOULD BE SUSTAINED UPON EXAMINATION BY THE INTERNAL

REVENUE SERVICE (IRS), OR OTHER STATE TAXING AUTHORITIES.

Schedule D	(Form	990)	2020

	(10111330) 2020		02 01 2022	 	
Part XIII	Supplemental Ir	nformation (continued)			

SCHEDULE G	Suppleme	ntal Informa	tion Regarding	g Fun	drais	ing or Gaming	Activ	rities	OMB No. 1545-0047	
(Form 990 or 990-EZ)		e organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or it organization entered more than \$15,000 on Form 990-EZ, line 6a.				or if the	2020			
Department of the Treasury Internal Revenue Service			Attach to Form 99	0 or Fo	rm 99	0-EZ.			Open to Public Inspection	
Name of the organization		to www.irs.gov	/Form990 for inst	ructior	is and	the latest informat		Employer id	entification number	
		LEAGUE O	F LUBBOCK	, IN	c.			75-118		
	complete this par		organization answ	vered "ነ	es" oi	n Form 990, Part IV,	line 17	'. Form 990-E	Z filers are not	
 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or 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. 										
(i) Name and addres or entity (fund		(ii) /	Activity	fùnd have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (or fu	mount paid retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization	
				Yes	No					
Total		•			. ►					
3 List all states in whi or licensing.	ich the organizatio	on is registered o	r licensed to solicit	contrik	outions	s or has been notified	d it is e	exempt from	registration	

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

			(a) Event #1 HOLIDAY HAPPENING	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
ę			(event type)	(event type)	(total number)	
	1	Gross receipts	. 84,524.			84,524
	2	Less: Contributions	. 37,077.			37,077
	3	Gross income (line 1 minus line 2)	47,447.			47,447
	4	Cash prizes				
	5	Noncash prizes				
50100	6	Rent/facility costs	33,648.			33,648
חוובתו באחבוואבא	7	Food and beverages	404.			404
ן נ	8 9	Entertainment				24,316
		Other direct expenses	24,510			
	10	Direct expense summary. Add lines 4 throu	Jah 9 in column (d)			58,368
	10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from	n line 3, column (d)		►	-10,921
_	10	Net income summary. Subtract line 10 from Gaming. Complete if the organizatio	n line 3, column (d)		►	-10,921
'a	10 11	Net income summary. Subtract line 10 from	n line 3, column (d) n answered "Yes" on Form	n 990, Part IV, line 19, or i	reported more than	-10,921
'a	10 11	Net income summary. Subtract line 10 from Gaming. Complete if the organizatio	n line 3, column (d)		►	-10,921 (d) Total gaming (add
a	10 11	Net income summary. Subtract line 10 from Gaming. Complete if the organizatio	n line 3, column (d) n answered "Yes" on Form	n 990, Part IV, line 19, or i	reported more than	-10,921 (d) Total gaming (add
a	10 11	Net income summary. Subtract line 10 from Gaming. Complete if the organizatio	n line 3, column (d) n answered "Yes" on Forn (a) Bingo	n 990, Part IV, line 19, or i	reported more than	-10,921 (d) Total gaming (add
	10 11	Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	n line 3, column (d) n answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or i	reported more than	-10,921 (d) Total gaming (add
	10 11 rt I	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue	n line 3, column (d)	n 990, Part IV, line 19, or i	reported more than	-10,921 (d) Total gaming (add
_	10 11 rt I 1 2	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	n line 3, column (d) n answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or i	reported more than	58,368 -10,921 (d) Total gaming (add col. (a) through col. (c
Pa	10 11 rt I 1 2	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes	n line 3, column (d) n answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or i	reported more than	-10,921 (d) Total gaming (add
	10 11 rt I 2 3 4 5	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	n line 3, column (d) n answered "Yes" on Forn (a) Bingo	h 990, Part IV, line 19, or n (b) Pull tabs/instant bingo/progressive bingo	reported more than (c) Other gaming	-10,921 (d) Total gaming (add
	10 11 rt I 2 3 4	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	(a) Bingo (a) Bingo (b) Bingo (b) Bingo (c) Bi	n 990, Part IV, line 19, or n (b) Pull tabs/instant bingo/progressive bingo	reported more than (c) Other gaming	-10,921 (d) Total gaming (add
Pa	10 11 rt I 2 3 4 5	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	n line 3, column (d) n answered "Yes" on Form (a) Bingo .	h 990, Part IV, line 19, or n (b) Pull tabs/instant bingo/progressive bingo	reported more than (c) Other gaming	-10,921 (d) Total gaming (add
	10 11 rt I 2 3 4 5 6	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	n line 3, column (d) in answered "Yes" on Form (a) Bingo .	<pre>b 990, Part IV, line 19, or of (b) Pull tabs/instant bingo/progressive bingo bingo/progressive bi</pre>	reported more than (c) Other gaming Yes% No	-10,921 (d) Total gaming (add
	10 11 rt I 2 3 4 5 6 7 8	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throught Net gaming income summary. Subtract line	n line 3, column (d) in answered "Yes" on Form (a) Bingo .	<pre>b 990, Part IV, line 19, or of (b) Pull tabs/instant bingo/progressive bingo bingo/progressive bi</pre>	reported more than (c) Other gaming Yes% No	-10,921 (d) Total gaming (add
	10 11 rt I 2 3 4 5 6 7 8 Ent	Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	(a) Bingo (a) Bingo (a) Bingo (b) Bingo (b) Bingo (c) Bi	h 990, Part IV, line 19, or n (b) Pull tabs/instant bingo/progressive bingo	reported more than (c) Other gaming	-10,921 (d) Total gaming (add col. (a) through col. (c

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

032082 11-25-20

Schedule G (Form 990 or 990-EZ) 2020

Sch	nedule G (Form 990 or 990-EZ) 2020 JUNIOR LEAGUE OF LUBBOCK, INC. 75-1	.181	735	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	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?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
a	a The organization's facility	13a		%
k	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🗆 '	Yes	└── No
k	b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount			
	of gaming revenue retained by the third party $ ho$ \$			
c	c If "Yes," enter name and address of the third party:			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	└── No
k	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	rt III, lir	nes 9,	9b, 10b,

75-1181735 Pag

i are i ouppionio	u)		

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.



JUNIOR LEAGUE OF LUBBOCK, INC. 7

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 2020-2021, 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:

NO REVIEW WAS OR WILL BE CONDUCTED.

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

ORGANIZATION'S OFFICE IN LUBBOCK, TEXAS AND ON THEIR WEBSITE

WWW.JLLUBBOCK.COM.

Name of the organization JUNIOR LEAGUE OF LUBBOCK, INC.	Employer identification number 75-1181735
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION WILL MAKE AVAILABLE TO THE PUBLIC THE O	RGANIZATIONS

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 INDEPENDENT

FINANCIAL STATEMENT AUDITOR. THIS PROCESS HAS NOT CHANGED FROM PRIOR

YEARS.

SCHI	EDULE R	

(Form 990)

5rm 990)

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.

OMB No. 1545-0047

2020 Open to Public Inspection

Employer identification number

75-1181735

Department of the Treasury Internal Revenue Service

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

Name of the organization

JUNIOR LEAGUE OF LUBBOCK, INC.

Part I

CONTON LEMECT OF LODDOCK, INC.

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

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(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	conti	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
JUNIOR LEAGUE OF LUBBOCK FOUNDATION -	PERMANENT ENDOWMENT FUNDS						
75-2831806, 4205 84TH STREET, LUBBOCK, TX	USED TO SUPPORT THE JUNIOR			509(A)(3)	JUNIOR LEAGUE OF		
79423	LEAGUE OF LUBBOCK	TEXAS	501(C)(3)	TYPE I	LUBBOCK	X	
	-						
	-						

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

Schedule R (Form 990) 2020

75-1181735 Page 2

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 organizations treated as a partnership 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	Predomir	(e) nant income unrelated, om tax under 5 512-514)	Share	(f) e of total come	Sha end-	(g) are of of-year sets	Disprop	h) ortionate tions?	(i) Code V-UE amount in b 20 of Sched	ox ^m	nanaging partner?	Perce	k) entaç ershi
		country)		sections	512-514)					Yes	No	K-1 (Form 10	65) Y	'es No		
	-															
	-															
	_															
	_															
	_															
													-	_		
	_															
IV Identification of Related C organizations treated as a c	Organizations Taxable a corporation or trust durin	as a Corpo ng the tax y	pration or Trust. Co year.	omplete if t	he organizat	ion ansv	vered "Yes	s" on Fo	rm 990, P	art IV,	line 34	4, because it h	ad on	ie or m	ore re	late
(a) Name, address, and	EIN	Drim	(b) ary activity	(c) Legal domicile	(d) Direct con		(e) Type of		(f) Share c			(g) Share of		h) entage	(Sec	i) ction
of related organizat	ion	1 1111	ary activity	(state or foreign country)	entity		(C corp, s or tru	S corp,	inco			end-of-year assets	owne	ership	conti ent	tity?
				country											Yes	
																F
													1		1	1

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
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	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		Х
				1
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
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 organization(s)	11		Х
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) JUNIOR LEAGE OF LUBBOCK FOUNDATION	С	32,855.	CASH
(2)			
(3)			
_(4)			
(5)			
_(6)			

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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.

(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile	(d) Predominant income	(e Are a partners 501 (c orgs) all s sec.	(f) Share of	(g) Share of		h) ropor- nate	(i) Code V-UBI	(j) General	(k) or Percentage
of entity		(state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	501(c orgs Yes)(3) :.? No	total income	end-of-year assets	alloca	tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner	or Percentage ? ownership o
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											\square	<u> </u>
											\vdash	+
								-			\vdash	+
					_						\vdash	+

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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.