Form 990. F. C.S.9.

Department of the Treasury Internal Revenue Source.

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

► Do not enter social security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on this form as it may be made public Social Security numbers on the social Security numbers of the securi

Open to Public Inspection

Inter		iue Service	GO to www.iis.gov/Poilits30 tot liisti detions and the late:				mspection			
<u>A</u> _	For the	2017 cale	ndar year, or tax year beginning June 01 , 2017, and end	ding		31	, 20 18			
В	Check if	applicable	C Name of organization Junior League of Mobile, Inc.				er identification number			
	Address	change	Doing business as				51447			
	Name ch	hange	Number and street (or P O box if mail is not delivered to street address)	/suite		E Telephone number				
	Initial ret	tum	57 N. Sage Avenue		(	251)4	171-3348			
	Final retu	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code							
	Amende		Mobile, AL 36607 T			Gross re				
	Applicat	ion pending	F Name and address of principal officer , President				subordinates? 🗌 Yes 🐰 No			
			57 N. Sage Ave, Mobile, AL 36607	<u>//</u> н			s included? Tyes No			
1	Tax-exe	mpt status	\[     \overline{\text{S01(c)(3)}}  \text{ 501(c) (}  ) \      \]     \( \text{(insert no )} \  \text{4947(a)(1) ot } \  \text{527} \\     \]	/	If "No,"	attach a	list (see instructions)			
J	Website	e: ► www.	juniorleaguemobile.org ,		I(c) Group ex	emption	number ►			
ĸ	Form of	organization		mation	1932	M State	of legal domicile AL			
Р	art I	Summ	ary							
	1	Briefly de	escribe the organization's mission or most significant activities: Org	aniz	ation c	f wor	men committed			
çe		to pro	moting volunteerism, developing the potential	of w	omen, a	nd ir	mproving			
Governance		commun	ities through the effective action and leaders	hip o	of trai	ned v	volunteers.			
Je II	2	Check th	as box ▶☐ if the organization discontinued its operations or dispose	d of m	ore than 2	5% of	its net assets.			
်	3	Number	of voting members of the governing body (Part VI, line 1a)			3	9			
•ర	4	Number	of independent voting members of the governing body (Part VI, line 1	b) .		4	9			
Activities &	5	Total nur	mber of individuals employed in calendar year 2017 (Part V, line 2a)			5	3			
₹	6	Total nur	nber of volunteers (estimate if necessary)			6	560			
Aci	7a	Total unr	elated business revenue from Part VIII, column (C), line 12			7a				
	b	Net unre	lated business taxable income from Form 990-T, line 34			7b				
					Prior Year		Current Year			
a	8	Contribu	tions and grants (Part VIII, line 1h)		181	,904	161,272			
Ž	9		The second of th		82	,696	53,210			
Revenue	10	_	ent income (Part VIII, column (A), lines 3,74 and 7,76) 7 435.	\	47	,564	56,519			
ď	11		venue (Part VIII, column (A), lines 5, 6d 8c 9c, 10c, and 11e)	\	206	,779	226,091			
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		518	,943	497,092			
_	13		nd similar amounts paid (Part IX, column (A), lines 1-3)1011	7	70	,459	76 <b>,</b> 380			
	14		paid to or for members (Part IX, column-(A), line 4)				0			
s	4-		other compensation, employee benefits (Part IX, column (A), lines 5–10)		104	,072	114,178			
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)			-	0			
ě	b		idraising expenses (Part IX, column (D), line 25) ▶	900		3.9	Mark Committee Cal			
ŭ	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)			,867	280,062			
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)			,398	470,620			
	19	-	eless expenses. Subtract line 18 from line 12			,545	26,472			
-				Begir	ning of Curre		End of Year			
Net Assets or	20	Total ass	sets (Part X, line 16)		1,663	,022	1,664,797			
Ass	21		pilities (Part X, line 26)			,475	157,778			
Š	22		ets or fund balances. Subtract line 21 from line 20		1,480		1,507,019			
_	art li		ture Block		· · · ·	·				
			ury, I declare that I have examined this return, including accompanying schedules and st	tatement	s, and to the	best of	my knowledge and belief, it is			
tr	ue, correc	ct, and comp	lete Declaration of preparer (other than officer) is based on all information of which prep	arer has	any knowled	ge				
_			MUARAUNKPAUNHU			Alos	2019			
Si	gn	Sigi	nature of afficer		Date	-1123	127.2			
	ere		10 Agan Barnett President							
		Typ	e or print name and title							
_			ype preparer's name Preparer's signature	Date,	, 1	Check	Y IF PTIN			
	aid	Stev	re Chiepalich S.W. Musaluck	8/8	/18		ployed P01277684			
	repare	E1		-/-			63-1110081			
U	se On			3660			51) 610-3792			
М	av the I		ss this return with the preparer shown above? (see instructions)				X Yes  No			
_			uction Act Notice, see the separate instructions.			-	Form <b>990</b> (2017)			
	upul						, ,			

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	The Junior League of Mobile is an organization of women committed to promoting volunteerism, developing the potential of women, and improving communities through
	the effective action and leadership of trained volunteers.
	Did the organization undertake any significant program services during the year which were not listed on the
2	
	, —————————————————————————————————————
2	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
	(0   ) (5   ) (7   ) (8   ) (8   ) (9   ) (9   ) (9   ) (9   )
4a	(Code ) (Expenses \$ 24,374 including grants of \$ ) (Revenue \$ 53,210)
	Jubilee Bargains - A large annual rummage sale that provides low-cost quality
	clothing and various household furnishings to many low-income families in and around
	the Mobile community.
4b	(Code:) (Expenses \$24,928 including grants of \$) (Revenue \$)
	Community Outreach - Community outreach is one of our ongoing program activities
	which provides funding for a wide variety of charitable community organizations
	and projects such as Leadership Mobile, Boys and Girls Club,
	Mobile County Public Schools, Youth Leadership Mobile, and many others.
	(Code: ) (Expenses \$ 200,805 including grants of \$ ) (Revenue \$ )
40	(Code: ) (Expenses \$ 200,805 including grants of \$ ) (Revenue \$ ) Focus Areas - Our current five year focus area is Healthy Children, which is
	subdivided into the following three categories:
	Hunger
	Nutrition
	Fitness
	This focus area provides volunteers and financial support for various projects which
	educate children about proper nourishment and maintaining appropriate levels of
	physical activity in order to maintain healthy lives.
	Collectively, we annually invest over \$250,000 and more than 30,000 volunteer hours
	into these and other community based programs which impact the lives of over 18,000
	men, women, and children.
Δd	Other program services (Describe in Schedule O.)
-74	(Expenses \$ including grants of \$ ) (Revenue \$ )
	Total program service expenses ► 250, 107
	250,107

Part IV Checklist of Required Schedules

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	-	Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or 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.			3- <b>3</b> * 4
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	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	_	<u>х</u>
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 (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		Х
		Form	990	(2017)

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21 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 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.  23 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 Schedule K. If "No," go to line 25a  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  C Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25b Und the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II  27b Did the organization a party to a business transaction with one of	Yes	No   X   X   X   X   X   X   X   X   X
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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 Schedule K. If "No," go to line 25a  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  25a If "Yes," complete Schedule L, Part I  25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV)  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV)  29 Did the organization at party to a business transaction with one of the following parties (see Schedule L, Part IV)		X
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Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X X X
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26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	**	Х
<ul> <li>Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III</li> <li>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):</li> <li>A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV</li> <li>28a</li> </ul>	**	Х
substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		<del></del>
entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		<del></del>
<ul> <li>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):</li> <li>a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV</li> <li>28a</li> </ul>		<del></del>
Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a	2, 1	16 36
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a	ÿ!	
		X
Schedule L, Part IV		Х
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct owner? 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	<del> </del>
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	_	х
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		
Part I		X
complete Schedule N, Part II		х
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		Х
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		Х
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b		Х
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		<u> </u>
related organization? If "Yes," complete Schedule R, Part V, line 2		х
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,  Part VI	į	,
Part VI		X
19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	х	1
<del>`</del>		(2017)

Form **990** (2017)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		<u>. 🗆</u>
4-	Following with a manufacture of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the second of the Day 2 of Forms 4000 Follow 0. We also all the Day 2 of Forms 4000 Follow 0. We also all the Day 2 of Forms 4000 Follow 0. We also all the Day 2 of Forms 4000 Follow 0. We also all the Day 2 of Follow 0. We also all the Day 2		Yes	No
1a L	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 20 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	┪		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	┥		l
C	reportable gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	<del> </del>	1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<del>                                     </del>	*
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in 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		Ì	1
	account)?	4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country. ▶		, ,	ŀ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	` `	` `	^.
<b>-</b> -	(FBAR)	<u>-</u>	L	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	├	X
b c	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?	5b 5c	├	<del></del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	130		X
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	ļ	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<del>"</del>	<del> </del>	<del>  ^</del>
	gifts were not tax deductible?	6ь	ļ	}
7	Organizations that may receive deductible contributions under section 170(c).	W 3 '		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Χ	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1		
	required to file Form 8282?	7c	-	X
d	If "Yes," indicate the number of Forms 8282 filed during the year		L L	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f	├	X
f ~	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	├	X
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u>	<del> </del>	X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<del></del>	· .	<u>^^</u>
	sponsoring organization have excess business holdings at any time during the year?	8	-	
9	Sponsoring organizations maintaining donor advised funds.			7
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4		l
11	Section 501(c)(12) organizations. Enter:	}		1
a b	Gross income from members or shareholders	4		ŀ
U	against amounts due or received from them.)	}		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	120		<del>                                     </del>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<b> </b>	
	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		]	1
	the organization is licensed to issue qualified health plans	1		1
С	Enter the amount of reserves on hand		L	L
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
h	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an evaluation in Schedule O	1446	. '	1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	struct	ions
Secti	on A. Governing Body and Management			
	,		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			2.3
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9	_	1	1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3_		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	L	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		X
6	Did the organization have members or stockholders?	6	X	<b>_</b>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7.0		(1) A
	the year by the following:			1
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		_X_
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Ž	2	
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	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X	
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		X
b	Other officers or key employees of the organization	15b		Х
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  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		x
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?	464		
Sacti	ion C. Disclosure	16b		L
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	າ 501(	c)(3)s	only)
	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	policy	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	<b>•</b>	
	Melissa Hughes, 57 North Sage Avenue, Mobile, AL 36607, (251) 471-3			

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# 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

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee
40	(D)				C) sition			<b>(D)</b>	<b>(</b>	
(A) Name and Title	(B) Average			neck	more	than o		(D) Reportable	(E) Reportable	(F) Estimated
	hours per					is both or/trust		compensation	compensation from	
	week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Meagan Barnett										
President	30	X		X						
(2) Lucy Pryor Slaton						ļ	-			
President-Elect	20	х		х						
(3) Rebecca Satterwhite										
Executive Vice-President	8	X		X						
(4) Krista Harrell	<u> </u>									
Recording Secretary	8	Х		Х						
(5) Amanda Gonzales										
Treasurer	8	Х		Х				<u> </u>		
(6) Sarah Bumgarner										
Public Relations Director	8	X		Х						
(7) Sabrina Alexander	<u> </u>			ĺ						
Planning Director	8	Х		Х						
(8) Renie Kennemer  Nominating Director	8	х		x						
(9) Alison Herlihy										
Governance Director	8	Х		Х			i			
(10)				i						
(11)			-							
(12)	<del> </del>									
(13)										
(14)										

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			ighes	t C	ompensated E	mployees (	continu	ed)		
	(A) Name and title	(B) Average hours per	Average box, unless person is be officer and a director/tri					an	(D)  Reportable compensation	(E) Reportable compensation from		Est am	(F) imated ount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M		comp fro orga and	other pensation om the inization related nization	n I
(15)														
(16)														
(17)											_			
(18)														
(19)					<u> </u>			_			-+			<del></del> -
(20)														
(21)					-			-			$\dashv$			
(22)					-		-							
(23)					-						-		<del></del>	
(24)														<del></del>
(25)												·		<del></del>
1b c	Sub-total		 n A	L · ·	<u> </u>		•	<b>&gt;</b>	0		0			0
d 2	Total (add lines 1b and 1c)  Total number of individuals (including bur reportable compensation from the organic	not limited	I to th				above	<u>►</u>	ho received me	<u> </u>	0 00,000	of		0
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc						emp	loyee, or high	est compe	nsated	3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations													
5	ndividual  Did any person listed on line 1a receive of for services rendered to the organization									 ation or ind	 Iividual			X
Section	on B. Independent Contractors					-	-		<del>Judin person</del>	· · · ·	<u>·</u>	5	l	<u> X</u>
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compens		
	N/A. None over \$100,0	00												
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

Part VIII Statement of Revenue

		Check if Schedule O	contains a resp	onse or note to	o any line in this			
			10 AV		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	s . <b>1a</b>			4776 333		
Grants nounts	b	Membership dues	. 1b	150,374				
s, G	С	Fundraising events .	1c					
Gifts, ilar Ar	d	Related organizations	s 1d					
s, C mil	е	Government grants (con			26.			
ion r Si	f	i i	1					
but		1	1 1f	10,898				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions include	ded in lines 1a-1f \$					
Contributions, and Other Sim	h	Total. Add lines 1a-1		<b>&gt;</b>	161,272			
				Business Code				
/en	2a	Jubilee Bargain	ns	448000	53,210	**************************************	1	
Re	ь							
J.Ce	С							
ē	d							
E	е			•				
Program Service Revenue	f	All other program ser	vice revenue	-				
Pro	g	Total. Add lines 2a-2		. ▶	53,210			
	3	Investment income	(including divide	ends, interest,		_		
		and other similar amo	ounts) .	<b>&gt;</b>	56,519			56,519
	4	Income from investmen	t of tax-exempt bo	nd proceeds ►				
	5	Royalties		. •				
		-	(i) Real	(ii) Personal	76.30 - 10. VA			
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental income or	(loss) .	•	0			
	7a	Gross amount from sales of	(i) Securities	(ii) Other			\$ 1984 A. C.	
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
	С	Gain or (loss) .	0	0				
	d	Net gain or (loss) .		. •	0			
41								
ğ	8a	Gross income from fu	undraising					
Š		events (not including \$						
Other Revenu		of contributions reporte	ed on line 1c).					100
Je.		See Part IV, line 18	а	358,201	A			
₹	b	Less direct expenses		148,712	Asan ti			X .
	C	Net income or (loss) f		events 🕨	209,489		Photogram 00000000 history methodol, militaria del professione	209,489
	9a	Gross income from ga	aming activities					
		See Part IV, line 19 .	··a					
	b	Less direct expenses					F174: 27	
	С	Net income or (loss) f		vities .	0	The transfer of the second states	Standard V (and Go'lland). Soloto en	Newson and that I have the action of the Control of
	10a	Gross sales of in						
		returns and allowance	_					
	b	Less cost of goods s						76 A. Parent, 72
	с	Net income or (loss) f			D 12 10 10 10 10 10 10 10 10 10 10 10 10 10		(2015年) * 年(1705年)	The second secon
		Miscellaneous R	revenue	Business Code				
	11a							
	b							
	C	A D - AL			15.500	16.600	<u> </u>	
	d	All other revenue		<u> </u>	16,602	16,602	100744001277861	Service and the service of the servi
	e	Total Add lines 11a-		🟲	16,602			
	12	Total revenue. See II	nstructions	<u> </u>	497,092	69,812		266,008

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must com-

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	III other organization	ns must complete co	lumn (A).
	Check if Schedule O contains a respon-	<del></del>			. 🗓
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	76,380	76,380		
2	Grants and other assistance to domestic individuals. See Part IV, line 22		<del></del>		,
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16			, S	
4 5	Benefits paid to or for members			*	\$
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages  Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	91,764	22,185	69,579	
9	Other employee benefits	14,073		14,073	
10_	Payroll taxes	8,341		8,341	<u></u>
11	Fees for services (non-employees):				
а	Management				
b	Legal		<del></del>		
C	Accounting	5,650	1,800	3,850	
d	Lobbying			21 0.000 100.000	<del></del>
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1 440		1 440	
42	Advertising and promotion	1,440 2,794	2 704	1,440	
12 13	Office expenses (includes postage).	13,128	2,794	13,128	
14	Information technology	13,126	<del></del>	13,120	
15	Royalties	<del></del>			<del></del>
16	Occupancy	56,175	8,147	48,028	
17	Travel	00/1/0	0,11	10,020	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	51,150	51,150		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	30,382		30,382	
23	Insurance	16,022	1,438	14,584	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Dues to national organization	50,460	50,460		
b	Security guard	10,018	2,868	7,150	
С	Bank charges	3,835	1,045	2,790	
d	Member education & development	15,438	15,438		
е	All other expenses Misc	23,570	16,402	7,168	
25	Total functional expenses. Add lines 1 through 24e	470,620	250,107	220,513	
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)				5 <b>990</b> (2017)

Form **990** (2017)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X . . (A) (B) Beginning of year End of year 682,872 717,129 1 Savings and temporary cash investments . . . . . . . 197,948 2 341,118 2 Pledges and grants receivable, net . . . 3 3 4,022 8,875 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 Notes and loans receivable, net . . . . . 7 7 Inventories for sale or use . . . . 8 9 6,566 2,627 Prepaid expenses and deferred charges . . . Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 602,791 Less: accumulated depreciation . . . . 10b 367,707 204,807 10c 235,084 b 11 532,550 394,221 11 12 Investments—other securities. See Part IV, line 11 ... 12 13 Investments—program-related See Part IV, line 11. 13 14 14 15 Other assets See Part IV, line 11 . . . . . . . . . 15 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . 16 1,664,797 16 1,663,022 7,000 17 17 Accounts payable and accrued expenses . . . . . . 18 18 155,451 175,475 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . 22 Secured mortgages and notes payable to unrelated third parties . . . 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 . . . 182,475 26 157,778 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ 💢 and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 1,507,019 27 1,480,547 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 Net Assets 31 Paid-in or capital surplus, or land, building, or equipment fund . . . . 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 Total net assets or fund balances . 1,480,547 33 1,507,019 1,663,022 1,664,797 Total liabilities and net assets/fund balances . . . . 34

Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u>	<u>.</u>		. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		497	,092
2	Total expenses (must equal Part IX, column (A), line 25)	2		470	, 620
3	Revenue less expenses. Subtract line 2 from line 1	3		26	,472
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,	480	,547
5	Net unrealized gains (losses) on investments	5			
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 in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1,	507	,019
Par	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990:   Cash   Accrual   Other		"	, ~	30°7
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			grander.
	Schedule O.				22.
2a	and the state of t		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled or		* 7.	
	reviewed on a separate basis, consolidated basis, or both:		1.04	, `	1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			نديلا	<i>ii</i>
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a	1		2 14
	separate basis, consolidated basis, or both:				3,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			2	S'
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the guidate review or committee that assumes responsibility for over the guidate review of the fire residual attendance and calculation of the guidate review of the fire residual attendance and calculation of the guidate review of the fire residual attendance and calculation of the guidate review of the guidate re				
	of the audit, review, or compilation of its financial statements and selection of an independent account to the compilation of its financial statements.		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain in		l. Sec.	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in		i e i i i i i i i i i i i i i i i i i i	
	the Single Audit Act and OMB Circular A-133?		3a		Х
b		rgo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			Forr	n <b>990</b>	(2017

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

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

**Open to Public** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection **Employer identification number** 

Juni	Lor	League of Mobile, In					63-0461447		
Par	t I	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instruction	ns.	
The c	orga	nization is not a private founda	tion because it is	s: (For lines 1 through	12, ched	ck only or	ne box.)	- A	
1		A church, convention of churc	hes, or association	on of churches descri	bed in se	ection 17	0(b)(1)(A)(i).		
2									
3		A hospital or a cooperative hos		•			• • • • •		
4		A medical research organization						(iii) Enter the	
4	ш	hospital's name, city, and state		onjunction with a nost	niai uesc	ilibed ili s	section 170(b)(1)(A)	(iii). Einer the	
_	_			· <del></del>					
5	Ц	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described	ın
6		A federal, state, or local govern							
7		An organization that normally	receives a subs	tantial part of its sup	port from	a gover	nmental unit or from	the general pub	olic
		described in section 170(b)(1)	(A)(vi). (Complet	e Part II.)					
8		A community trust described in	n section 170(b)	(1) A)(vi). (Complete I	Part II )				
9		An agricultural research organ				orotod in	conjugation with a l	and arout called	
		or university or a non-land-gra university.	nt college of agr	culture (see instructio	ons). Ente	er the nan	ne, city, and state of	the college or	
10	X	An organization that normally receipts from activities related support from gross investment	to its exempt full t income and uni	nctions—subject to co related business taxal	ertain exc ble incom	ceptions, ne (less s	and (2) no more tha ection 511 tax) from	n 331/3% of its	
44		acquired by the organization a							
11		An organization organized and	•		•		` '\ '		
12	Ш	An organization organized and							
		of one or more publicly support	orted organization	ns described in <b>secti</b>	on 509(a	1)(1) or se	ection 509(a)(2). Se	e section 509(a)(	3).
		Check the box in lines 12a thro				-	•		_
а		☐ Type I. A supporting organ							g
		the supported organization	(s) the power to	regularly appoint or e	lect a ma	jority of t	he directors or trust	ees of the	
		supporting organization. Y	ou must comple	ete Part IV, Sections	A and B				
b		☐ Type II. A supporting orga	nization supervis	ed or controlled in co	nnection	with its s	supported organizati	on(s) by having	
_		control or management of							d
		organization(s). You must				, p 0, 00 , 10	that control of man	ago ino oapporto	•
_		☐ Type III functionally integ				onnoctic	n with and function	ally intograted with	<b>L</b>
С		its supported organization						any integrated with	н,
d		☐ Type III non-functionally		•		•	• •	nted organization	۱/۵۱
u		that is not functionally integ							
		requirement (see instruction						u an attentivenes	.5
			•	•		-			
е		☐ Check this box if the organ						e II, Type III	
		functionally integrated, or	• •	tionally integrated sur	oporting	organizat	ion.		
f		inter the number of supported o							
g	P	Provide the following information	n about the supp	orted organization(s).					
	(1)	Name of supported organization	(li) EIN	(III) Type of organization		organization	(v) Amount of monetary	(vi) Amount of	_
				(described on lines 1-10		ur governing	support (see	other support (see	
				above (see instructions))	aocu	ment?	instructions)	instructions)	
					Yes	No	1		
					103	-			—
(A)									
(B)									
(C)									_
(υ)									
/D\									_
(D)									
(E)						1			
Tota						-			—

Pa	Support Schedule for Organiz	ations Desc	ribed in Sec	tions 170(b)(	1)(A)(iv) and	170/b//1/A/	Page /
	(Combiere only it you checked t	the box on lin	e 5. / or 8 o	f Part I or if th	na organizatio	n failed to m.	n) Jalify under
<u> </u>	rarrin. If the organization rails (	o qualify und	er the tests li	sted below, p	lease compl	ete Part III.)	idiny direct
	uon A. Public Support		· · · · · · · · · · · · · · · · · · ·				<del>/·</del>
Cale 1	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
,	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					/	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3.						· · · · · · · · · · · · · · · · · · ·
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	, ,			*	\$	
6	Public support. Subtract line 5 from line 4	~	· · · · · · · · · · · · · · · · · · ·	<i>y</i>	· ·	·	
	ion B. Total Support	<u> </u>	<u>L</u>	* ·	**		
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 201,4	(c) 2015	(d) 2016	(0) 2047	(n <del> </del>
7	Amounts from line 4		/	(0) 2010	(u) 2010	(e) 2017	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on		/				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the	e organization	's first second		or fifth tax ve	12	501(c)(2)
	and stop net	re					. <b>&gt;</b> ¬
	on or computation of Fublic Suppor	t Percentage	•				
14 15 16a	Public support percentage for 2017 (line 6) Public support percentage from 2016 Sch 331/3% support test—2017. If the organization qual	redule A, Part II	l, line 14 .		[	14   15   /3% or more, o	% check this
b	331/3% support test—2016. If the organization of this box and stop here. The organization of the state of the	zation did not d	'hock a hav ar	Llina 12 az 16-		001 01	
17a	10% or more, and if the organization me Part VI how the organization meets the "forganization	17. If the organets the "facts-afacts-and-circu	nization did no and-circumsta mstances" tes	ot check a box nces" test, che t The organiza	on line 13, 16 eck this box ar ation qualifies	a, or 16b, and nd <b>stop here</b> . I as a publicly s	line 14 is Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part VI how the organization m supported organization	16. If the organ tion meets the eets the "facts	nization did no facts-and-ci and-circumst	t check a box rcumstances" ances" test. Ti	on line 13, 16 test, check th he organization	a, 16b, or 17a iis box and st n qualifies as a	op here. a publicly
18	Private foundation. If the organization did instructions	not check a b	ox on line 13 ·	16a 16h 17a .	or 17b, check	this box and se	► □ ee . ► □
					Sche	dule A (Form 990 c	=

### 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants.")	269,646	263,822	258,539	195,690	181,213	1,168,910
2	Gross receipts from admissions, merchandise sold or services performed, or facilities	}	j	Ì	j		
	furnished in any activity that is related to the	]	]		]		
	organization's tax-exempt purpose .	405,570	404,822	440,669	404,545	411,411	2,067,017
3	Gross receipts from activities that are not an	<b>,</b>					
	unrelated trade or business under section 513						
4	Tax revenues levied for the				ļ		
	organization's benefit and either paid to or expended on its behalf	}					
_	•	<del></del>					<del></del>
5	The value of services or facilities furnished by a governmental unit to the	Į į		ļ	į		
	organization without charge	1		1			1
6	Total. Add lines 1 through 5	675,216	668,644	699,208	600,235	592 624	3,235,927
	Amounts included on lines 1, 2, and 3	0.3/210	- 000/014	033,200	000,233	332,024	3,233,321
	received from disqualified persons .	{			j		1
b	Amounts included on lines 2 and 3					<del></del>	
	received from other than disqualified	<u> </u>					
	persons that exceed the greater of \$5,000				l		
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						1
	line 6 )						3,235,927
	on B. Total Support	1			<del></del> -		
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	675,216	668,644	699,208	600,235	592,624	3,235,927
10a	Gross income from interest, dividends, payments received on securities loans, rents,			Ì	l		
	royalties, and income from similar sources	50,231	(11,947)	(6,612)	48,944	56 217	126 022
<b>.</b>	Unrelated business taxable income (less	30,231	(11, 54/)	(0,012)	40,944	56,217	136,833
D	section 511 taxes) from businesses	]					
	acquired after June 30, 1975						
c	Add lines 10a and 10b	50,231	(11,947)	(6,612)	48,944	56,217	136,833
11	Net income from unrelated business	33,232	(11/51/	(0/012)	10/511	30/21/	130,033
• •	activities not included in line 10b, whether				ļ		
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets	]			]		
	(Explain in Part VI.)	(2,821)	(2,341)	3,302	2,102	(3,037)	(2,795)
13	Total support. (Add lines 9, 10c, 11,	)					
	and 12.)	L		<del></del> .	l	<del></del>	3,369,965
14		ne organization	's tirst, second		-		
	First five years. If the Form 990 is for the	-					
Socti	organization, check this box and stop he	re	<u> </u>			· · · · ·	
	organization, check this box and stop he on C. Computation of Public Suppo	re rt Percentage	•			<del></del>	
15	organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2017 (line	rt Percentage 8, column (f) div	e vided by line 1	3, column (f))		15	96.02%
15 16	organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2017 (line Public support percentage from 2016 Sc	rt Percentage 8, column (f) div hedule A, Part I	oided by line 1: II, line 15 .			<del></del>	
15 16	organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2017 (line Public support percentage from 2016 Scon D. Computation of Investment In	rt Percentage 8, column (f) div hedule A, Part I come Percer	vided by line 13 II, line 15 . ntage	3, column (f))		15	96.02% 96.57%
15 16 Secti	organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2017 (line Public support percentage from 2016 Sc	rt Percentage 8, column (f) dis hedule A, Part I come Percer (line 10c, colum	vided by line 1: II, line 15 . ntage in (f) divided by	3, column (f))	nn (f))	15	96.02%
15 16 Secti 17	organization, check this box and stop he on C. Computation of Public Support Public Support percentage for 2017 (line Public support percentage from 2016 Scon D. Computation of Investment Interventment income percentage for 2017)	rt Percentago 8, column (f) div hedule A, Part I come Percer (line 10c, colum 6 Schedule A, F	vided by line 1 II, line 15 ntage in (f) divided by Part III, line 17	3, column (f))	nn (f))	15 16 17 18	96.02% 96.57% 4% 4%
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15 16 Secti 17 18	organization, check this box and stop he on C. Computation of Public Support Public Support percentage for 2017 (line Public support percentage from 2016 Scon D. Computation of Investment In Investment income percentage from 2017 Investment income percentage from 2017 Investment income percentage from 2017 331/3% support tests—2017. If the organ 17 is not more than 331/3%, check this box 331/3% support tests—2016. If the organic	rt Percentage 8, column (f) dividedule A, Part I come Percer (line 10c, column 6 Schedule A, F aization did not and stop here. zation did not cl	vided by line 13 II, line 15 ntage In (f) divided by Part III, line 17 check the box The organizationeck a box on line	y line 13, column (f)) y line 13, colum on line 14, and on qualifies as a line 14 or line 1	nn (f))  Id line 15 is many publicly suppo	15 16 17 18 ore than 331/39 orted organizati is more than 3	96.02 % 96.57 % 4 % 4 % 6, and line on . ► ⊠ 33¹/3%, and
15 16 Secti 17 18 19a	organization, check this box and stop he on C. Computation of Public Support Public Support percentage for 2017 (line Public support percentage from 2016 Scon D. Computation of Investment In Investment income percentage for 2017 Investment income percentage from 201 331/3% support tests—2017. If the organ 17 is not more than 331/3%, check this box	rt Percentage 8, column (f) divided A, Part I come Percer (line 10c, column 6 Schedule A, F nization did not and stop here. zation did not cl box and stop here	vided by line 13 II, line 15 Intage In (f) divided by Part III, line 17 check the box The organization heck a box on lete. The organi	3, column (f))  y line 13, colum  on line 14, and an qualifies as a line 14 or line 1 zation qualifies	nn (f))	15 16 17 18 ore than 331/39 orted organizati is more than 3 upported organizati	96.02% 96.57% 4% 4% 6, and line on . ► ⊠ 13¹/3%, and ization ► □

#### Part IV Supporting Organizations

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

Sec	tion	A.	All	Supp	ortir	na C	)rganiz	ations

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

		Yes	No
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Part.	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	<u></u>	
b	A family member of a person described in (a) above?	11b	}	
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations	1	<u> </u>	L
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		} ,	, ».
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,		<b> </b> *.	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		*. ·	/A 4
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	<u> </u>	ثُدُسك
2	Did the organization operate for the benefit of any supported organization other than the supported	-	٧	PM 3
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	* .	N.	* 1
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	, , , , , , ,	£ 3	
	supervised, or controlled the supporting organization	2	<del></del>	A
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1	% X	
	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)			
Secti	on D. All Type III Supporting Organizations		L	
	on primity point outporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		N. 12	1 3
	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		X 4	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2	. **	W 3
J	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	* 3		
	supported organizations played in this regard.	3		3
Secti	ion E. Type III Functionally Integrated Supporting Organizations	<del></del>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	 s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			•
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1	l	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) 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.		<b> </b>	
_	-	2b	<u></u>	
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		<u> </u>

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	an	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section 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		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):	.,		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		<del></del>
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5	<u> </u>	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	Ť	// <sub>2</sub>	
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall	y in	tegrated Type III supporting	organization (see
instructions)			, ,,

Part	V Type III Non-Functionally Integrated 509(a)(	3) Supporting Organ	izations (continued)	raye i
Sect	ion D - Distributions	<u> </u>	(00.7.117.000)	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		- Currone rour
2	Amounts paid to perform activity that directly furthers ex		orted	
	organizations, in excess of income from activity	, , , , , , , , , , , , , , , , , , , ,		
3	Administrative expenses paid to accomplish exempt pur	oses of supported orga	anizations	
4	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	th the organization is re	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
	5 (1)		Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<b>₫</b> .5.	
2	Underdistributions, if any, for years prior to 2017			*
	(reasonable cause required—explain in Part VI). See			4 .
	instructions	<u> </u>	* * * * * * * * * * * * * * * * * * * *	` , ``\
3	Excess distributions carryover, if any, to 2017	<u> </u>		
<u>a</u>		, 70e A		·
b	From 2013		*: **	
<u> </u>	From 2014	3.3	4 1: 2	<u> </u>
d	From 2015			
<u>e</u> f	From 2016			
	Total of lines 3a through e			
<u>g</u> h	Applied to underdistributions of prior years  Applied to 2017 distributable amount		· (	
<u>''</u>	Carryover from 2012 not applied (see instructions)		1 % ## # <b>%</b>	7 2000
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from	<u> </u>		
•	Section D, line 7:			
a	Applied to underdistributions of prior years		27 3 24	<u> </u>
b	Applied to 2017 distributable amount	* * * * * * * * * * * * * * * * * * * *	3 17 ***	<u> </u>
С	Remainder. Subtract lines 4a and 4b from 4.	<u> </u>	*	
5	Remaining underdistributions for years prior to 2017, if		, , , , , , , , , , , , , , , , , , ,	*
-	any. Subtract lines 3g and 4a from line 2. For result			<b>!</b> !
	greater than zero, explain in Part VI. See instructions.		o	!
6	Remaining underdistributions for 2017 Subtract lines 3h			i i
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			0
7	Excess distributions carryover to 2018. Add lines 3j			<u></u>
	and 4c.	0		
8	Breakdown of line 7:			
а	Excess from 2013			<u> </u>
b	Excess from 2014			. <del></del>
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			1
			Cabadula	(Form 990 or 990 E7) 2047

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)
Part II	I, Line 12 - Various small, inconsequential receipts
•••••	
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# SCHEDULE D (Form 990).

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Junior League of Mobile, Inc. 63-0461447 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 . . . . . . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 . . . . . . . . . . . . 

Part	Organizations Maintaining	Collections of	Art, Historica	l Treasures	, or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and otl	ner records, ch	eck any of th	ne follov	ving that are a	significant use of its
а	☐ Public exhibition		d 🗌 Lo	an or exchan	ge prog	rams	
b	Scholarly research						
C	☐ Preservation for future generations	<b>;</b>					
4	Provide a description of the organizat XIII.		and explain how	v they further	the org	janization's exe	empt purpose in Part
5	During the year, did the organization	solicit or receive	donations of a	t, historical t	reasure	s, or other simi	lar
	assets to be sold to raise funds rather	than to be mainta	ined as part of	the organizat	ion's co	llection? .	☐ Yes ☐ No
Part	IV Escrow and Custodial Arra	ngements.					
	Complete if the organization 990, Part X, line 21.						
1a						other assets r	not 🗌 Yes 🗎 No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following	g table:	_	<del></del>	Amount
_	Designing belones				4-		
C	Beginning balance				10	<del></del>	<del></del>
d	Additions during the year				1d		<del></del>
e	Distributions during the year				1e		
f	Ending balance						NO CI Van CI Na
2a	=						
Par	If "Yes," explain the arrangement in Pa	an Am. Check here	e ii the explana	tion has been	provide	ed on Part Alli	<u> </u>
Fai	Complete if the organization	answered "Ves"	on Form 000	Port IV lin	0.10		
	Complete if the organization	(a) Current year	(b) Prior year	(c) Two year		(d) Three years ba	ck (e) Four years back
4.	Paginning of year halance				II Dack	(u) Tillee years ba	CK (E) TOUT YEARS DACK
1a	Beginning of year balance	552,550 1,540	502,59 2,38				<del> </del>
b	Net investment earnings, gains, and	1,540	2,30	-			
С	losses	63 000	E2 7	, (			
د.	ì	63,080	53 <b>,</b> 73	90		<del></del> _	
d	Grants or scholarships Other expenditures for facilities and						<del></del>
е	programs		-				
f	Administrative expenses	6,561	6,1				
g	End of year balance	610,609					
2	Provide the estimated percentage of t	<del>-</del>		1g, column (a	a)) held a	as:	
<b>a</b>	Board designated or quasi-endowmer	nt ▶ 100	<u>~</u>				
b	Permanent endowment >						
С	Temporarily restricted endowment	<u> </u>					
•	The percentages on lines 2a, 2b, and			4h-4 h-13			.h
3a	Are there endowment funds not in the organization by:	e possession of th	e organization	that are neid	and ad	ministered for t	
	•						Yes No
	(i) unrelated organizations						3a(i) X
	• •						3a(ii) X
ь	If "Yes" on line 3a(ii), are the related of				· · ·		. 3b
4_	Describe in Part XIII the intended uses		n's endowmer	t funds.			
Pari							
	Complete if the organization						
	Description of property	(a) Cost or oth		st or other basis (other)		Accumulated epreciation	(d) Book value
1a	Land	.					
b	Buildings	·		506,820		282,605	224,215
С	Leasehold improvements						
d	Equipment			95,971		85,102	10,869
е	Other						
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	00, Part X, colu	mn (B), line 1	0c.) .		235,084

Part VII	. Investments—Other Securities.	rm 000 Port IV lin	oo 11h, Soo Form 000, Bort V, line 13		
	Complete if the organization answered "Yes" on Fo				
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value		
(1) Financial	derivatives				
(2) Closely-h	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Column (	b) must equal Form 990, Part X, col (B) line 12 ) ▶				
Part VIII	Investments—Program Related.	<del></del>			
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, lin	ne 11c. See Form 990, Part X, line 13		
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value		
(1)			oost of cita-of-year market value		
(2)					
(3)					
(4)	· · · · · · · · · · · · · · · · · · ·				
(5)					
(6)					
(7)	······································		<del></del>		
(8)	<del></del>	<del></del>	<del> </del>		
(9)		<del> </del>	<del> </del>		
Total (Column)	(b) must equal Form 990, Part X, col (B) line 13 ) ▶				
Part IX	Other Assets.	<del></del>			
Turtix	Complete if the organization answered "Yes" on Fo	rm 990 Part IV lin	ne 11d. See Form 990. Part X. line 15		
	(a) Description	min ood, r die rv, in	(b) Book value		
(1)					
(2)			<del></del>		
(3)					
	<del></del>	··· <del>·</del>	<del></del>		
(4)		·····			
(5)					
(6)		<del></del>			
(7)					
(8)		<del>-</del>			
(9)	mn (b) must equal Form 990, Part X, col. (B) line 15.)				
Part X	Other Liabilities.	• • • • • • •	· · · · · · · · · · · · · · · · · · ·		
raitA	Complete if the organization answered "Yes" on Fo	orm 000 Bort IV lin	on 110 or 11f Son Form 000 Port V		
	line 25.	лті 990, ган іV, іпі	ie Tie of Til. See Form 990, Fait A,		
1.	<del></del>	<del></del>			
(1) Federal II					
(2)	· · · · · · · · · · · · · · · · · · ·				
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col. (B) line 25.) ▶				
	r uncertain tax positions. In Part XIII, provide the text of the foot				
organization'	s liability for uncertain tax positions under FIN 48 (ASC 740). Ch	eck here if the text of t	the footnote has been provided in Part XIII		

Part	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990,		•	Return.	
1	Total revenue, gains, and other support per audited financial statements			1	645,804
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities			1 1	
C	Recoveries of prior year grants			1	
d	Other (Describe in Part XIII.)		148,712	1 (	
e	Add lines 2a through 2d			2e	148,712
3	Subtract line 2e from line 1			3	497,092
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		<u> </u>	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b		1	
С	Add lines 4a and 4b			4c	C
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12) .		5	497,092
Part	XII Reconciliation of Expenses per Audited Financial Staten			r Return.	
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	619,332
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			<b>(</b> ,*-	
——с–	Other losses			L	
d	Other (Describe in Part XIII.)		148,712	2.4	
е	Add lines 2a through 2d			2e	148,712
3	Subtract line 2e from line 1			3	470,620
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		7.25	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b		No.	
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin XIII Supplemental Information.	ne 18.) .	<u> </u>	5	470,620
Part	t XI, Innes 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, Line 2d - Fund raising expenses per Form 990,  XII, Line 2d - Fund raising expenses per Form 990	, Part	VIII, Line 8	b.	
Part	V, Item 4 - The earnings on the Endowment Fund as	reach	es a level wh		
	significant program subsidies can be	susta	ined.		
				·	·
				·	
			·		

Schedule D (For	Supplemental Information (continued)	Page \$
ast Aiii	- Supplemental Information (continued)	
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#### SCHEDULE G (Form 990 or 990-EZ)

#### Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for the latest instructions. **Employer Identification number** Name of the organization 63-0461447 Junior League of Mobile, Inc. Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants Mail solicitations □ Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events In-person solicitations 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? ☐ Yes ☐ No 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 (v) Amount paid to (or retained by) (ili) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (Iv) Gross receipts (ii) Activity custody or control of contributions? (or retained by) organization or entity (fundraiser) from activity fundraiser listed in col (I) Yee No 6 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II

		gross receipts greater tha	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Christ Jubilee Shopping (event type)	Jubilee Bargains Shopping (event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	358,201			411,41
8	•	l anni Contributions				
	2 3	Less Contributions Gross income (line 1 minus				
		line 2)	358,201	53,210		411,41
	4	Cash prizes				
	5	Noncash prizes				
sesus	6	Rent/facility costs	41,955	8,147		50,10
Direct Expenses	7	Food and beverages	24,295	464		24,75
Direc	8	Entertainment				
	9	Other direct expenses	82,462	15,763		98,22
Pa	10 11	Direct expense summary. Ad Net income summary. Subtra Gaming. Complete if the	act line 10 from line 3, c	column (d)	. <u>.</u> <u>.</u> •	173,080 238,325 reported more
		than \$15,000 on Form 9	90-EZ, line 6a.	· · · · · · · · · · · · · · · · · · ·		_ <del></del>
ane.			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue						
۳_	1	Gross revenue		<u> </u>		
ses	2	Cash prizes				
ect Expenses	3	Noncash prizes .				
Direct	4	Rent/facility costs .				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes%	☐ Yes% ☐ No	
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from li	ine 1, column (d)		
	a Is	nter the state(s) in which the or the organization licensed to co "No," explain	onduct gaming activities			🗌 Yes 🗌 No

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more

Scriedu	ie G (Form 350 or 350-EZ) 2017		Р	age 3
11 . 12	Does the organization conduct gaming activities with nonmembers?	☐ Y		
13	Indicate the percentage of gaming activity conducted in:		33 L	140
а	The organization's facility			%
b	An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ►		<b></b>	
	Address►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	□ Y <sub>6</sub>	es 🗆	Nο
	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
	Name ►			
	Address►			
16	Gaming manager information:			
	Name ▶		•••••	
	Gaming manager compensation ► \$			
	Description of services provided ►			
	□ Director/officer □ Employee □ Independent contractor			
17 a	Mandatory distributions Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	☐ Ye	es 🗌	No
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 ▶ \$			
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) a Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional informations.	nd (v); matior	and 1	
•••••				
		•••••		
	······································		· <b></b>	

SCHEDULEI (Form 990)

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

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

OMB No 1545-0047	2017	Open to Public
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► Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury		► Go to w	to www.irs.gov/Form990 for the latest information.	0 for the latest info	ormation.		Inspection
Name of the organization						Emplo	Employer identification number
Junior League of Mobile, Inc.	, Inc.			İ		163-04	63-046144/
General Information on Grants and Assistance	on Grants and	Assistance					
Does	tain records to sub	stantiate the amou	int of the grants or	assistance, the gr	rantees' eligibility	for the grants or assistand	(
the selection criteria used to award the grants or assistance?	o award the grants	or assistance?					· · XYes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	inization's procedur	res for monitoring	the use of grant fur	ds in the United	States.		
	Assistance to Do	mestic Organiz	ations and Dom	estic Governm	ents. Complete	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form	wered "Yes" on Form
1 (a) Name and address of organization (b) EN (c) IRC section (b) EN (c) IRC section	, for any recipient (b) EIN		(d) Amount of cash	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant
or government		(if applicable)	grant	casn assistance	other)	וופווסמסון מססוסומו	
(1) Bay Area Food Bank	. 63-0821977	501(c)3	20,807				Food Bank
(2) Mobile United 8 St. Joseph St. Mobile, P	AL 63-0648144	501(c)3	3,962				Youth leadership prog
3) Ashland Pl. United Meth.	Church 46-5616361	501(0)3	6.000				Family food drives
(4) Misteria Ave., Mobile, Au							
(5)							
(9)							
(I)							
(8)							
(6)							
(10)							
(11)							
101							

Schedule I (Form 990) (2017)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

Schedule I (Form 990) (2017) (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Our community service volunteers perform field investigations to ensure that our grants are used for their (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant intended purposes and not improperly diverted to other uses Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2017) Part IV Part III က Ŋ 9

# SCHEDULE M (Form 990).

### **Noncash Contributions**

OMB No 1545-0047

2017

Open to Public

Department of the Treasury Internal Revenue Service ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Inspection Employer identification number

Name of the organization Junior League of Mobile, Inc. 63-0461447 Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g Art-Works of art . 2 Art—Historical treasures 3 Art—Fractional interests . Books and publications . Clothing and household goods . . . . . . . . See page 2. Selling price Cars and other vehicles 7 Boats and planes . . . . Intellectual property . . . 9 Securities—Publicly traded 10 Securities-Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities-Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . . . Qualified conservation contribution-Other . . 15 Real estate—Residential . Real estate—Commercial . . 16 17 Real estate—Other . . 18 Collectibles . . Food inventory . . . . 19 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . . . 23 Scientific specimens . 24 Archeological artifacts . . . 25 Other ► ( Other ► (\_\_\_\_) 26 27 Other ► (\_\_\_\_\_) 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a Х b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . . . . . 32a Х b If "Yes," describe in Part II.

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information
Revenue recognition for contributed clothing is based on actual resale value.
Noncash contributions of clothing, household and other items are received by Jubilee
Bargains and our Christmas Jubilee fundraiser immediately prior to when
these events are held (March for Jubilee Bargains and November for Christmas
Jubilee). Since the holding period for all noncash contributions is very
short and no inventory of these items exists at year end, they are recorded at the time
of sale. The revenue from the Jubilee Bargains donations is included in Part VIII,
Line 2a and the revenue from the Christmas Jubilee donations is included in Part VIII,
Line 8a.

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-₺

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

2017

**Employer Identification number** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Junior League of	Mobile, Inc.	63-0461447
Part VI, Line 12c	- The conflict of interest policy	is monitored and enforced by
	management through close oversic	ght of, and frequent interaction
	with, employees and Board member	rs. Also, periodic written
	certificates are required.	
Part VI, Line 19	- The organization is not required	to, and does not, make its
	governing documents or conflict of	of interest policy available to the
	public. Its form 990, however, i	is prepared from its annual audited
	financial statements and, as much	n, its annual financial statements
	are available to the public throw	ugh review of its annual tax return.
Part VI, Sec B, L	ine 11 - The form 990 is reviewed i	in detail by the Treasurer or Vice
	President of Finance befor	re filing. The form 990 is signed
	by the Treasurer, Vice-Pre	esident of Finance or the President.
	It is subsequently circula	ating during the Board meeting and
	discussed on a cursory bas	sis with the Board by the
	organization's auditor.	
	***************************************	
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Schedule O (Form 990 or 990-EZ) (2017)	Page 4
Name of the organization	Employer Identification number
Junior League of Mobile, Inc.	63-0461447
	•••••••••••••••••••••••••••••••••••••••
	•••••••••••••••••••••••••••••••••••••••
,	•••••