## \*\* PUBLIC DISCLOSURE COPY \*\*

# 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.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For the	e 2020 calendar year, or tax year beginning JUL I, ZUZU	and	وا ending	UN 30, 2021	<u>L</u>		
В	Check if applicabl	C Name of organization			D Employer identif	ication number		
	Addre chang							
	Name chang	Doing business as			59-06939	993		
	Initial return Final return	97 COLUMBIA DD		Room/suite	E Telephone number (813)254			
	termin ated	City or town, state or province, country, and ZIP or foreign postal c	ode		G Gross receipts \$	1,128,217.		
	Amen	IAMPA, Ph 55000			H(a) Is this a group	return		
	Applic tion pendi	F Name and address of principal officer: TATHOR CONES				s? Yes X No		
		SAME AS C ABOVE			H(b) Are all subordinates			
			947(a)(1) c	or 527	1,	a list. See instructions		
		te: ► WWW.JLTAMPA.ORG  forganization: X Corporation Trust Association Other		1	H(c) Group exemption			
	art I	forganization: X Corporation Trust Association Other Summary		L Year	of formation: 1920	M State of legal domicile: FL		
	T	Briefly describe the organization's mission or most significant activities:	PROMO	TING	VOLUMBARTSM	ſ		
Activities & Governance	'	DEVELOPING THE POTENTIAL OF WOMEN &	TMPR	OVING	COMMUNITIES	· ·		
nar	2	Check this box if the organization discontinued its operations						
Š	3				3	1 4 4		
Ğ	4	Number of independent voting members of the governing body (Part VI,						
es &	5	Total number of individuals employed in calendar year 2020 (Part V, line				3		
Ϋ́	6	Total number of volunteers (estimate if necessary)			6	1832		
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a			
_		Net unrelated business taxable income from Form 990-T, Part I, line 11			7b	0.		
			)		Prior Year	Current Year		
ne	8	Contributions and grants (Part VIII, line 1h)			756,449.			
Revenue	9	Program service revenue (Part VIII, line 2g)			10 521			
Be	10				19,521. 322,015.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,097,985				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), I Grants and similar amounts paid (Part IX, column (A), Iines 1-3)			44,409.			
		Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.		
w		Salaries, other compensation, employee benefits (Part IX, column (A), line			137,999.	1		
Expenses	16a				0.			
e d	b	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)	19,2	50.				
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			743,059.	575,328.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			925,467.			
	19	Revenue less expenses. Subtract line 18 from line 12			172,518.	340,237.		
Net Assets or	3			Ве	ginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)			2,748,377.			
A As	21	Total liabilities (Part X, line 26)			437,817.			
		Net assets or fund balances. Subtract line 21 from line 20			2,310,560.	2,650,797.		
	art II	Signature Block				arriva arrivada a anad haliaf ikia		
		alties of perjury, I declare that I have examined this return, including accompanying ort, and complete. Declaration of preparer (other than officer) is based on all informa			•	ny knowleage and belief, it is		
uut	5, 001160	is, and complete. Declaration of preparer (other than officer) is based on an information.	ation of wi	iicii preparei	lias ally kilowieuge.			
Sig	ın	Signature of officer			I Date			
He		TAYLOR JONES, PRESIDENT						
110		Type or print name and title						
		Print/Type preparer's name Preparer's signature			Date Check	PTIN		
Pai	d	SAM A. LAZZARA			if self-emplo	P01342929		
Pre	parer	Firm's name RIVERO, GORDIMER & COMPANY,	P.A	•	Firm's EIN ▶	59-3040705		
Use	Only	Firm's address P. O. BOX 172359						
		TAMPA, FL 33672			Phone no. ( 8	313) 875-7774		
Ma	v tha II	RS discuss this return with the preparer shown above? See instructions				X Ves No		

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  THE TINTOR I FACILE OF MAMPA THE TENTON OF MOMEN COMMITTEEN
	THE JUNIOR LEAGUE OF TAMPA, INC. IS AN ORGANIZATION OF WOMEN COMMITTED TO PROMOTING VOLUNTARISM, DEVELOPING THE POTENTIAL OF WOMEN AND
	IMPROVING COMMUNITIES THROUGH EFFECTIVE ACTION AND LEADERSHIP OF
	TRAINED VOLUNTEERS. ITS PURPOSE IS EXCLUSIVELY EDUCATIONAL AND
_	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X No
2	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
3	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 25,000 • including grants of \$ ) (Revenue \$
	FOOD INSECURITY AFFECTS MORE THAN 1.3 MILLION PEOPLE IN THE TAMPA BAY
	REGION. FAMILIES STRUGGLING WITH FOOD INSECURITY DO NOT HAVE CONSISTENT
	ACCESS TO ENOUGH FOOD FOR A HEALTHY LIFE. FOR CHILDREN, HUNGER AND FOOD
	INSECURITY CAN LEAD TO PROBLEMS WITH DEVELOPMENT, LEARNING, AND MORE.
	THE JUNIOR LEAGUE OF TAMPA'S FOOD 4 KIDS PROJECT AIMS TO HELP CLOSE THE
	HUNGER GAP AND HELP CHILDREN ACCESS THE FOOD THEY NEED. WHAT BEGAN IN
	THE EARLY 2000S AS A FOOD BACKPACK PROGRAM AT A FEW TITLE I SCHOOLS,
	NOW SERVES FAMILIES ACROSS HILLSBOROUGH COUNTY. THE FOOD 4 KIDS PROJECT
	PARTNERED WITH METROPOLITAN MINISTRIES IN 2020-2021 TO SUPPLY BOXES OF
	HOPE TO FAMILIES IN NEED. INSIDE EACH BOX ARE PERISHABLE LIKE FRUITS
	AND VEGETABLES AS WELL AS SHELF STABLE ITEMS LIKE SOUP, PEANUT BUTTER,
	CEREAL, AND RICE.
4b	(Code:) (Expenses \$93,609 • including grants of \$) (Revenue \$)
	THE JUNIOR LEAGUE OF TAMPA DIAPER BANK AND ALLIANCE FOR PERIOD SUPPLIES
	SERVES TO COMBAT NEED WITHIN HILLSBOROUGH COUNTY BY SUPPLYING DIAPERS
	AND PERIOD SUPPLIES TO OUR COMMUNITY PARTNERS FOR DISTRIBUTION
	THROUGHOUT OUR COMMUNITY. THE DIAPER BANK COLLECTS CHILD AND ADULT SIZED DIAPERS FROM INDIVIDUALS AS WELL AS PURCHASES DIAPERS IN BULK TO
	SUPPLY TO OUR PARTNERS. ACCORDING TO THE NATIONAL DIAPER BANK NETWORK,
	1 IN 3 AMERICAN FAMILIES REPORT EXPERIENCING DIAPER NEED. DIAPERS
	CANNOT BE OBTAINED WITH FOOD STAMPS AND DISPOSABLE DIAPERS COST \$70 TO
	\$80 PER MONTH PER BABY. DURING THE 2020-2021 FISCAL YEAR, THE JUNIOR
	LEAGUE OF TAMPA DISTRIBUTED OVER 462,702 DIAPERS THROUGH COMMUNITY
	ORGANIZATIONS. SEE SCHEDULE O
4c	(Code:) (Expenses \$ 38,738 • including grants of \$) (Revenue \$)
	MILO STANDS FOR MOBILE INTERACTIVE LITERACY OPPORTUNITY AND WAS CREATED
	TO REACH UNDERSERVED AREAS OF HILLSBOROUGH COUNTY. IN 2016, THE MILO
	BUS WAS LAUNCHED IN PARTNERSHIP WITH THE CHILDREN'S BOARD OF
	HILLSBOROUGH COUNTY, WEDU PBS, AND THE HILLSBOROUGH COUNTY PUBLIC
	LIBRARY. THE MILO PROJECT HAS EVOLVED FROM JUST A TRAVELING BUS, TO A
	BROADER NETWORK OF LITERACY INITIATIVES DESIGNED TO MEET CHILDREN AND
	FAMILIES WHERE THEY ARE. THE JUNIOR LEAGUE OF TAMPA ESTABLISHED THE
	GIVING LIBRARY PROGRAM TO BUILD AND STOCK SMALL LIBRARIES WITH FREE
	BOOKS ALLOWING CHILDREN TO BUILD THEIR OWN HOME LIBRARY. BY PARTNERING
	WITH THE UACDC, CHILDREN'S BOARD FAMILY RESOURCE CENTERS, AND TAMPA
	FAMILY HEALTH CENTERS, GIVING LIBRARIES ARE STRATEGICALLY PLACED FOR
	EASE OF ACCESS. SEE SCHEDULE O
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 449,241 • including grants of \$ 44,517 •) (Revenue \$ )
<u>4e</u>	Total program service expenses ► 606,588.
	Form <b>990</b> (2020)

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			3,7
	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,			\ <sub>3,7</sub>
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		<b>.</b>
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	Х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	110	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	21	
b	seeds venerated in Dort V. line 100 lf "Voo " complete Cabady to D. Dort VIII	11b		x
•	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		<del></del>
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	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		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			,,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			\ <sub>3,7</sub>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_ v
00-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	domestic government on Fartin, column (A), line 1: 11 163, complete donedule 1, 1 arts 1 and 11	<u> </u>		

## Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			37
0.4	Schedule J	23		X
24 a	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	24a		x
h	Schedule K. If "No," go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	LI		
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			3,7
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<del></del>
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	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	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			.,
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	0.7		X
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		
30		38	Х	
Pa		_ 50		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

032004 12-23-20

# Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	3		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			l
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			37
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			X
	to file Form 8282?	7c		Α.
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
f g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	Α
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7		
_	sponsoring organization have excess business holdings at any time during the year?  N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?  N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
10	amounts due or received from them.)  Section 1007/2010 per account about the supplied to the appropriate filing Form 200 in liquid form 10112	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	ioa		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
		Forn	990	(2020)

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

	Check if Schedule O contains a response or note to any line in this Part VI				X
Sec	tion A. Governing Body and Management				
		1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 10			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b 10			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision			
	of officers, directors, 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 9	90 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?	5		Х
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point one or			
	more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s				
	persons other than the governing body?		7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the following:			
а	The governing body?		8a	Х	
b			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched at the			
			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code.)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	-			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye				
	in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approva				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a		Х
	Other officers or key employees of the organization		15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with a			
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's			
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶FL				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990-T (Section 501(c)(3	)s only	) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.		,		
		on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	,	ıd finaı	ncial	
	statements available to the public during the tax year.	. ,,			
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and records			
	CHELSIE LA NORE - (813)254-1734	· —			
	87 COLUMBIA DR. TAMPA, FL 33606				

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if neither the organization n	or any related	orga	aniza	ation	100	npe	nsat	ted any current officer,	director, or trustee.	
(A)	(B)			(0	<b>C)</b>			(D)	(E)	(F)
Name and title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	a a a	irecto	or/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	or di	99			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	nstee.	trust		99	ubeu		(W-2/1099-WISC)		organization and related
	below	lual tr	tional		nploy	st cor	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organization o
(1) TAYLOR JONES	30.00	_	_		×	1 0		<i>(</i> <b>(</b> )		
PRESIDENT		Х		Х		Ι,		0.	0.	0.
(2) CAROLINE VOSTREJS	25.00							7		
PRESIDENT-ELECT		Х		Х				0.	0.	0.
(3) MIRANDA HENDERSON	25.00			/						
MANAGING DIRECTOR		Х		X	)			0.	0.	0.
(4) EMILY READ	20.00									
COMMUNITY DIRECTOR		X		Х				0.	0.	0.
(5) BRITTANY STAHL	20.00	$\mathbf{\Lambda}$	•							
FINANCE DIRECTOR		X		Х				0.	0.	0.
(6) MYCHAEL SUMBY	20.00	١								•
MEMBERSHIP DIRECTOR	20 00	Х		Х				0.	0.	0.
(7) ALEX PALERMO	20.00									0
LEADERSHIP DIRECTOR	7 - 00	Х		Х				0.	0.	0.
(8) STEPHANIE HAAS	15.00									0
STRATEGIC PLANNING DIRECTO	15 00	Х		Х				0.	0.	0.
(9) MOLLY MALLOY	15.00	X		7.7				0.	0.	0
SECRETARY (10) TEN CARL CHERRY	15.00	^		Х				0.	0.	0.
(10) JEN CARLSTEDT SUSTAINER AT LARGE	13.00	X		х				0.	0.	0.
SUSTAINER AT LARGE		Δ		Δ				0.	0.	0.
		-								
		1								
		1								
		1								
		1								

Form **990** (2020)

Page 8

Fait VII	section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	, and	d Hi	gne	st C	ompensated Employe	<b>es</b> (continuea)				
	(A) Name and title		per bk (C) (do not check more than box, unless person is bot officer and a director/trus					n an	( <b>D)</b> Reportable compensation from	(E) Reportable compensation from related		an	(F) stimate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	s	com fr org and	pensa om the anizati d relate anizatio	e ion ed
											$\perp$			
											$\dashv$			
										1				
			$  \cdot  $						C.0	•				
											$\dashv$			
								1	(6)					
1b Subtot	al						5		0.		0.			0.
c Total f	al rom continuation sheets to Part V add lines 1b and 1c)	II, Section A						<b>&gt;</b>	0.		0.			0.
2 Total n	umber of individuals (including but rnsation from the organization				d al	oove	e) wh	io re	eceived more than \$100	,000 of reportabl	e		1	0
	organization list any <b>former</b> officer, ? If "Yes," complete Schedule J for \$											3	Yes	No X
4 For any	individual listed on line 1a, is the stated organizations greater than \$15	ım of reportab	le cc	ompe	ensa	ation	n and	otl				4		X
render	y person listed on line 1a receive or a ed to the organization? If "Yes," com							elat	ed organization or indiv	idual for services		5		Х
1 Comple	ndependent Contractors ete this table for your five highest co anization. Report compensation for										npensa	ation f	rom	
	(A) Name and business			ONE		VICII	OI W		(B)  Description of s		C	(Compe	<b>)</b> nsatio	า
	umber of independent contractors (i 00 of compensation from the organi		ot lir	mite	d to		se lis	ted	d above) who received m	nore than				
÷ , 5 5, 6	,	٠, ۴									-	Form	990 (2	2020)

032008 12-23-20

The Check of Schedule Contains a response or note to any line in this Part VIII  (A)  (A)  (B)  (C)  (C)  (C)  (C)  (C)  (C)  (C	Ра	rt V	Ш						
Total revenue   Total revenu				Check if Schedule O contains a response of	r note to any lin		/D\	(C)	
1 a Federated campaigns   1a   367,975   1c   1d   367,975   1c   367,975						·			
1 a   Federated campaigns   1 a						Total Tovolido			
Business Code    2 a	(O (O								Sections 512 - 514
Business Code    2 a	anta	1		-	067 075				
Business Code    2 a	Gr.				001,913.				
Business Code    All other program service revenue	fts,								
Business Code    2 a	ia ia			······································	10 F20				
Business Code    2 a	Sir			* `	19,520.				
Business Code    All other program service revenue	utic		f	1 1	210 506				
Business Code    2 a	P.F.			···					
Business Code    2 a	ou		_			707 001			
2 a   b   b   c   c   c   c   c   c   c   c	<u>S</u>		n			707,001.			
Total, Add lines 2a27    Total, Add lines 2a27	•	_		-	Business Code				
Total, Add lines 2a27    Total, Add lines 2a27	/ice	2							
Total, Add lines 2a27    Total, Add lines 2a27	Ser								
Total, Add lines 2a27    Total, Add lines 2a27	wer.								
Total, Add lines 2a27    Total, Add lines 2a27	gra Re							)	
1	Pro			All other program convice revenue			$\sim$		
3   Investment income (including dividends, interest, and other similar amounts)   4   Income from investment of tax exempt bond proceeds   5   Royalties   6   (ii) Personal   6   (iii) Personal   (iii) Person				_	_				
other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  6 a Gross rents  6 b Less: rental expenses  c Rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  7 a Gross income from fundraising events  6 a Gross mount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  7 b C Gain or (loss)  6 a Gross income from fundraising events  7 b C Gain or (loss)  6 b C C Gain or (loss)  7 c C C C C C C C C C C C C C C C C C C			9				$\bigcirc$		
1   1   1   2   2   2   2   2   2   2				, ,		226,373.	226,373.		
Second   Contributions reported on life 1c). See   Part IV, line 18   Second   Sec		4				36			
Second   Contributions reported on life 1c). See   Part IV, line 18   Second   Sec		5		Royalties					
b Less: rental expenses 66 6c 6c 7 6c 7 6c 7 6c 7 6c 7 6c 7 6c									
To Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7 c Gain or (loss) 8 a Gross income from fundraising events fool including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross ancome from gaming activities 10 a Gross income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory 10 a Gross ancome from gaming activities 10 a Gross ancome from gam		6	а	Gross rents 6a		2			
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7 b C Gain or (loss) 8 a Gross income from fundraising events not including \$			b	Less: rental expenses 6b		O			
To a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7b 7c 7c 7c 7d Net grain or (loss) 7c 7c 7d Net grain or (loss) 8a Gross income from fundraising events (not including \$ 0 contributions reported on line 1c). See Part IV, line 18 8a 161,954. 8b 32,914. c Net income or (loss) from fundraising events \$ 0 d Gross income from gaming activities. See Part IV, line 19 9a 9b c Net income or (loss) from gaming activities. See Part IV, line 19 9a 9b c Net income or (loss) from gaming activities. See Part IV, line 19 9a 9b c Net income or (loss) from gaming activities. See Part IV, line 19 9a 9b c Net income or (loss) from gaming activities. See Part IV, line 19 9a 9b c Net income or (loss) from gaming activities. See Part IV, line 19 9a 9b c Net income or (loss) from gaming activities. See Part IV, line 19 9a 9b c Net income or (loss) from sales of inventory					$\mathcal{C}$				
assets other than inventory b Less: cost or other basis and sales expenses 7b C Gain or (loss) 7c d Net gain or (loss)									
b Less: cost or other basis and sales expenses 7b 7c		7	а		(ii) Other				
and sales expenses 7b 7c			_	·					
8 a Gross income from fundraising events (not including \$	Ð		b						
8 a Gross income from fundraising events (not including \$	eun		_						
8 a Gross income from fundraising events (not including \$	ev.								
including \$ of contributions reported on line 1c). See Part IV, line 18									
contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory c Net income or (loss) from sales of inventory  MEMBERSHIP PUBLICATION b Less: Cost of goods sold c d All other revenue e Total. Add lines 11a-11d	H.	0	а						
Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory b Gusiness Code 90 00099 15,518. 15,518.									
b Less: direct expenses 8b 32,914 c c Net income or (loss) from fundraising events 129,040 c 9 a Gross income from gaming activities. See Part IV, line 19 9a 9b					L61,954.				
C Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19  9 b Less: direct expenses  C Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances  b Less: cost of goods sold  C Net income or (loss) from sales of inventory  10 a Gross sales of inventory, less returns  and allowances  b Less: cost of goods sold  C Net income or (loss) from sales of inventory  9 , 613.  Business Code  9 00099  15 , 518.  15 , 518.			b		32,914.				
9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  10a 17,371. b Less: cost of goods sold c Net income or (loss) from sales of inventory  11 a MEMBERSHIP PUBLICATION b C All other revenue e Total. Add lines 11a-11d  15,518.						129,040.			129,040.
b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  10a 17,371. b Less: cost of goods sold c Net income or (loss) from sales of inventory  9,613.    MEMBERSHIP PUBLICATION   Business Code		9	а	Gross income from gaming activities. See					
C Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances  b Less: cost of goods sold c Net income or (loss) from sales of inventory  10 a 17,371.  b Less: cost of goods sold c Net income or (loss) from sales of inventory  11 a MEMBERSHIP PUBLICATION  12 b Business Code  4 All other revenue  13 c Total. Add lines 11a-11d				Part IV, line 19 9a					
10 a Gross sales of inventory, less returns and allowances			b	Less: direct expenses 9b					
and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The state of the state			С	Net income or (loss) from gaming activities	<b>&gt;</b>				
b Less: cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.    The least cost of goods sold c Net income or (loss) from sales of inventory 9,613.		10	а		48 284				
C   Net income or (loss) from sales of inventory   9 , 613									
Name				-	7,758.	0 (12			0 (12
11 a MEMBERSHIP PUBLICATION 900099 15,518. 15,518.  b c d All other revenue e Total. Add lines 11a-11d    15,518.			С			9,613.			9,613.
e Total. Add lines 11a-11d	sn		_	L. L		15 51Ω	15 510		
e Total. Add lines 11a-11d	neo	11		MEMBERSHIF FUBLICATION	200023	13,310.	13,310.		
e Total. Add lines 11a-11d	əlla								
e Total. Add lines 11a-11d	Be			All other revenue					
	Σ				•	15,518.			
12 Total revenue. See instructions		12	_	Total revenue. See instructions		1,087,545.	241,891.	0.	138,653.

## Part IX | Statement of Functional Expenses

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

D٥	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	44 515	44 515		
	and domestic governments. See Part IV, line 21	44,517.	44,517.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
_	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	114 022	20 207	76 615	
7	Other salaries and wages	114,922.	38,307.	76,615.	
8	Pension plan accruals and contributions (include			√Y'.	
_	section 401(k) and 403(b) employer contributions)	9,386.	3,129.	6,257.	
9	Other employee benefits	3,155.	1,052	2,103.	
10	Payroll taxes	3,133.	1,052	2,103.	
11	Fees for services (nonemployees):		.01		
а	Management		-(0		
b	Legal	14,500.		14,500.	
С	• • • • • • • • • • • • • • • • • • • •	14,500.	6	14,300.	
d	, , , , , , , , , , , , , , , , , , , ,				
e	· · · · · · · · · · · · · · · · · · ·		,		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	8,991.	6,709.	2,282.	
10	· ·	0,001.	0,703.	2,2021	
12 13	Advertising and promotion	20,798.	13,356.	2,050.	5,392
13 14	Office expenses	18,403.	15,643.	1,840.	920
	Information technology Royalties	10,403.	13,013.	1,010.	720
15 16		31,382.	26,675.	3,138.	1,569
17	Occupancy	31,302.	20,0731	372301	1,305
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	820.	820.		
20	Interest	3-00	3-01		
20 21	Payments to affiliates	74,347.	74,347.		
22	Depreciation, depletion, and amortization	26,648.	22,651.	2,665.	1,332
23	Insurance	57,140.	48,569.	5,714.	2,857
23 24	Other expenses. Itemize expenses not covered			.,.==-	=,:3.
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	COMMUNITY PROJECTS	260,463.	260,463.		
b	PUBLICATION EXPENSE	22,945.	19,503.	2,295.	1,147
c	BANK CHARGES	20,110.	12,066.	2,011.	6,033
d	MEMBERSHIP EXPENSES	13,176.	13,176.	, -	,
e		5,605.	5,605.		
25 25	Total functional expenses. Add lines 1 through 24e	747,308.	606,588.	121,470.	19,250
<u></u> 26	<b>Joint costs.</b> 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)				

Form **990** (2020)

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to a	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			512,831.	1	628,385.
	2	Savings and temporary cash investments			1,151,446.	2	1,157,745.
	3	Pledges and grants receivable, net			200.	3	0.
	4	Accounts receivable, net	5,830.	4	5,701.		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial	contributor, or 35%			
		controlled entity or family member of any of th	ese per	sons		5	
	6	Loans and other receivables from other disqua	ersons (as defined				
		under section 4958(f)(1)), and persons describ	ed in se	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			120,107.	8	110,701.
⋖	9	Prepaid expenses and deferred charges			1,416.	9	1,394.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	677,193.	238,687.	10c	212,039.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			717,860.	15	942,375.
	16	Total assets. Add lines 1 through 15 (must ed			2,748,377.	16	3,058,340.
	17	Accounts payable and accrued expenses			73,481.	17	23,762.
	18	Grants payable			000 000	18	222
	19	Deferred revenue			297,002.	19	309,830.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	e Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or fo	-				
Ħ		trustee, key employee, creator or founder, sub					
Liabilities		controlled entity or family member of any of the		To the second se		22	
_	23	Secured mortgages and notes payable to unre			10 500	23	
	24	Unsecured notes and loans payable to unrelat		F	19,520.	24	0.
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin			47 014		72 051
		of Schedule D			47,814.		73,951.
	26	Total liabilities. Add lines 17 through 25			437,817.	26	407,543.
S		Organizations that follow FASB ASC 958, cl	neck he	re 🕨 🔼			
ŭ		and complete lines 27, 28, 32, and 33.			1,568,589.	0=	1 602 177
Sala	27	Net assets without donor restrictions			741,971.	27	1,682,177. 968,620.
<u>d</u>	28	Net assets with donor restrictions			141,311.	28	900,020.
Ξ		Organizations that do not follow FASB ASC	958, cr	eck nere			
Net Assets or Fund Balances	20	and complete lines 29 through 33.	0			20	
ets	29	Capital stock or trust principal, or current fund				29 30	
Ass	30	Paid-in or capital surplus, or land, building, or		F			
et/	31	Retained earnings, endowment, accumulated			2,310,560.	31 32	2,650,797.
Z	32	Total liabilities and not assets/fund balances			2,748,377.	33	3,058,340.
	33	Total liabilities and net assets/fund balances			4,140,311.	<i>ა</i> ა	5,050,540.

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>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	,08					
2	Total expenses (must equal Part IX, column (A), line 25)	2				08.			
3	Revenue less expenses. Subtract line 2 from line 1	3				37.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2	,31	0,5	<u>60.</u>			
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 on Schedule O)	9				0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	2	<u>,65</u>	0,7	<u>97.</u>			
Par	t XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII					LX.			
					Yes	No			
1	Accounting method used to prepare the Form 990:								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.							
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?			2b	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,							
	consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis		J						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the								
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si								
	Act and OMB Circular A-133?			3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	it						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b					
	Pullic			Form	<b>330</b>	(2020)			

#### **SCHEDULE A**

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization THE JUNEAU TO THE TAMPA THE

Employer identification number 50-0603003

				GOE OF TAMPA				9-0093993
Pa	rt I	Reason for Public (	Charity Status.	All organizations must c	omplete tl	nis part.) S	ee instructions.	
he.	organi	ization is not a private found	ation because it is: (	For lines 1 through 12, o	heck only	one box.)		
1		A church, convention of ch	urches, or associatio	on of churches described	d in <b>sectio</b>	n 170(b)(	I)(A)(i).	
2		A school described in secti	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990 or 99	90-EZ).)		
3		A hospital or a cooperative	hospital service orga	anization described in <b>se</b>	ection 170	(b)(1)(A)(i	ii).	
4		A medical research organiz	ation operated in co	njunction with a hospital	described	d in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:						
5		An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a g	overnmental unit descrit	ped in
		section 170(b)(1)(A)(iv). (C	omplete Part II.)					
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).	
7		An organization that norma	lly receives a substa	ntial part of its support f	rom a gov	ernmental	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)					
8		A community trust describe	ed in <b>section 170(b)(</b>	1)(A)(vi). (Complete Part	t II.)			
9		An agricultural research org				ed in conju	nction with a land-grant	college
		or university or a non-land-g						
		university:						
10	X	An organization that norma	lly receives (1) more	than 33 1/3% of its sup	port from	contributio	ns, membership fees, a	nd gross receipts from
		activities related to its exer				_		
		income and unrelated busin			- 4			
		See section 509(a)(2). (Cor		,			, 0	,
11		An organization organized a		ively to test for public sa	fety. See	section 50	)9(a)(4).	
12		An organization organized a						e purposes of one or
		more publicly supported or						
		lines 12a through 12d that						
а		Type I. A supporting orga						/ giving
		the supported organization		• ( •				
		organization. You must c						•
b		Type II. A supporting orga			tion with it	s support	ed organization(s), by ha	aving
		control or management o						
		organization(s). You mus	11 *. 1		•			•
С		Type III functionally inte			in connec	tion with,	and functionally integrat	ed with,
		its supported organization						
d		Type III non-functionally						ization(s)
		that is not functionally int						
		requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-functio	nally integrated support	ing organi:	zation.		
f	Ente	r the number of supported o						
g	Prov	ride the following information	about the supporte	d organization(s).				-
	(i	) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
	.1						l .	1

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a				_		
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,				~ O \		
	column (f)			-			
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support	( ) 00/0	" > 00.4=	(100)	1,0040	( ) 2222	(n =
	ndar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4						
8	Gross income from interest,			6			
	dividends, payments received on		. (				
	securities loans, rents, royalties,			)			
_	and income from similar sources						
9	Net income from unrelated business		. 62				
	activities, whether or not the						
40	business is regularly carried on		<del></del>				
10	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)	()					
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instruction	nne)			12	<u> </u>
	First 5 years. If the Form 990 is for the			fourth or fifth tax			
	organization, check this box and <b>stop</b>						
Sec	ction C. Computation of Publi						
	Public support percentage for 2020 (lin			column (f))		14	%
	Public support percentage from 2019					15	%
	33 1/3% support test - 2020. If the or					nore, check this bo	ox and
	stop here. The organization qualifies a						
b	33 1/3% support test - 2019. If the or						
	and stop here. The organization qualit						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts						
	meets the facts-and-circumstances tes						
b	10% -facts-and-circumstances test	- 2019. If the org	anization did not o	check a box on line			
	more, and if the organization meets the	-					
	organization meets the facts-and-circu	mstances test. Th	ne organization qu	alifies as a publicly	y supported organ	ization	<b>&gt;</b>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	b, check this box a	nd see instruction	ns ▶
							or 990-EZ) 2020

## Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	, , <u>, , , , , , , , , , , , , , , , , </u>	,				
Cale	endar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	648,622.	620,795.	714,744.	756,449.	687,481.	3428091.
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	656,343.	696,724.	757,830.	651,792.	179,325.	2942014.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				<b>\</b>		
5	The value of services or facilities				~		_
_	furnished by a governmental unit to						
	the organization without charge				-07		
6	Total. Add lines 1 through 5	1304965.	1317519.	1472574.	1408241.	866,806.	6370105.
	Amounts included on lines 1, 2, and					, , , , , , , , , , , , , , , , , , , ,	
	3 received from disqualified persons						0.
k	Amounts included on lines 2 and 3 received			40			_
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
,	Add lines 7a and 7b			5			0.
	Public support. (Subtract line 7c from line 6.)		1				6370105.
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6	1304965.	1317519.	1472574.	1408241.	866,806.	6370105.
	Gross income from interest,					-	
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	17,062.	10,444.	32,986.	19,521.	226,373.	306,386.
ŀ	Unrelated business taxable income	110					
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	NO					
	Add lines 10a and 10b	17,062.	10,444.	32,986.	19,521.	226,373.	306,386.
	Net income from unrelated business	<b>V</b>	,	,	,	,	-
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)	1322027.	1327963.	1505560.	1427762.	1093179.	6676491.
	First 5 years. If the Form 990 is for the						
	check this box and <b>stop here</b>	•				. , . , .	<b>▶</b>
Se	ction C. Computation of Publ						
15	Public support percentage for 2020 (	line 8, column (f), d	livided by line 13,	column (f))		15	95.41 %
	Public support percentage from 2019					16	98.61 %
	ction D. Computation of Inve						
	Investment income percentage for 20			ne 13, column (f))		17	4.59 %
	Investment income percentage from 2					18	1.39 %
	a 33 1/3% support tests - 2020. If the					3 1/3%, and line 1	
	more than 33 1/3%, check this box a						<b>▶</b> X
Ł	33 1/3% support tests - 2019. If the						
k		organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	and

# Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
48		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
9b		
9с		
10a		
10b		
IUU		

<ul> <li>a A person who directly or indirectly control         11c below, the governing body of a supp         b A family member of a person described in         c A 35% controlled entity of a person described in Part VI.     </li> <li>Section B. Type I Supporting Organ     </li> <li>1 Did the governing body, members of the more supported organizations have the properties of the directors, or trustees at all times during the effectively operated, supervised, or control organization, describe how the powers to supported organizations and what conditing the organization operate for the benefit organization operated, supervised Part VI how providing such benefit carries supervised, or controlled the supporting organization.</li> <li>Section C. Type II Supporting Organization or trustees of each of the organization's directive or management of the supporting organization.</li> </ul>	ribed in line 11a above?  dribed in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide  1  dizations  governing body, officers acting in their official capacity, or membership of one or power to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported organizations or restrictions, if any, applied to such powers during the tax year.  Befit of any supported organization other than the supported organization in ad out the purposes of the supported organization(s) that operated, organization.	1a 1b	Yes	No
<ul> <li>a A person who directly or indirectly control         11c below, the governing body of a supp         b A family member of a person described in         c A 35% controlled entity of a person described in Part VI.     </li> <li>Section B. Type I Supporting Organ     </li> <li>1 Did the governing body, members of the more supported organizations have the properties of the directors, or trustees at all times during the effectively operated, supervised, or control organization, describe how the powers to supported organizations and what conditing the organization operate for the benefit organization operated, supervised Part VI how providing such benefit carries supervised, or controlled the supporting organization.</li> <li>Section C. Type II Supporting Organization or trustees of each of the organization's directive or management of the supporting organization.</li> </ul>	obs, either alone or together with persons described in lines 11b and ported organization?  In line 11a above?  In line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide  Inizations  governing body, officers acting in their official capacity, or membership of one or power to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported or appoint and/or remove officers, directors, or trustees were allocated among the cions or restrictions, if any, applied to such powers during the tax year.  Defit of any supported organization other than the supported organization.  In organization.	1b	Yes	No
<ul> <li>b A family member of a person described in a 35% controlled entity of a person described in a 35% controlled entity of a person described in a 35% controlled entity of a person described in a 25% controlled entity of a person described in a 25% controlled entity of a person described in a 25% controlled entity of a person described in a 25% controlled entity of a 25% controlled entity of</li></ul>	ported organization? In line 11a above? In line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide Inizations	1b	Yes	No
<ul> <li>b A family member of a person described in c A 35% controlled entity of a person described in c A 35% controlled entity of a person described in Part VI.</li> <li>Section B. Type I Supporting Organ</li> <li>1 Did the governing body, members of the more supported organizations have the profession of trustees at all times during the effectively operated, supervised, or controlled organization, describe how the powers to supported organizations and what conditing the organization operate for the benefict organization operated, supervised Part VI how providing such benefit carried supervised, or controlled the supporting organization.</li> <li>1 Were a majority of the organization's direction or trustees of each of the organization's supervised or management of the supporting organization.</li> </ul>	n line 11a above?  pribed in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide  nizations  governing body, officers acting in their official capacity, or membership of one or power to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported or appoint and/or remove officers, directors, or trustees were allocated among the itons or restrictions, if any, applied to such powers during the tax year.  Defit of any supported organization other than the supported organization? If "Yes," explain in the do ut the purposes of the supported organization(s) that operated, porganization.	1b	Yes	No
c A 35% controlled entity of a person descretation B. Type I Supporting Organ  1 Did the governing body, members of the more supported organizations have the profession of the directors, or trustees at all times during the effectively operated, supervised, or control organization, describe how the powers to supported organizations and what condition of the organization operate for the benefict organization operated, supervised Part VI how providing such benefit carries supervised, or controlled the supporting of Section C. Type II Supporting Organization of the organization's directory of the organization or trustees of each of the organization's supervised or management of the supporting organization.	governing body, officers acting in their official capacity, or membership of one or cower to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported organizations or restrictions, if any, applied to such powers during the tax year. Left of any supported organization other than the supported organization.  If "Yes," explain in the dout the purposes of the supported organization(s) that operated, organization.	1	Yes	No
detail in Part VI.  Section B. Type I Supporting Organ  1 Did the governing body, members of the more supported organizations have the particular directors, or trustees at all times during the effectively operated, supervised, or contra organization, describe how the powers to supported organizations and what condit 2 Did the organization operate for the bene organization(s) that operated, supervised Part VI how providing such benefit carries supervised, or controlled the supporting of Section C. Type II Supporting Organization or trustees of each of the organization's sign or management of the supporting organization.	governing body, officers acting in their official capacity, or membership of one or cower to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported organization and/or remove officers, directors, or trustees were allocated among the citions or restrictions, if any, applied to such powers during the tax year. Seffit of any supported organization other than the supported and out the purposes of the supported organization(s) that operated, corganization.	1	Yes	No
1 Did the governing body, members of the more supported organizations have the p directors, or trustees at all times during the effectively operated, supervised, or controrganization, describe how the powers to supported organizations and what condition and the organization operate for the bene organization(s) that operated, supervised Part VI how providing such benefit carries supervised, or controlled the supporting of Section C. Type II Supporting Organization of the organization's direction or trustees of each of the organization's supervised or management of the supporting organization or management of the supporting organization.	governing body, officers acting in their official capacity, or membership of one or power to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported organization are remove officers, directors, or trustees were allocated among the cions or restrictions, if any, applied to such powers during the tax year. Seffit of any supported organization other than the supported and out the purposes of the supported organization(s) that operated, corganization.	1	Yes	No
<ol> <li>Did the governing body, members of the more supported organizations have the p directors, or trustees at all times during the effectively operated, supervised, or controrganization, describe how the powers to supported organizations and what condit</li> <li>Did the organization operate for the bene organization(s) that operated, supervised Part VI how providing such benefit carries supervised, or controlled the supporting of Section C. Type II Supporting Organization or trustees of each of the organization's sign or management of the supporting organization.</li> </ol>	governing body, officers acting in their official capacity, or membership of one or power to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) colled the organization's activities. If the organization had more than one supported organization appoint and/or remove officers, directors, or trustees were allocated among the cions or restrictions, if any, applied to such powers during the tax year. Seffit of any supported organization other than the supported and out the purposes of the supported organization(s) that operated, corganization.	1	Yes	No
more supported organizations have the p directors, or trustees at all times during the effectively operated, supervised, or contro organization, describe how the powers to supported organizations and what condit  Did the organization operate for the bene organization(s) that operated, supervised Part VI how providing such benefit carrie supervised, or controlled the supporting of Section C. Type II Supporting Organization  Were a majority of the organization's dire or trustees of each of the organization's s or management of the supporting organization	power to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported or appoint and/or remove officers, directors, or trustees were allocated among the sions or restrictions, if any, applied to such powers during the tax year. Seffit of any supported organization other than the supported of any supported organization? If "Yes," explain in the doubt the purposes of the supported organization(s) that operated, porganization.	1	Yes	No
more supported organizations have the p directors, or trustees at all times during the effectively operated, supervised, or contro organization, describe how the powers to supported organizations and what condit  Did the organization operate for the bene organization(s) that operated, supervised Part VI how providing such benefit carrie supervised, or controlled the supporting of Section C. Type II Supporting Organization  Were a majority of the organization's dire or trustees of each of the organization's s or management of the supporting organization	power to regularly appoint or elect at least a majority of the organization's officers, the tax year? If "No," describe in Part VI how the supported organization(s) colled the organization's activities. If the organization had more than one supported or appoint and/or remove officers, directors, or trustees were allocated among the sions or restrictions, if any, applied to such powers during the tax year. Seffit of any supported organization other than the supported of any supported organization? If "Yes," explain in the doubt the purposes of the supported organization(s) that operated, porganization.			
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effectively operated, supervised, or controrganization, describe how the powers to supported organizations and what condit  2 Did the organization operate for the bene organization(s) that operated, supervised Part VI how providing such benefit carrie supervised, or controlled the supporting of Section C. Type II Supporting Organization's dire or trustees of each of the organization's sor management of the supporting organization operate for the benefit carries organization operate for the benefit carries organization operated organi	colled the organization's activities. If the organization had more than one supported of appoint and/or remove officers, directors, or trustees were allocated among the cions or restrictions, if any, applied to such powers during the tax year.  Setti of any supported organization other than the supported of any supported organization? If "Yes," explain in and out the purposes of the supported organization(s) that operated, organization.			
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<ul> <li>Did the organization operate for the bene organization(s) that operated, supervised Part VI how providing such benefit carrie supervised, or controlled the supporting of Section C. Type II Supporting Organization's direction or trustees of each of the organization's supervised or management of the supporting organization.</li> </ul>	efit of any supported organization other than the supported I, or controlled the supporting organization? If "Yes," explain in ad out the purposes of the supported organization(s) that operated, organization.			
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Were a majority of the organization's dire or trustees of each of the organization's sor management of the supporting organization.	nizations	2		
Were a majority of the organization's dire or trustees of each of the organization's so or management of the supporting organization.	CO7 -			
or trustees of each of the organization's or management of the supporting organization	ectors or trustees during the tax year also a majority of the directors			
or trustees of each of the organization's or management of the supporting organization	ectors or trustees during the tax vear also a majority of the directors		Yes	No
or management of the supporting organiz				
	supported organization(s)? If "No," describe in Part VI how control			
	zation was vested in the same persons that controlled or managed			
the supported organization(s).  Section D. All Type III Supporting O		1		
Section B. All Type III Supporting S	1 garrizations		Yes	No
1 Did the organization provide to each of it	s supported organizations, by the last day of the fifth month of the		162	NO
	e describing the type and amount of support provided during the prior tax			
	most recently filed as of the date of notification, and (iii) copies of the			
		1		
	lirectors, or trustees either (i) appointed or elected by the supported			
	rning body of a supported organization? If "No," explain in Part VI how			
		2		
	n line 2 above, did the organization's supported organizations have a			
	estment policies and in directing the use of the organization's			
	ax year? If "Yes," describe in Part VI the role the organization's			
supported organizations played in this res		3		
Section E. Type III Functionally Inte	grated Supporting Organizations			
1 Check the box next to the method that the	ne organization used to satisfy the Integral Part Test during the yea(see instructions).			
a The organization satisfied the Activ	vities Test. Complete line 2 below.			
<b>b</b> The organization is the parent of ea	ach of its supported organizations. Complete line 3 below.			
c  The organization supported a gove	ernmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instru	ction	s).	
2 Activities Test. Answer lines 2a and 2b	below.		Yes	No
	activities during the tax year directly further the exempt purposes of			
the supported organization(s) to which the	ne organization was responsive? If "Yes," then in Part VI identify			
	plain how these activities directly furthered their exempt purposes,			
	hose supported organizations, and how the organization determined			
that these activities constituted substanti	ially all of its activities.	a l		
	ove, constitute activities that, but for the organization's involvement,			
	ted organization(s) would have been engaged in? If "Yes," explain in			
	position that its supported organization(s) would have engaged in			
those setivities but for the executation is		b e		
these activities but for the organization's				
3 Parent of Supported Organizations. Answ	egularly appoint or elect a majority of the officers, directors, or			
<ul><li>3 Parent of Supported Organizations. Answar</li><li>a Did the organization have the power to re</li></ul>		a		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Org	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust c	on Nov. 20, 1970 (explain in <b>P</b>	art VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must of	omple	ete Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors	0		
	(explain in detail in Part VI):	Y	,	
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
_8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1_	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integr	ated Type III supporting orga	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2020

Par	τν	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continu</sub>	ıed)	
Secti	on D -	Distributions				Current Year
1	Amou	nts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amou	nts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organi	izations, in excess of income from activity			2	
3	Admir	nistrative expenses paid to accomplish exempt purpose	es of supported organization	S	3	
4	Amou	nts paid to acquire exempt-use assets			4	
5	Qualif	ied set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other	distributions (describe in Part VI). See instructions.			6	
7	Total	annual distributions. Add lines 1 through 6.			7	
8	Distrib	outions to attentive supported organizations to which the	he organization is responsive	e		
	(provid	de details in Part VI). See instructions.			8	
9	Distrib	outable amount for 2020 from Section C, line 6			9	
10	Line 8	amount divided by line 9 amount			10	
Secti	on E -	Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distrib	outable amount for 2020 from Section C, line 6				
2	Under	rdistributions, if any, for years prior to 2020 (reason-				
	able c	ause required - explain in Part VI). See instructions.		()		
3	Exces	s distributions carryover, if any, to 2020				
а	From	2015				
b	From	2016				
С	From	2017				
d	From	2018	16			
е	From	2019				
f	Total	of lines 3a through 3e				
g	Applie	ed to underdistributions of prior years				
h	Applie	ed to 2020 distributable amount				
i	Carry	over from 2015 not applied (see instructions)				
j	Rema	inder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distrib	outions for 2020 from Section D,	3			
	line 7:	\$				
а	Applie	ed to underdistributions of prior years				
b	Applie	ed to 2020 distributable amount				
С	Rema	inder. Subtract lines 4a and 4b from line 4.				
5	Rema	ining underdistributions for years prior to 2020, if				
	any. S	Subtract lines 3g and 4a from line 2. For result greater				
	than z	ero, explain in Part VI. See instructions.				
6	Rema	ining underdistributions for 2020. Subtract lines 3h				
	and 4	b from line 1. For result greater than zero, explain in				
	Part V	/I. See instructions.				
7	Exces	ss distributions carryover to 2021. Add lines 3j				
	and 4	c.				
8	Break	down of line 7:				
а	Exces	s from 2016				
b	Exces	s from 2017				
С	Exces	s from 2018				
d	Exces	s from 2019				
е	Exces	s from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Scriedule A	(Form 990 of 990-E2) 2020 THE CONTON DEMICOL OF THEFT THE SUBJECT STATES
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.)
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	<b>(</b> ) •

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number

**2020** 

THE JUNIOR LEAGUE OF TAMPA INC 59-0693993 Organization type (check one): Filers of: Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ 🕨 \$ \_

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

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

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

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

Name of organization Employer identification number

## THE JUNIOR LEAGUE OF TAMPA INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	-isClosU	\$ 80,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	QUOILO TORRESTA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONT	\$\$ <u>42,500.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 7,500.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$5,000.	Person X Payroll

Name of organization

Employer identification number

## THE JUNIOR LEAGUE OF TAMPA INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$6,325.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 6,705.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	-;60911	\$5,315.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Priorie Priorie	\$8,900.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$5,482.	Person X Payroll

Name of organization Employer identification number

#### THE JUNIOR LEAGUE OF TAMPA INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ıl space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$5,225.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <u>COO</u>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	-:60/05/1/	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Pulojic ·	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

## THE JUNIOR LEAGUE OF TAMPA INC

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 600	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

**Employer identification number** 

Name of organization

59-0693993 THE JUNIOR LEAGUE OF TAMPA INC Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF TAMPA INC.

**Employer identification number** 59-0693993

organization answered "Yes" on Form 990, Part IV, line 6.  1 Total number at end of year  2 Aggregate value of contributions to (during year)  3 Aggregate value of contributions to (during year)  4 Aggregate value of prants from (during year)  4 Aggregate value of prants from (during year)  5 Did the organization informal donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control?  6 Did the organization informal 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 impermisable private benefit?  Part III Conservation Easements. Complete if the organization in answered "Yes" on Form 990, Part IV, line 7.  1 Purposels) of conservation easements held by the organization (check all that apply).  □ Preservation of least for public use (for example, recreation or education) □ Preservation for a historically important land area □ Precentation of parts and public use (for example, recreation or education) □ Preservation for a historic structure □ Preservation of least property or public use (for example, recreation or education) □ Preservation of a natural habitat □ Preservation of least property or public use (for example, recreation or education) □ Preservation of a natural habitat □ Preservation or easements and a qualified conservation contribution in like form of a conservation easement and a qualified conservation example or for example, recreation of education or preservation example in the first tax year.  a Total number of conservation easements included in (a) acquired after 725,06, fight not on a historic structure is lead in the National Register  3 Number of conservation easements modified, transferred, released example, repetition of violations, and enforcing conservation during the tax year ►  No Distance of states where property subject to conservation	Pai	t I Organizations Maintaining Donor Advise		s or Accounts Complete if the
Total number at end of year	ı aı			3 of Accounts. Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value of and donors and donor advisors in writing that the assets held in donor advised funds are the organization income all donors and donor advisors in writing that the assets held in donor advised funds are the organization income 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 imperimensible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purposels) of conservation easements held by the organization (check all that apply).  □ Preservation of land for public use (for example, recreation or education) □ Preservation for a listerically important land area □ Preservation of land for public use (for example, recreation or education) □ Preservation of a Preservation of a public structure □ Preservation of the structure   Preservation		organization answered fes on Form 990, Part IV, iiili		(b) Funds and other accounts
2 Aggregate value of contributions to (during year)  4 Aggregate value at end of year  5 Did the organization inform all othors and donor advisors in writing that the assets held in donor advised funds are the organization inform all othors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised only for charitatelpe purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part V, line 7.  1 Purpose(s) of conservation easements held by the organization or education   Preservation of any discription of any public use (for example, recreation or education)   Preservation of any internal habitat   Preservation of open space   Preservation open space   Preservation open space   Preservati		Total as such as at an el of consu	(a) Donor advised funds	(b) I unus and other accounts
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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.  Total number of conservation easements  Number of conservation easements on a certified historic structure included in (a)  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 historic structure listed in the National Register  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 violations, and enforcement of the conservation easements if holds?  No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements and in the property of the period of the property of the conservation easements during the year ▶ \$  Does each conservation easement in property of the requirements of section 170(h)(4)(B)(i))  and section 170(h)(4)(B)(ii)?  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.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the		Protection of natural habitat	Preservation o	f a certified historic structure
day of the tax year.  a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06 and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easements in located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  9 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.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization delected, as permitted under FASB 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 the following amounts relating to these items:  b If the organization received or held 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 X  1 If the organization received or he		Preservation of open space	( )	
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c Number of conservation easements on a certified historic structure included in (a) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)?  9 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.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization elected, as permitted under FASB 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 FASB 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, pro	b	Total acreage restricted by conservation easements		2b
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Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    S   Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)   and section 170(h)(4)(B)(ii)?	6			
<ul> <li>▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)?  9 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.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 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 FASB 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  (ii) Assets included in Form 990, Part X  2 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 FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b \$  Revenue included on Form 990, Part VIII, line 1  Constitution in the required to be reported under FASB ASC 958 relating to these items:  Revenue included on Form 990, Part VIII, line 1  Constitution in the required to be reported under FASB ASC 958 relating to these items:  Revenue included on Form 990, Part VIII, line 1</li></ul>		<b>▶</b>	,	3
<ul> <li>▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)?  9 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.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 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 FASB 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  (ii) Assets included in Form 990, Part X  2 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 FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b \$  Revenue included on Form 990, Part VIII, line 1  Constitution in the required to be reported under FASB ASC 958 relating to these items:  Revenue included on Form 990, Part VIII, line 1  Constitution in the required to be reported under FASB ASC 958 relating to these items:  Revenue included on Form 990, Part VIII, line 1</li></ul>	7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	ation easements during the year
Boos each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?  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.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 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 FASB 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  (ii) Assets included in 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 FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  Section 170(h)(4)(B)(ii) Assets included on Form 990, Part VIII, line 1			, , , , , , , , , , , , , , , , , , ,	3 ,
and section 170(h)(4)(B)(ii)?	8	Does each conservation easement reported on line 2(d) abov	re satisfy the requirements of section 170	O(h)(4)(B)(i)
9 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.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 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 FASB 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 X				
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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 FASB 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  (ii) Assets included in Form 990, Part X  2 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 FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1				
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<ul> <li>(ii) Assets included in Form 990, Part X</li> <li>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 FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part VIII, line 1</li> </ul>		•		<b>&gt;</b> \$
2 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 FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1				
the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1	2			
a Revenue included on Form 990, Part VIII, line 1	_	-		a. ga, provido
	9		•	<b>&gt;</b> \$

032051 12-01-20

Schedule D (Form 990) 2020

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

Sobo	idule D (Form 990) 2020 THE JUNI	OR LEAGUE	ОЕ ТАМРА	TNC		59-06	593993	Dogo <b>2</b>
	rt III Organizations Maintaining Co				or Other			
3	Using the organization's acquisition, accession							<del>- Cu</del>
_	collection items (check all that apply):	, a	,		ar mane eig.		_	
а	Public exhibition	d	Loan or exc	hange progr	am			
b	Scholarly research	е	Other	5 1 5				
С	Preservation for future generations							
4	Provide a description of the organization's co	lections and explain	how they further to	he organizat	ion's exemp	t purpose in Pa	rt XIII.	
5	During the year, did the organization solicit or							
	to be sold to raise funds rather than to be ma	ntained as part of th	e organization's co	ollection?		[	Yes	☐ No
Par	rt IV Escrow and Custodial Arrang	ements. Complet	e if the organizatio	n answered	"Yes" on Fo	rm 990, Part IV	, line 9, or	
	reported an amount on Form 990, Part	X, line 21.						
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ary for contribution	s or other as	ssets not inc	cluded	_	
	on Form 990, Part X?					L	Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the follo	owing table:					
							Amount	
	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
	Did the organization include an amount on Fo					?∟	Yes	├ No
	If "Yes," explain the arrangement in Part XIII.							
Pai	rt V Endowment Funds. Complete if					Thurs was basi		aana baali
	Parimin v of comb balance	(a) Current year 717,860.	(b) Prior year 653,723.	(c) Two yea	7,801.	Three years back 488,709		94,582.
	Beginning of year balance	6,208.	62,521.	/-	5,188.	77,460	+	45,718.
	Contributions	218,307.	1,616.	)	0,734.	31,632	+	48,409.
	Net investment earnings, gains, and losses	210,307.	1,010.		0,734.	31,032	•	40,405.
	Grants or scholarships Other expenditures for facilities		6					
C	and programs							
f	Administrative expenses							
g	End of year balance	942,375.	717,860.	65	3,723.	597,801	. 4	188,709.
2	Provide the estimated percentage of the curre		<u> </u>		, ,		1	,
	Board designated or quasi-endowment		%					
	Permanent endowment	%	<u>-</u> -					
	Term endowment							
	The percentages on lines 2a, 2b, and 2c show	ld equal 100%.						
За	Are there endowment funds not in the posses		tion that are held a	nd administe	ered for the	organization		
	by:	•					Y	'es No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizat	ons listed as require	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the	organization's endov	vment funds.					
Pai	rt VI Land, Buildings, and Equipme							
	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11a. S	See Form 99	0, Part X, lin	e 10.		
	Description of property	(a) Cost or oth	1 ' '	or other	, , ,	ımulated	(d) Book	value
		basis (investme	ent) basis	(other)	depre	ciation		
1a	Land		F 77	2 002	20	0 005	101	100

212,039. Schedule D (Form 990) 2020

181,198.

30,140.

701.

390,885.

194,106.

92,202.

e Other

**b** Buildings

d Equipment

c Leasehold improvements

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

572,083.

224,246.

92,903.

Part VII Investments - Other Securities.			t t t t t t t t t t t t t t t t t t t
Complete if the organization answered "Yes" o	n Form 990. Part IV. line	e 11b. See Form 990. Part X. line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-vear market value
	(-7	(0)	,
(8) 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(3) Other			
-			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or			
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end-	of-year market value
(1)			
(2)		-0,	
(3)		-07	
(4)			
(5)			
(6)			
(7)		1.(()	
(1)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	<del></del>		
Part IX Other Assets.	• • • •	A	
	n Form 000 Port IV line	a 11d See Form 000 Bort V line 15	
Complete if the organization answered "Yes" o	escription	e 11d. See Form 990, Part X, line 15.	(b) Book value
		OMUEDC	942,375.
	PIS UPIN DI	OTHERS	344,373.
(2)			
(3)	<b>V</b>		
(4)	· 		
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	<b>&gt;</b>	942,375.
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) REFUNDABLE ADVANCES			29,001.
(3) FUNDS HELD FOR OTHERS			44,950.
(4)			·
(5)			
(6)			
(7)			
(8)			
(9)	05.)		73,951.
Total. (Column (b) must equal Form 990. Part X. col. (B) line	25.1	▶	13,931.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2020

4c

747,308.

Joing add D	(1 01111 000	,										
Part XI	Recond	ciliation	of Revenue	per	Audited	Financ	cial St	tatements	With	Revenue per Ret	urn	

га	neconclination of nevertide per Addited Financial States	ilelita Mitti Hevelide b	ei netuiii	l.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.		
1	Total revenue, gains, and other support per audited financial statements		1	1,087,545.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			1,087,545.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			1,087,545.
Pa	rt XII Reconciliation of Expenses per Audited Financial State	ments With Expenses	per Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.		
1	Total expenses and losses per audited financial statements		1	747,308.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a	1	
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		_
е	Add lines 2a through 2d	<b>A</b> .	2e	0.
3	Subtract line 2e from line 1		3	747,308.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		

#### Part XIII Supplemental Information.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

**b** Other (Describe in Part XIII.)

c Add lines 4a and 4b

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

#### PART V, LINE 4:

THE JUNIOR LEAGUE OF TAMPA, INC. MAINTAINS AN ENDOWMENT FUND AT THE

COMMUNITY FOUNDATION OF TAMPA BAY, INC. FOR THE LONG TERM BENEFIT OF THE

ORGANIZATION.

#### PART X, LINE 2:

THE LEAGUE IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND CHAPTER 220.13 OF THE FLORIDA STATUTES, RESPECTIVELY. MANAGEMENT IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE THE LEAGUE'S TAX EXEMPT STATUS. THE LEAGUE IS NOT AWARE OF ANY TAX POSITIONS IT HAS TAKEN THAT ARE SUBJECT TO A SIGNIFICANT DEGREE OF UNCERTAINTY. TAX YEARS AFTER JUNE 30, 2018 REMAIN SUBJECT TO

Schedule D (Form 990) 2020

#### **SCHEDULE G**

Department of the Treasury

(Form 990 or 990-EZ)

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

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF TAMPA INC

Employer identification number

THE JUN	TOR LEAGUE OF TAM	IPA INC		39-0093	993
Part I Fundraising Activities required to complete this par	<ul> <li>Complete if the organization ans</li> <li>t.</li> </ul>	wered "Yes" or	n Form 990, Part IV,	line 17. Form 990-EZ	I filers are not
Indicate whether the organization rais	e Solici f Solici g Spec  or oral agreement with any individu art VII) or entity in connection with viduals or entities (fundraisers) pur	tation of non-g tation of gover ial fundraising ual (including o n professional f	overnment grants nment grants events fficers, directors, tru undraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes No	C		
			S		
		60			
		07			
	013				
	7,				
Total  3 List all states in which the organization or licensing.	n is registered or licensed to solic	it contributions	s or has been notified	d it is exempt from re	egistration
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Fori	m 990 or 990-l	<b>EZ</b> . 5	Schedule G (Form 9	90 or 990-EZ) 2020

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events HOLIDAY GIFT (add col. (a) through 1 MARKET LUMINARIES col. (c)) (event type) (event type) (total number) Revenue 3,215. 158,739 161,954. 1 Gross receipts 2 Less: Contributions 158,739. 3,215. 161,954. Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 1,136. 1,136. 2,800. 2,800. **7** Food and beverages 8 Entertainment 10,197. 9 Other direct expenses 18,311. 28,978. 32,914. 10 Direct expense summary. Add lines 4 through 9 in column (d) 129,040. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue . 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: **10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2020

032082 11-25-20

Schedule G (Form 990 or 990-EZ) 2020 THE JUNIOR LEAGUE OF	TAMPA INC	59-0693993 Page 3
11 Does the organization conduct gaming activities with nonmembers?		Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member		
to administer charitable gaming?		Yes No
13 Indicate the percentage of gaming activity conducted in:		
		13a   %
a The organization's facility		
b An outside facility		
14 Enter the name and address of the person who prepares the organization's	s gaming/special events books and reco	oras:
Name ▶		
Address >		
15a Does the organization have a contract with a third party from whom the organization	ganization receives gaming revenue?	Yes No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization	▶\$ and the amo	ount
of gaming revenue retained by the third party > \$		
c If "Yes," enter name and address of the third party:		
,		
Name ▶	~~	
		_
Address ▶		
Addicas	$\sim$	
16 Gaming manager information:		
<b>16</b> Gaming manager information:		
Name N	.01	
Name	-110	
Gaming manager compensation > \$		
Description of services provided	)	
Director/officer Employee Indepe	ndent contractor	
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distribution	s from the gaming proceeds to	
		Yes No
retain the state gaming license? <b>b</b> Enter the amount of distributions required under state law to be distributed	I to other exampt examinations or examp	t in the
	to other exempt organizations or spent	t iii tiie
organization's own exempt activities during the tax year ▶ \$  Part IV Supplemental Information. Provide the explanations requi	wad by Bart I live Ob a shore of (ii) and (ci	), and Dart III lines 0. Ob. 10b
	•	); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional in	nformation. See instructions.	

Schedule G (Form 990 or 990-EZ)

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 59-0693993 THE JUNIOR LEAGUE OF TAMPA INC Part I **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) MIZE FAMILY FOUNDATION CHEERS TO THE 3404 W BAY TO BAY BLVD PUBLIC SERVICE TAMPA, FL 33629 47-2916672 PROGRAM TEACHER GRANT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
				67	
				OX	
			enie		
		· col			
Part IV Supplemental Information. Provide the information	tion required in Part I, lin	e 2; Part III, colum	n (b); and any other a	dditional information.	
SCHEDULE I, PART II:		<u> </u>			
EACH ORGANIZATION RECEIVING GR	ANT FUNDING	IS REQUIR	ED TO REPOR	т	
MEASURABLE OUTCOMES OUTLINED I	N THÊ GRANT	AGREEMENT	AND DESCRI	BE THE	
RESULT AND A DETAILED USE OF T	HE FUNDS.				

# SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

THE JUNIOR LEAGUE OF TAMPA INC

**Employer identification number** 59-0693993

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CHARITABLE. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: PERIOD POVERTY IS REPORTED BY 1 IN 4 WOMEN LIVING IN THE U.S. ACCORDING TO A RECENT SURVEY. THIS MEANS THEY STRUGGLED TO PURCHASE THE PERIOD PRODUCTS NEEDED TO PARTICIPATE FULLY IN LIFE. TO FIGHT THIS ISSUE IN HILLSBOROUGH COUNTY, THE JUNIOR LEAGUE OF TAMPA LAUNCHED ITS ALLIANCE FOR PERIOD SUPPLIES (APS) PROJECT IN 2019. THE PROJECT WORKS WITH A NETWORK OF PARTNERS AROUND TAMPA TO DISTRIBUTE PERIOD SUPPLIES TO MENSTRUATORS IN NEED. EVERY MONTH OUR TEAM PURCHASES, PACKS, AND FULFILLS MONTHLY ORDERS WHICH ARE PROVIDED FREE OF CHARGE TO OUR COMMUNITY PARTNERS. THE ALLIANCE FOR PERIOD SUPPLIES DISTRIBUTED OVER 51,913 ITEMS TO OUR 16 COMMUNITY PARTNERS DURING THE 2020-2021 FISCAL YEAR. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: THE MILO PROJECT PROVIDED OVER 5500 BOOKS TO OUR COMMUNITY PARTNERS DURING THE 2020-2021 FISCAL YEAR.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

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

THE JUNIOR LEAGUE OF TAMPA INVESTS THOUSANDS OF VOLUNTEER HOURS IN

COMMUNITY AGENCIES AND OTHER PROGRAMS THAT SUPPORT OUR ISSUES IN AREAS

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization
THE JUNIOR LEAGUE OF TAMPA INC

Employer identification number
59-0693993

OF CHILD WELFARE AND EDUCATION.

EXPENSES \$ 449,241. INCLUDING GRANTS OF \$ 44,517. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION HAVING APPROXIMATELY 1900
MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE OFFICERS AND BOARD OF DIRECTORS OF THE LEAGUE ARE ELECTED ANNUALLY BY
THE MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7B:

THE MEMBERSHIP MUST VOTE ON ANY CHANGES TO ITS BY-LAWS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION'S FINANCE DIRECTOR REVIEWED THE 990 IN DETAIL. A COPY OF THE 990 WAS MADE AVAILABLE TO THE BOARD OF DIRECTORS FOR THEIR REVIEW PRIOR TO APPROVAL. ALL QUESTIONS AND COMMENTS PROPOSED BY THE BOARD MEMBERS WERE CONSIDERED BEFORE THE 990 WAS FINALIZED.

FORM 990, PART VI, SECTION B, LINE 12C:

EVERY BOARD MEMBER SIGNS A CONFLICT DISCLOSURE ACKNOWLEDGEMENT FORM YEARLY.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST STATEMENTS AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XII, LINE 2C:

Name of the organization  THE JUNIOR LEAGUE OF TAMPA INC	Employer identification number 59-0693993
THE ORGANIZATION'S FINANCE DIRECTOR ASSUMES RESPONSIBILIT	Y FOR THE
SELECTION AND ENGAGEMENT OF INDEPENDENT AUDITORS. THE COM	MITTEE IS KEPT
ABREAST OF ANY SIGNIFICANT AUDIT FINDINGS AND REVIEWS AND	APPROVES THE
AUDIT REPORT PRIOR TO ITS PRESENTATION TO THE FULL BOARD.	
<u>''</u> C	
00,	

## Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-0047

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

filing of t	his form, visit www.irs.gov/e-file-providers/e-file-for-chari	ities-and-r	non-profits.			. •		
Autom	atic 6-Month Extension of Time. Only subm	nit origin	al (no copies needed).					
All corpo	rations required to file an income tax return other than Fe Form 7004 to request an extension of time to file incom	orm 990-T	(including 1120-C filers), partnership	s, REMIC	Ss, and tru	usts		
Type or								
print THE JUNIOR LEAGUE OF TAMPA INC 59-0693993								
File by the due date for filing your return. See R7 COLUMBIA DR								
instructions	TAMPA, FL 33606			7				
Enter the	Return Code for the return that this application is for (fil	e a separa						
Applicat	ion	Return	Application			Return		
Is For		Code	Is For			Code		
	O or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 990		02	Form 1041-A			08		
	20 (individual)	03	Form 4720 (other than individual)			09		
Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069						10		
Form 990-T (sec. 401(a) or 408(a) trust)         05         Form 6069           Form 990-T (trust other than above)         06         Form 8870					11			
Telep	ooks are in the care of ► 87 COLUMBIA DR hone No. ► (813)254-1734 organization does not have an office or place of business is for a Group Return, enter the organization's four digit If it is for part of the group, check this box ►	TA s in the Ur Group Exe	emption Number (GEN) If	this is fo	r the who	le group, check this		
the	the organization named above. The extension is for the organization's return for:  Calendar year or X tax year beginning JUL 1, 2020 , and ending JUN 30, 2021 .							
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  3a \$					0.			
	his application is for Forms 990-PF, 990-T, 4720, or 6069			3b	\$	0.		
estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$  c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by								
	ng EFTPS (Electronic Federal Tax Payment System). See	•		3c	\$	0.		
	If you are going to make an electronic funds withdrawal							
	For Privacy Act and Panerwork Reduction Act Notice	soo instr	uctions		For	m <b>8868</b> (Rev. 1-2020)		

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

Form **8868** (Rev. 1-2020)