TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

MAY 31, 2019

THE JUNIOR LEAGUE OF CHICAGO, INC. 1447 N. ASTOR STREET CHICAGO, IL 60610
WARADY & DAVIS LLP 1717 DEERFIELD RD SUITE 300S DEERFIELD, IL 60015
NOT APPLICABLE
NOT APPLICABLE
NOT APPLICABLE
NOT APPLICABLE
THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-EO TO US OCTOBER 15, 2019
FORM 8879-EO SHOULD BE RETURNED TO THE ATTENTION OF LISA PORTER AT 847-267-9696 (FAX), LPORTER@WARADYDAVIS.COM (EMAIL), OR THROUGH THE WARADY & DAVIS PORTAL.

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

OMB No. 1545-1878

For calendar year 2018, or fiscal year beginning JUN 1 , 2018, and ending MAY 31

2018

Department of the Treasury Internal Revenue Service

Name of exempt organization

Employer identification number

-5474

, 2019

Name and title of officer	
DELANE HELDT	
PRESIDENT	

Part I Type of Return and Return Information (Whole Dollars Only)

THE JUNIOR LEAGUE OF CHICAGO, INC.

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	659,409.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here F D b Total tax (Form 1120-POL, line 22)	Зb	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X lauthorize WARADY & DAVIS LLP	to enter my PIN 20452
ERO firm name	Enter five numbers, but do not enter all zeros
as my signature on the organization's tax year 2018 electronically filed return. If is being filed with a state agency(ies) regulating charities as part of the IRS Fed/s enter my PIN on the return's disclosure consent screen.	
As an officer of the organization, I will enter my PIN as my signature on the organ indicated within this return that a copy of the return is being filed with a state ag program, I will enter my PIN on the return's disclosure consent screen.	5
Officer's signature	Date ►
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN.	36999512738 Do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 2018 electro confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , <i>e-file</i> Providers for Business Returns.	, , , , , , , , , , , , , , , , , , , ,
ERO's signature	Date ►
ERO Must Retain This Form - See	Instructions
Do Not Submit This Form to the IRS Unless	Requested To Do So
LHA For Paperwork Reduction Act Notice, see instructions.	Form 8879-EO (2018)
823051 10-26-18	

Forn	9	90	Return of Organization Exempt F Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue			OMB No. 1545-0047
Department of the Treasury Do not enter social security numbers on this form as it may be made public.					Open to Public	
		enue Service	► Go to www.irs.gov/Form990 for instructions and ar year, or tax year beginning JUN 1, 2018 and e		AY 31, 2019	Inspection
	heck if		organization	ending 11	D Employer identified	cation number
ap 						
	Addre chang Name chang	THE	JUNIOR LEAGUE OF CHICAGO, INC.		** *	**5474
\vdash	Initial		usiness as and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	_return Final return	1117	N. ASTOR STREET	100m/Suite		664-4462
	termir ated	n- City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,175,570.
	Amen return		AGO, IL 60610		H(a) Is this a group re	
	Applie tion pendi		nd address of principal officer: DELANE HELDT		for subordinates	
<u> </u>	-	SAME	AS C ABOVE		H(b) Are all subordinates in	
		empt status:	\underline{X} 501(c)(3) 501(c) () (insert no.) 4947(a)(1) o JLCHICAGO • ORG	or 527	If "No," attach a H(c) Group exemptior	list. (see instructions)
			X Corporation Trust Association Other ►	I Year		State of legal domicile: IL
	rt I	Summary		Lioui		
6	1	Briefly describ	e the organization's mission or most significant activities: COMMU	JNITY	IMPROVEMENT	
Revenue Activities & Governance	8 9 10 11 12	Number of vor Number of inc Total number Total number Total unrelated Net unrelated Contributions Program servi Investment inc Other revenue Total revenue	Image: Provide the control of the c		3 4 5 6 7a 7b Prior Year 480,101. 0. 36,738. 213,906. 730,745.	11 11 6 1281 0. 0. Current Year 488,789. 0. 52,676. 117,944. 659,409.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14		to or for members (Part IX, column (A), line 4)		0.	0.
ses			r compensation, employee benefits (Part IX, column (A), lines 5-10)		323,821. 0.	285,241.
Expense			undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) 126,52	20.	•••	0.
Ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		347,907.	334,772.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		671,728.	620,013.
	19		expenses. Subtract line 18 from line 12		59,017.	39,396.
s or Ices				Be	ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (F			2,208,284.	2,218,664.
et A nd E	21		(Part X, line 26)		259,685.	259,771.
	22		fund balances. Subtract line 21 from line 20		1,948,599.	1,958,893.
	rt II			and state-	anto and to the heat of m	knowledge and ballef it is
			l declare that I have examined this return, including accompanying schedules . Declaration of preparer (other than officer) is based on all information of wh			y knowledge and beller, it is
,	00110			ιση μισμαισι		

Sign	Signature of officer			Date			
Here	DELANE HELDT, PRESIDEN	T					
	Type or print name and title						
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN			
Paid	SUSAN GREGGO			self-employed P00595460			
Preparer	Firm's name 🕒 WARADY & DAVIS L			Firm's EIN **-***0602			
Use Only	Firm's address 1717 DEERFIELD R	D SUITE 300S		-			
DEERFIELD, IL 60015 Phone no. (847) 267-960							
May the I	May the IRS discuss this return with the preparer shown above? (see instructions)						
832001 12-3	2001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018)						

orm	990 (2018) THE JUNIOR LEAGUE OF CHICAGO, INC. **-**5474 F	ag
Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	_
	METROPOITAN ORGANIZATION OF WOMEN COMMITTED TO PROMOTING VOLUNTEERISM	-
	DEVELOPING THE POTENTIAL OF WOMEN AND IMPROVING THE COMMUNITY THROUGH THE EFFECTIVE ACTION AND LEADERSHIP OF TRAINED VOLUNTEERS. THE JUNIOF	
	LEAGUE OF CHICAGO, INC. (JLC) REACHES OUT TO WOMEN OF ALL RACES,	<u> </u>
2	Did the organization undertake any significant program services during the year which were not listed on the	
-	prior Form 990 or 990-EZ?	ζ
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	ζ
	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.	1
4a	(Code:) (Expenses \$ 132,055. including grants of \$) (Revenue \$	
iu	THE JLC'S RESOURCES WERE USED IN FURTHERANCE OF ITS MISSION TO PROVI)E
	LEADERSHIP TRAINING AND SERVICE TO THE COMMUNITY THROUGH TRAINED	
	VOLUNTEERS. MEMBER VOLUNTEERS CONTRIBUTED ROUGHLY 126,000 OF SERVICE	
	HOURS IN VARIOUS ACTIVITIES IN PURSUIT OF LEADERSHIP TRAINING AND	
	COMMUNITY SERVICE.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
	Other program services (Describe in Schedule O.)	
4d		
	(Expenses \$ including grants of \$) (Revenue \$)	
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 132,055. Form 990	12

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Earm	aan	(2018)	۱.
	330	12010	

Part IV Checklist of Required Schedules

THE JUNIOR LEAGUE OF CHICAGO, INC.

			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	Х	
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			
	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,			37
	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			37
	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?			37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	~	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
	Schedule D, Parts XI and XII	12a		
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	104		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	120		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
a	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	14-		х
16	or more? If "Yes," complete Schedule F, Parts I and IV	14b		- 22
15		15		х
16	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		- 23
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17		17		х
12	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			- 43
18	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
19		19		х
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	19 20a		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		- 43
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		<u> </u>
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
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Form **990** (2018)

Form	990	(2018)	
	330	(2010)	

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			_ _
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			x
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2-10		
200	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, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
01	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	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
35a	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	-		
00	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	х	
Par	Note. All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	71	
	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		.03	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
832004	12-31-18	Form	990	(2018)
	Δ			

018)	\mathbf{THE}	JUNIOR	LEAGUE	OF	CHICAGO,	INC.
Statements R	legardi	ing Other I	RS Filings a	and ⁻	Fax Complian	ce (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. 2a 6 b If at least one is reported on line 2a, did the organization file al required federal employment tax returns? 2 Note. If the sum of line 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 b Did the organization have unrelated business greats in them 250, you may be required to e-file (see instructions) 3 d Max any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account is a foreign country (such as a bark account, securities account, or other financial account)? 4 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization neither a greater than \$100,000, and did the organization size annual gross receipts that are normally greater than \$100,000, and did the organization size annual gross receipts that are normally greater than \$100,000, and did the pare)? 6 0 Did any taxation include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 6 0 Did the organization neither doorn of the value of the goods or services provided 7 7 1 H**s, 'iddit the organization an express statement that such contract? 7 1 Did the	Yes	s No
b If at least one is reported on line 2a, did the organization file all required to e-file (see instructions) 2 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 b If Yes,' hast filed a form 990 T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 d At any time during the calendary year, dit the organization have an interest in, or a signature or other authority over, a 4 d At any time during the calendary year, dit the organization have an interest in, or a signature or other authority over, a 4 d If Yes,' nent the name of the foraign country. E 5 Be instructions for tiling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Be was the organization a party to a prohibited tax shelter transaction? 5 5 Do bit any requirezion have annual gross receipts that are normaby greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 0 If Yes,' did the organization new any gross accounties and any tarty for goods and services provided to the pary? 7 1 If Yes,' did the organization new and gross accounties a contribution and partly for goods and services provided to the pary? 7 1 If Yes,' did the organization new any dross f		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-fie</i> (see instructions) 3 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 bit 1*se, "has it filed a Form 990 T for this year? If 'No' to line 30, provide an explanation in Schedule 0 3 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 is foreign country.] ► 4 5e instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 6 if '*se' in line 5 aro 55, dift the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5 6 if '*se' in line 5 aro 55, dift the organization that it was or is a party to a prohibited tax shelter transaction? 6 7 if '*se,' ridit the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 9 Uf the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 9 til '*se,' did the organization notify the donor of the value of the goods or services provide? 7 9 til '*se,' did the organization notify the donor of the value of the goods or services provide? 7 9 tif '*se,' ridit th		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 b If Yes,* has it filed a Form 990 T for this year? If No* to line 3b, provide an explanation in Schedule 0 3 d At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account is for fing requirements for FinGEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 4 b If Yes,* inter the name of the foreign country (>> 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5 b Did any taxable party notify the organization tille Form 888617 5 c If Yes,* to line 5a or 5b, did the organization 180 Form 888617 5 d If Yes,* to line 5a or 5b, did the organization 180 Form 888617 6 7 Organization tax emulagross receive deductible contributions repress statement that such contributions orgits were not tax deductible? 6 7 Organization neale any sametin excess of 375 made party as a contribution ang try for goods and services provided to the payor? 7 d If Yes,* idid the organization notid, we the donor of the value of the goods or services provided? 7 d If Yes,* indicatathe number of Forms 8282 filed during the	5 X	
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Note. See the instructions for additional information the organization must report on Schedule O. Image: Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
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b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> 14 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? 14		x
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?		+**
excess parachute payment(s) during the year?		+
	5	x
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?	3	X
If "Yes," complete Form 4720, Schedule O.		

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Form 990 (2018)

Part V

Form 990	(2018)
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Check if Schedule O contains a response or note to any line in this Part VI

X

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 in Schedule O. See instructions.

			1	-	Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1	1		
	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 in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with	any other			
	officer, director, trustee, or key employee?		-	2		
3	Did the organization delegate control over management duties customarily performed by or under the					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		
	Did the organization become aware during the year of a significant diversion of the organization's ass			5		
	Did the organization have members or stockholders?			6	Х	
	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	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	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	r bv th	e followina:			
	The governing body?	-	-	8a	x	
	Each committee with authority to act on behalf of the governing body?			8b	x	\vdash
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real					\vdash
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Re					_
					Yes	
0a	Did the organization have local chapters, branches, or affiliates?			10a		Ē
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
~	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	x	\vdash
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	y 5010		114		\vdash
				12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		flicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye			12.0		╞╴
	in Schedule O how this was done			12c	x	
	Did the organization have a written whistleblower policy?			13	X	┢
	Did the organization have a written document retention and destruction policy?			14	X	┢
	Did the process for determining compensation of the following persons include a review and approva			14		\vdash
5		andyin	dependent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45-		
	The organization's CEO, Executive Director, or top management official			15a		
α	Other officers or key employees of the organization			15b		Ľ
6.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen			40-		
	taxable entity during the year?			16a		Ľ
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ			10		
	exempt status with respect to such arrangements?			16b		1
	tion C. Disclosure					
	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright IL		T (0)			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, an	d 990	-1 (Section 501(c)(3)s only) availa	abl
	for public inspection. Indicate how you made these available. Check all that apply.	in 0-1				
~	X Own website Another's website J Upon request Other (explain		,	L C		
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	nflict o	T interest policy, a	nd finan	cial	
-	statements available to the public during the tax year.					
0	State the name, address, and telephone number of the person who possesses the organization's bound SACEE BURNES - $312-664-4462$	oks ar	d records 🕨			
	1447 N ASTOR ST, CHICAGO, IL 60610					

Part VII	Со	mpensation	of Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensat	ed
	Em	ployees, an	d Independe	ent Contra	ctors				

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 is former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos	ition		one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week (list any	<u> </u>						from the	from related organizations	other compensation
	hours for	Individual trustee or director				p		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			en sate		(W-2/1099-MISC)	· · · · · · · · · · · · · · · · · · ·	organization
	organizations	al trus	nal tri		loyee	e				and related
	below	lividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DELANE HELDT	line)	Ĕ	lns	æ	, A	e <u>H</u>	ية.			
PRESIDENT	23.00	x		x				0.	0.	0.
(2) BLYTHE NEWTON	20.00							0.	0.	
EXECUTIVE VICE PRESIDENT OF OPERATIO	20.00	x		x				0.	0.	0.
(3) CHRISTINE PENDLETON	20.00									
SENIOR VICE PRESIDENT OF STRATEGY		x		x				0.	0.	0.
(4) CASSANDRA GRAY	20.00	<u> </u>					┢		•••	
TREASURER		x		x				0.	Ο.	0.
(5) JENNIFER MASON	10.00									
RECORDING SECRETARY		x		x				0.	0.	0.
(6) BETH BENTLEY	1.00									
BOARD MEMBER AT LARGE		Х						0.	0.	0.
(7) LYNN BRENS	1.00									
BOARD MEMBER AT LARGE		Х						0.	0.	0.
(8) VANESSA KOSLOSKI	20.00									
FUNDRAISING DIRECTOR	1	Х						0.	0.	0.
(9) JENNIFER MILLS	1.00								0	0
DIVERSIFICATION DIRECTOR	1 00	X						0.	0.	0.
(10) CAITLIN SPEAR	1.00	.,							0	0
BOARD MEMBER AT LARGE	1 00	X						0.	0.	0.
(11) TRACY WALTER	1.00	v						0.	0.	0
ADVOCACY DIRECTOR	1.00	X						0.	0.	0.
(12) CARRIE OTTO BOARD MEMBER AT LARGE	1.00	x						0.	0.	0.
(13) LAURA BETH WOLFE	1.00	^						0.	0.	0.
NOMINATING DIRECTOR	1.00	x						0.	0.	0.
								0.	0.	
							-			
		1								
		1								
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Form 990 (2018)

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		THE JUNI	<u> DR LEAGU</u>	JE	OI	<u>?</u> (CH	ICZ	AGC	D, INC.	**_*	<u>**5</u>	474	Pa	ge 8
Par	t VII Section A. Officers,	Directors, Trus	tees, Key Em	ploy	rees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)				
	(A) Name and title		(B) Average hours per week (list any hours for related organizations	tee or director gigo diversion	not c , unle cer an	ss pe	ition more rson i irecto	Highest compensated single set of the set of	h an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organization (W-2/1099-MIS	on J S	(F) cimated ount o other censat om the anizatio	of ion : on	
			below line)	Individual	In stitutional trustee	Officer	Key employee	Highest co employee	Former				orga	nizatio	ns
										0.		0.			0.
с	Sub-total Total from continuation s Total (add lines 1b and 1c Total number of individuals	heets to Part V	II, Section A		·····			 		0.0.	.000 of reportab	0.			0.
	compensation from the org							_,			,			Yes	0 No
3	Did the organization list an line 1a? If "Yes," complete	•					•			•		[3	163	x
4	For any individual listed on and related organizations g	l line 1a, is the su greater than \$15	um of reportab 0,000? <i>If</i> "Yes,	le co " co	ompe mple	ensa ete S	atior Sche	n and edule	d oth e <i>J f</i> e	ner compensation from for such individual	the organization		4		x
5	Did any person listed on lir rendered to the organization		-				-			-			5		Х
	tion B. Independent Contr										•				
1	Complete this table for you the organization. Report co	-	-	-								ipensa	ation fr	om	
		(A) ne and business			ONE					(B) Description of s		C	(C omper		I
2	Total number of independe \$100,000 of compensation			not li	mite	d to		se lis)	sted	above) who received m	nore than				
													Form S	990 (2	018)

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<u>Form</u>	n 990 (AGUE OF	CHICAGO, I	NC.	**-***5	474 Page 9
	rt VII	I Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any lin		(5)	(2)	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
Gra	b	Membership dues		327,895.				
ts, (Am	с	Fundraising events	1c	18,569.				
Gif	d	Related organizations	1d					
Sim,		Government grants (contribut	· · · · · · · · · · · · · · · · · · ·					
er S	f	All other contributions, gifts, gran		4 4 9 9 9 5				
Э Б Т Г		similar amounts not included above		142,325.				
Contributions, Gifts, Grants and Other Similar Amounts	-	Noncash contributions included in lines			100 700			
<u>a O</u>	h	Total. Add lines 1a-1f			488,789.			
n	0.0			Business Code				
Program Service Revenue	2 a							
Ser	b c							
evel evel	d							
Be	e							
Pr		All other program service reve	enue					
	g							
	3	Investment income (including						
		other similar amounts)			26,713.			26,713.
	4	Income from investment of tax						
	5	Royalties						
			(i) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other				
	/ a	assets other than inventory	421,975.					
	ь	Less: cost or other basis						
		and sales expenses	396,012.					
	с	Gain or (loss)						
		Net gain or (loss)		►	25,963.			25,963.
e		Gross income from fundraising						
enu		including \$ 18,5	69. of					
Sev		contributions reported on line						
Other Revenue		Part IV, line 18		221,750.				
Oth		Less: direct expenses		120,149.	101 001			101 001
		Net income or (loss) from func		····· ►	101,601.			101,601.
	9 a	Gross income from gaming ac	TIVITIES. See	11 695				
		Part IV, line 19	a	0.				
		Less: direct expenses Net income or (loss) from gam			11,685.			11,685.
		Gross sales of inventory, less			,000.			,000.
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu	е	Business Code				
	11 a	MISCELLANEOUS I	NCOME	900099	4,658.	4,658.		
	b							
	с			ļ]				
		All other revenue						
		Total. Add lines 11a-11d			4,658.		0	165 060
	12	Total revenue. See instructions		►	659,409.	4,658.	0.	
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THE JUNIOR LEAGUE OF CHICAGO, INC.

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).

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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,		11 605	0 - 1 0 -	
	trustees, and key employees	77,500.	11,625.	27,125.	38,750
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 () 0 ()	0.000	00.050	42 100
7	Other salaries and wages	163,262.	26,897.	93,256.	43,109
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)		2 700		0.000
9	Other employee benefits	23,724.	3,796.	11,862.	8,066
0	Payroll taxes	20,755.	3,321.	10,377.	7,057
1	Fees for services (non-employees):				
а	Management				
b	Legal	21 500		21 500	
С	Accounting	21,500.		21,500.	
d	, , , , , , , , , , , , , , , , , , ,				
e	° / H	7 0/7		7 0 / 7	
f	Investment management fees	7,847.		7,847.	
g		51 122		51 1 22	
	column (A) amount, list line 11g expenses on Sch 0.)	51,123. 1,601.		51,123.	
12	Advertising and promotion	29,803.	196.	29,186.	421
3	Office expenses	9,476.	1,516.	4,738.	3,222
4	Information technology	9,470.	1,510.	4,750.	J, 444
5	Royalties	26,217.	8,917.	13,758.	3,542
6		3,366.	2,678.	688.	5,542
7	Travel	5,500.	2,070.	000.	
8	Payments of travel or entertainment expenses				
~	for any federal, state, or local public officials	745.	119.	373.	253
9	Conferences, conventions, and meetings	/4.5•	• • • ± ± •	575•	200
20	Interest	51,567.		51,567.	
!1 	Payments to affiliates	32,898.	5,264.	16,449.	11,185
22	Depreciation, depletion, and amortization	32,090.	5,204.	16,051.	10,915
	Other expenses. Itemize expenses not covered	52,102.	5,150.	10,051.	10,913
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
~	amount, list line 24e expenses on Schedule 0.) COMMUNITY PROJECTS	62,590.	62,590.		
a h	MEMBER EXPENSES	3,261.	02,550.	3,261.	
D A	DUES	600.		600.	
c d	MISCELLANEOUS	76.		76.	
		,		70•	
e 95	All other expenses	620,013.	132,055.	361,438.	126,520
25 26	Joint costs. Complete this line only if the organization		152,055.	501,4500	-20,520
.0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Check here from the following SOP 98-2 (ASC 958-720)				
					Form 990 (20 ⁻

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11131009 758396 00014730000 2018.04030 THE JUNIOR LEAGUE OF CHICAG 00014731

10

Form **990** (2018)

11131009	758396	00014730000	2018.04

THE JUNIOR LEAGUE OF CHICAGO, INC.

-5474 Page 11

		Check if Schedule O contains a response or not	e to any	line in this Part X			
		·			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			570,312.	1	500,792.
	2	Savings and temporary cash investments			227,751.	2	280,173.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated emp	oloyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	. ,	• • • •			
		employers and sponsoring organizations of sect				-	
Assets	_	employees' beneficiary organizations (see instr).				6	
Ass	7	Notes and loans receivable, net				7	
-	8	Inventories for sale or use			37,155.	8 9	9,335.
	9	Prepaid expenses and deferred charges	 I I	·····	57,155.	9	5,555.
	10a		100	685,096.			
	h	basis. Complete Part VI of Schedule D Less: accumulated depreciation		404,901.	304,932.	100	280,195.
	11	Investments - publicly traded securities			1,068,134.	11	1,148,169.
	12	Investments - other securities. See Part IV, line 1		_,,	12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equa			2,208,284.	16	2,218,664.
	17	Accounts payable and accrued expenses		· · · · · · · · · · · · · · · · · · ·	21,645.	17	23,621.
	18	Grants payable				18	
	19	Deferred revenue			238,040.	19	236,150.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV of	f Schedule D		21	
es	22	Loans and other payables to current and former	officers	, directors, trustees,			
Liabilities		key employees, highest compensated employee					
iab.		Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24).	Complete Part X of			
		Schedule D			259,685.	25	259,771.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958			259,005.	26	239,111.
ß		complete lines 27 through 29, and lines 33 an					
je je	27	Unrestricted net assets			1,948,599.	27	1,958,893.
alar	28	Temporarily restricted net assets		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	28		
Fund Balances	29				29		
Ĩ.		Organizations that do not follow SFAS 117 (A					
ъ Г		and complete lines 30 through 34.	, -				
ţ	30	Capital stock or trust principal, or current funds			30		
SSE	31	Paid-in or capital surplus, or land, building, or ec				31	
Net Assets or	32	Retained earnings, endowment, accumulated in				32	
Ž	33	Total net assets or fund balances			1,948,599.	33	1,958,893.
	34	Total liabilities and net assets/fund balances			2,208,284.	34	2,218,664.
							Form 990 (2018)

Form 990 (2018)

Part X Balance Sheet

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4030 THE JUNIOR LEAGUE OF CHICAG 00014731

Form	1990 (2018) THE JUNIOR LEAGUE OF CHICAGO, INC.	**.	-***547	4 Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			109.
2	Total expenses (must equal Part IX, column (A), line 25)	2)13.
3	Revenue less expenses. Subtract line 2 from line 1	3			396.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,9		
5	Net unrealized gains (losses) on investments	5		29,1	L02.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,9	58,8	393.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			<u></u>	X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	s,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,		
	review, or compilation of its financial statements and selection of an independent accountant?			X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (D.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	ıdit		
	Act and OMB Circular A-133?				X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
			For	~ 00 0	(2018)

SCHEDULE A	
------------	--

(Form	990	or	990-E	7
	330	UI.	330-L	<u> </u>

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.

OMB No. 1545-0047
2018
Open to Public

	nt of the Treasury evenue Service		► Go to www.irs.gov	Open to Public Inspection					
Name	of the organizat	-	Go to www.iis.go			ie ialest i	mormation.	Employer	identification number
Nume e	or the organizat		TINTOR LEA	GUE OF CHICA	CO T	NC			*-**5474
Part	I Reason			All organizations must co			e instruction		5171
				(For lines 1 through 12, o					
1				on of churches describe	,	,			
	- · · ·						I)(A)(I).		
2 3				Attach Schedule E (Forn			::)		
4				anization described in s onjunction with a hospita				Viii) Entor	the beenital's name
4	city, and stat	-	ation operated in co	injunction with a nospita	i describer	J III SECIIO			the hospital's hame,
5	_	-	or the benefit of a co	ollege or university owne	d or opera	ted by a d	overnmental	unit descrit	ned in
5	-	-	Complete Part II.)	hege of university owned		led by a g	oveninentai		
6				mental unit described in	section 1	70(h)(1)(A)	(v)		
7 X	-			antial part of its support				the general	nublic described in
/ [0		omplete Part II.)	antial part of its support	ion a gov	erninenta		ule general	
8				(1)(A)(vi). (Complete Par	+ 11)				
9				l in section 170(b)(1)(A)	-	ed in conii	inction with a	land-grant	college
•				culture (see instructions)					
	university:			,		,	,,		<u>,-</u> -:
10		ion that norma	Illv receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons. member	ship fees, a	and gross receipts from
	•			ect to certain exceptions,	•				•
				e (less section 511 tax) fr					
			mplete Part III.)	(, , , , , , , , , , , , , , , , , , ,			5	5	,
11 🗌	_		· ,	sively to test for public sa	afety. See	section 50	09(a)(4).		
12				sively for the benefit of, to				arry out the	e purposes of one or
				ed in section 509(a)(1) o					
	lines 12a thro	ough 12d that	describes the type of	of supporting organizatio	n and con	nplete line:	s 12e, 12f, ar	id 12g.	
а [Type I. A s	upporting orga	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s),	typically by	/ giving
	the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting
	organizatio	n. You must c	complete Part IV, Se	ections A and B.					
ь	Type II. As	supporting org	anization supervised	d or controlled in connec	tion with i	ts support	ed organizati	on(s), by ha	aving
	control or r	nanagement c	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or man	age the sup	oported
_	organizatio	n(s). You mus	t complete Part IV,	Sections A and C.					
c	Type III fu	nctionally inte	grated. A supportin	g organization operated	in connec	tion with,	and functiona	ally integrat	ed with,
_	its support	ed organizatio	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.		
d	Type III no	n-functionally	y integrated. A supp	oorting organization oper	ated in co	nnection \	with its suppo	orted organ	ization(s)
	that is not	functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement ar	id an attent	iveness
_	requiremer	nt (see instruct	ions). You must cor	mplete Part IV, Sections	s A and D,	, and Part	۷.		
e	Check this	box if the orga	anization received a	written determination fro	om the IRS	that it is a	а Туре I, Туре	e II, Type III	
			•••	onally integrated support					
f E	nter the number	of supported of	organizations						
g P		-	about the supporte		(iv) Is the orac	nization listed			
	(i) Name of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	inization listed ing document?	(v) Amount of support (see i	-	(vi) Amount of other support (see instructions)
	organization	1		above (see instructions))	Yes	No	Support (See 1		
Total									
Total									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 13

Schedule A (Form 990 or 990-EZ) 2018 THE JUNIOR LEAGUE OF CHICAGO, INC.

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	471,258.	521,944.	454,215.	469,589.	488,789.	2,405,795.
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	471,258.	521,944.	454,215.	469,589.	488,789.	2,405,795.
5		-				-	· · ·
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						2,405,795.
	ction B. Total Support						_,,
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	471,258.	521,944.	454,215.	469,589.	488,789.	2,405,795.
8	Gross income from interest.		-				, ,
-	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	14,039.	14,810.	16,316.	19,187.	26,713.	91,065.
9						,	
5	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	•	1,432.	1,432.	335.	1,518.	4,658.	9,375.
44	assets (Explain in Part VI.) Total support. Add lines 7 through 10	1,1521	1/1521		1/5101	1/0501	2,506,235.
		ata (aga instructi	ono)			12 1	,163,196.
	Gross receipts from related activities, First five years. If the Form 990 is fo			d fourth or fifth to			,105,150.
13	-	-	s inst, second, triir	u, iourtii, or iiitii ta	ax year as a sectio	11 301(0)(3)	
Sec	organization, check this box and stor ction C. Computation of Publ		rcentage				
	Public support percentage for 2018 (column (f))		14	95.99 %
	Public support percentage from 2017					15	<u> </u>
	33 1/3% support test - 2018. If the						
100	stop here. The organization qualifies	•		•		•	
h	33 1/3% support test - 2017. If the d						
	and stop here. The organization qua						
17-	10% -facts-and-circumstances tes						
178							
	and if the organization meets the "fac			-	-	-	
۲.	meets the "facts-and-circumstances"						
D	10% -facts-and-circumstances tes						
	more, and if the organization meets the						
10	organization meets the "facts-and-cire						
18	Private foundation. If the organization	n dia not check a	box on line 13, 16	a, 100, 17a, or 17t			
					Sche	edule A (Form 990	UI 330-EZ) 2018

832022 10-11-18

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Schedule A (Form 990 or 990 EZ) 2018 THE JUNIOR LEAGUE OF CHICAGO, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>		<u> </u>	<u> </u>	504()(2)	l
14	First five years. If the Form 990 is for	the organization'	s first, second, th	ra, tourth, or fifth t	tax year as a secti	on 501(c)(3) organiz	zation,
0	check this box and stop here	in Cromment De					▶∟
	ction C. Computation of Publ		•				
	Public support percentage for 2018 (•	column (f))		15	%
	Public support percentage from 2017					16	%
	ction D. Computation of Inves		-				
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
1 9a	1 33 1/3% support tests - 2018. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line ⁻	17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qua	ifies as a publicly	supported organiz	ation	▶∟
b	33 1/3% support tests - 2017. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and s	t op here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t	this box and see in	structions	>
	23 10-11-18					nedule A (Form 990	
				15		-	-
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11131009 758396 00014730000

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

832024 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 THE JUNIOR LEAGUE OF CHICAGO, INC. Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		103	
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	-		
0	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	•		
а	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	ŕ 1	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
83202	5 10-11-18 Schedule A (Form 9	90 or 99	90-EZ)	2018
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Schedule A (Form 990 or 990-EZ) 2018 THE JUNIOR LEAGUE OF CHICAGO, INC.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All

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

Section	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Ne	et short-term capital gain	1		
2 Re	ecoveries of prior-year distributions	2		
3 Ot	her gross income (see instructions)	3		
4 Ad	dd lines 1 through 3	4		
5 De	epreciation and depletion	5		
6 Po	prtion of operating expenses paid or incurred for production or			
со	llection of gross income or for management, conservation, or			
ma	aintenance of property held for production of income (see instructions)	6		
7 Ot	her expenses (see instructions)	7		
8 Ad	Jjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section	B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Ag	gregate fair market value of all non-exempt-use assets (see			
ins	structions for short tax year or assets held for part of year):			
a Av	rerage monthly value of securities	1a		
b Av	rerage monthly cash balances	1b		
c Fa	ir market value of other non-exempt-use assets	1c		
d To	tal (add lines 1a, 1b, and 1c)	1d		
e Di	scount claimed for blockage or other			
fac	ctors (explain in detail in Part VI):			
2 Ac	equisition indebtedness applicable to non-exempt-use assets	2		
3 Su	ubtract line 2 from line 1d	3		
4 Ca	ash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
se	e instructions)	4		
5 Ne	et value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Mu	ultiply line 5 by .035	6		
7 Re	ecoveries of prior-year distributions	7		
8 Mi	inimum Asset Amount (add line 7 to line 6)	8		
Section	C - Distributable Amount			Current Year
1 Ad	ljusted net income for prior year (from Section A, line 8, Column A)	1		
2 En	ter 85% of line 1	2		
3 Mi	nimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 En	ter greater of line 2 or line 3	4		
5 Inc	come tax imposed in prior year	5		
6 Di	stributable Amount. Subtract line 5 from line 4, unless subject to			
<u> </u>	nergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally	/ intear	ated Type III supporting or	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990 EZ) 2018 THE JUNIOR LEAGUE OF CHICAGO, INC. Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 41	Type in Non-Functionally integrated 509	(a)(s) supporting Org	anizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
с	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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Schedule	e A (Form 99	0 or 990-E2	Z) 2018 [']	THE JU	JNIOF	R LEAGU	E OF	CHIC	AGO, I	INC.	**-***54	74 Pag
Part V	1 Suppl Part IV, line 1; P	emental Section A, art IV, Sect	Inform lines 1, 2 tion D, lin	ation. Pr 2, 3b, 3c, 4l les 2 and 3	ovide th o, 4c, 5a ; Part IV	e explanatior , 6, 9a, 9b, 90 , Section E, li	is required c, 11a, 11t nes 1c, 2a	by Part b, and 11 , 2b, 3a,	II, line 10; l c; Part IV, and 3b; Pa	Part II, line 17a Section B, line ırt V, line 1; Paı	or 17b; Part III, line s 1 and 2; Part IV, Se t V, Section B, line 1 tional information.	12; ection C,
		tructions.)	6, and 8;	and Part v	, Sectio	n E, lines 2, 5	, and 6. Al	so comp	liete triis pa	art for any addi	tional information.	
SCHEI	DULE A	, PART	'II,	LINE	10,	EXPLAN	ATION	FOR	OTHEF	R INCOME	:	
MISC	INCOM	2										
2014	AMOUN	C: \$	1,4	32.								
2015	AMOUN	C: \$	1,4	32.								
2016	AMOUN	C: \$	335	•								
2017	AMOUN	C: \$	1,5	18.								
2018	AMOUN	C: \$	4,6	58.								
•		т	_ / J									
											lule A (Form 990 or	

SCHEDULE D

(Form 990)

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.



Department of the Treasury Internal Revenue Service Name of the organization

11131009 758396 00014730000

THE JUNIOR LEAGUE OF CHICAGO, INC.

Employer identification number **-**5474

Par			s or Ac	counts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lin			
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	-		
	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used onl	У
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferrin	g
_				
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, lir	ne 7.
1	Purpose(s) of conservation easements held by the organizati	· · · · ·		
	Preservation of land for public use (e.g., recreation or e			
	Protection of natural habitat	Preservation of a cer	tified histo	pric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	n of a cons	
	day of the tax year.		_	Held at the End of the Tax Year
	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic str		_	2c
d	Number of conservation easements included in (c) acquired a			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ie organiza	ation during the tax
	year			
4	Number of states where property subject to conservation ear			
5	Does the organization have a written policy regarding the per			
	violations, and enforcement of the conservation easements i			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation	easements during the year
_				
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and enforcing conserve	ation ease	ements during the year
8	\$	is actisfy the requirements of eaction 17	0/b)//)/D)/;	
0	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservati			
5	include, if applicable, the text of the footnote to the organization			
	conservation easements.		o ino orga	
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Si	milar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ment and	balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in further	ance of pu	Iblic service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	nt and bala	ance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of pu	ublic servi	ce, provide the following amounts
	relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			► \$
				▶ \$
2	If the organization received or held works of art, historical tre			ovide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			▶ \$
	Assets included in Form 990, Part X			\$
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.		Schedule D (Form 990) 2018
832051	10-29-18			
		21		

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Sche		IOR LEAGUE							*547		age 2
Pa	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tr	easures,	or Othe	r Simila	r Asse	ts (contir	nued)	
3	Using the organization's acquisition, accessi	ion, and other record	ds, checl	k any of the	following the	at are a sig	gnificant us	se of its	collectio	n item	S
	(check all that apply):										
а	Public exhibition	d			hange progr						
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co							se in Par	t XIII.		
5	During the year, did the organization solicit of								-		7
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered	"Yes" on	Form 990,	Part IV,	line 9, or		
	reported an amount on Form 990, Pa		diam (for	oontribution	o or other o	aata nat i	included				
Ia	Is the organization an agent, trustee, custod								Yes		No
h	on Form 990, Part X?							∟	lites		
U		and complete the lo	nowing i	lable.					Amount		
~	Beginning balance						1c		Amoun		
	Additions during the year										
	Distributions during the year										
f	Ending balance										
	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.						- J]
Pa											
	•	(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three yea	ars back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
с	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administ	ered for th	ie organiza	ition	г		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
	If "Yes" on line 3a(ii), are the related organiza								3b		
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment	tunas.							
1 0	Complete if the organization answere		0 Part IV	/ lino 110 S	See Form 90	0 Part X I	line 10				
	Description of property	(a) Cost or o	-		or other	· · · · ·	cumulated		(d) Bool		
	Description of property	basis (investr			(other)		reciation	'		value	-
19	Land	`			0,000.				2.	0,0	00.
	Land Buildings				8,041.	2	92,51	7.		5,5	
	Leasehold improvements				- ,		,			,,,,,	
	Equipment			14	7,055.	1	12,38	4.	3.	4,6	71.
	Other										
-	Add lines 1a through 1e. (Column (d) must e		X, colun	nn (B). line 1	0c.)	1			28	0,1	95.
	J	, ,	,		/						

Schedule D (Form 990) 2018

832052 10-29-18

	(Form 990) 2018		JUNIOR	LEAGUE	OF CH	ICAGO,	INC.	**-**5474 Page
Part VII	Investments - 0							V line 10
(a) Descrip	Complete if the orgation of security or categories				ok value			x, line 12. ion: Cost or end-of-year market value
• •	al derivatives			(6) 500				
	held equity interests							
3) Other								
, (A)								
(B)								
(C)								
(D)								
(E)								
(F)								
(G)								
(H) Total (Col (t	o) must equal Form 990	Part X col	(B) line 12)					
	Investments - I							
	Complete if the orga	-		' on Form 990) Part IV lir	ne 11c. See F	orm 990 Part	X line 13
	(a) Description of i	investmen	t		ok value			ion: Cost or end-of-year market value
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)	o) must equal Form 990	Dart V. col	(P) line 12)					
Part IX	Other Assets.	, 1 alt 7, 00	. (D) IIIe 13.)					
	Complete if the orga	anization a	answered "Yes'	' on Form 990), Part IV, lir	ne 11d. See F	orm 990, Part	X, line 15.
				Description			,	(b) Book value
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8) (9)								
	mn (b) must equal Fo	rm 990 P	art X col (B) lir	ne 15)				►
Part X	Other Liabilitie			10 10.7			<u></u>	
	Complete if the orga	anization a	answered "Yes"	' on Form 990), Part IV, lir	ne 11e or 11f	. See Form 990), Part X, line 25.
1.	(a) De	scription o	of liability			(b) Book va	alue	
(1) Fed	eral income taxes							
(2)								
(3)								
(4)								
(5)								
(0)								
(6)								
(7)								
(7) (8)								
(7) (8) (9)	mn (b) must equal Fo	rm 990. P	art X. col. (B) lir	ne 25.)				
(7) (8) (9) Total. (Colu	mn (b) must equal Fo for uncertain tax pos					to the organ	ization's finance	cial statements that reports the

THE JUNIOR LEAGUE OF CHICAGO, INC.

Schedule D	(Form 990)	2018
Concurre D		2010

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_	dule D (Form 990) 2018 THE JUNIOR LEAGUE OF CHICA			**_	***5474 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents Wit	th Revenue per R	leturi	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ı.			
1	Total revenue, gains, and other support per audited financial statements			1	742,609.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-29,102.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d					
е	Add lines 2a through 2d			2e	-29,102.
3	Subtract line 2e from line 1			3	771,711.
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	7,847. -120,149.		
b	Other (Describe in Part XIII.)	4b	-120,149.		
	Add lines 4a and 4b			4c	-112,302.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	659,409.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	nents W	ith Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ì.			
1	Total expenses and losses per audited financial statements			1	732,315.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a			
b	Prior year adjustments	_ 2b			
с	Other losses	_ 2c			
d			120,149.		
е	Add lines 2a through 2d			2e	120,149.
3	Subtract line 2e from line 1			3	612,166.
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	7,847.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	7,847.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	620,013.
Pa	t XIII Supplemental Information.				

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 X, LINE 2:

THE ORGANIZATION FOLLOWS THE GUIDANCE IN THE FASB CODIFICATION TOPIC
RELATED TO UNCERTAINTY IN INCOME TAXES WHICH PRESCRIBES A COMPREHENSIVE
MODEL FOR RECOGNIZING, MEASURING, PRESENTING AND DISCLOSING IN THE
FINANCIAL STATEMENTS UNCERTAIN TAX POSITIONS THAT THE ORGANIZATION HAS
TAKEN OR EXPECTS TO TAKE IN ITS TAX RETURNS. UNDER THE GUIDANCE, THE
ORGANIZATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION
ONLY IF IT IS "MORE LIKELY THAN NOT" THAT IT IS SUSTAINABLE, BASED ON ITS
TECHNICAL MERITS. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS
FROM SUCH A POSITION SHOULD BE MEASURED BASED ON THE LARGEST BENEFIT THAT
HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE
SETTLEMENT WITH A TAXING AUTHORITY HAVING FULL KNOWLEDGE OF ALL RELEVANT
832054 10-29-18 Schedule D (Form 990) 2018
1131009 758396 00014730000 2018.04030 THE JUNIOR LEAGUE OF CHICAG 00014731

INFORMATION. THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR THE POSITIONS TAKEN ON ITS RETURNS. PART XI, LINE 4B - OTHER ADJUSTMENTS: SPECIAL EVENT EXPENSES -120,149 PART XII, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENT EXPENSES 120,149 			0001473		0.01	0 04020	25				0		0.0.0.1	4004
INFORMATION. THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR THE POSITIONS TAKEN ON ITS RETURNS. PART XI, LINE 4B - OTHER ADJUSTMENTS: SPECIAL EVENT EXPENSES -120,149 PART XII, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENT EXPENSES 120 149	832055 10-29-18	3									S	chedule I	D (Form 9	90) 20-
INFORMATION. THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR THE POSITIONS TAKEN ON ITS RETURNS. PART XI, LINE 4B - OTHER ADJUSTMENTS: SPECIAL EVENT EXPENSES -120,149 PART XII, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENT EXPENSES 120 149														
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INFORMATION. THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR	PART XI	I, LINE	4B - O	THER A	DJUS	FMENTS :								
INFORMATION. THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR														
								<u> </u>		AFFKC	<u>FRIAI</u>		FORT	POR
Part XIII Supplemental Information (continued)	ͳͶͲʹϽϷϺϠ	MTON		<u>λ ΝΙ Τ 17 </u> λ Π			י די די	т т	UNC		יעבסס		שםטם	₽∩₽

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" on organization entered more than \$1				or 19,	, or if the	2018
Department of the Treasury	-	Attach to Form 990						Open to Public
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for instru	uction	s and	the latest informat	ion.	Employer id	Inspection entification number
		IOR LEAGUE OF CHIC	AGO	, I	NC.		**_***	
	ing Activities complete this par	Complete if the organization answe	red "Y	'es" oi	n Form 990, Part IV,	line 1	7. Form 990-E	Z filers are not
		sed funds through any of the followir	ng acti	vities.	Check all that apply			
a Mail solicitat					overnment grants			
b Internet and c Phone solicit	email solicitations tations	s f └── Solicitat g └── Special			nment grants events			
d In-person so			<i>с</i> 1		ee 11 1 1			
		or oral agreement with any individual art VII) or entity in connection with p					s, or 🗌 Ye	s 🗌 No
b If "Yes," list the 10 compensated at le	•	viduals or entities (fundraisers) pursu organization.	iant to	agree	ements under which	the fu	undraiser is to	be
	· · ·		(iii)	Did		(v)	Amount paid	(vi) Amount poid
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have c or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (o	or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No	-			
or licensing.	ch the organizatio	on is registered or licensed to solicit o	contrib	outions	s or has been notified	d It Is	exempt from	registration
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Sche	dule G (Form	990 or 990-EZ) 2018
832081 10-03-18								

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of fundraising event contributior me on Form 990-FZ, lines 1 and 6b. List events with gross r preater than \$5,000 e and a ocinto o inc

		of fundraising event contributions and g				Jis greater than \$5,000.
			(a) Event #1	(b) Event #2 PERFECT	(c) Other events	(d) Total events
			ANNUAL GALA	PAIRINGS	3	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
			((()	
нечепие	1	Gross receipts	105,076.	61,371.	73,872.	240,319
	2	Less: Contributions	8,356.	5,096.	5,117.	18,569
	3	Gross income (line 1 minus line 2)	96,720.	56,275.	68,755.	221,750
		Cash prizes				
	1					
0	5	Noncash prizes				
urect Expenses	6	Rent/facility costs	30,500.	1,000.	50,510.	82,010
	7	Food and beverages	14,924.	11,161.	2,010.	28,095
ڐ	8	Entertainment	700.	200.		900
	9	Other direct expenses		1,032.	4,190.	
	-	Direct expense summary. Add lines 4 throug				120,149
		Net income summary. Subtract line 10 from				101,601
P.		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
нечепие				bingo/progressive bingo		col. (a) through col. (c
ř	1	Gross revenue				
ß						
nses	2	Cash prizes				
	3	Noncash prizes				
nireci Experiso	3 4	Noncash prizes				
	3 4	Noncash prizes		Yes %	Yes %	
	3 4 5	Noncash prizes	└── Yes% └── No	└── Yes% └── No	└── Yes% └── No	
	3 4 5 6	Noncash prizes	└── Yes% └── No		No No	
	3 4 5 6 7	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throug	Yes%	No No	No No	
	3 4 5 6 7	Noncash prizes	Yes%	No No	No No	
9	3 4 5 7 8 Ent	Noncash prizes	T from line 1, column (d)	No	No ►	
e e e	3 4 5 6 7 8 Ent	Noncash prizes	The formula for the set of the se	No states?	No ►	Yes No
9 a	3 4 5 6 7 8 Ent	Noncash prizes	The formula for the set of the se	No states?	No ►	Yes No
а	3 4 5 6 7 8 Ent	Noncash prizes	The formula for the set of the se	No states?	No ►	YesNo
9 a b	3 4 5 6 7 8 Ent 1 Is t 9 If "	Noncash prizes	yh 5 in column (d) 7 from line 1, column (d) lucts gaming activities: activities in each of these	states?	No	
9 a b	3 4 5 6 7 8 Ent 1 Is t 9 If "	Noncash prizes	yh 5 in column (d) 7 from line 1, column (d) lucts gaming activities: activities in each of these	states?	No	
a b Da	3 4 5 6 7 8 Ent 1 Is t 9 If "	Noncash prizes	yh 5 in column (d) 7 from line 1, column (d) lucts gaming activities: activities in each of these	states?	No	

Sche	edule G (Form 990 or 990-EZ) 2018 THE JUNIOR LEAGUE OF CHICAGO, INC. **-	***5474	4 Page
	Does the organization conduct gaming activities with nonmembers?		
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	
	An outside facility		
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	
h	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
D			
	of gaming revenue retained by the third party > \$		
с	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16			
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
-	retain the state gaming license?	Yes	
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	—	
D.	organization's own exempt activities during the tax year \triangleright \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); a	art III lines (9h 10
- u	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art m, mes e	, 30, 1
3208	IS 10-03-18 Schedule G (For	m 990 or 99	0-EZ) :
21	28 000 758206 00014720000 2018 04020 mue tuntor tencue or cuto		117
בכ	.009 758396 00014730000 2018.04030 THE JUNIOR LEAGUE OF CHIC	.AG UUU	14/

Schedule G (For	m 990 or 990-EZ)	THE JUN	JIOR I	LEAGUE OI	F CHICAGO	, INC.	**-**5474 _{Pa}
Part IV Su	m 990 or 990-EZ) pplemental Info	rmation (cont	inued)				
							Schedule G (Form 990 or 990
32084 04-01-18							
					29		
31009 75	8396 00014	730000	2018	.04030 т	HE JUNTOR	LEAGUE	OF CHICAG 000147

SCHEDULE O

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

Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

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



THE JUNIOR LEAGUE OF CHICAGO, INC.

Employer identification number **-**5474

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RELIGIONS, AND NATIONAL ORIGINS WHO DEMONSTRATE AN INTEREST IN AND A

COMMITMENT TO VOLUNTEERISM.

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

ASSOCIATE MEMBERS - THE ASSOCIATE COURSE OFFERS WIDE EXPOSURE TO VARIOUS

ASPECTS OF THE LEAGUE. THE ASSOCIATE PERIOD IS INTENDED TO PROVIDE AN

INTRODUCTION TO THE LEAGUE AND FACILITATE THE ON-BOARDING OF NEW MEMBERS.

ASSOCIATE COUNSELORS SERVE AS GUIDES AND MENTORS THROUGHOUT THE COURSE.

ACTIVE MEMBERS - SAME AS ASSOCIATE MEMBERS, BUT ADDITIONAL PRIVILEGES

INCLUDE HOLDING LEADERSHIP POSITIONS AND VOTING RIGHTS.

SUSTAINER MEMBER - AFTER AN ACTIVE MEMBER EARNS 200 POINTS THROUGH THE FLEX

CREDIT SYSTEM, THE MEMBER HAS THE OPTION TO CHANGE THEIR STATUS TO

SUSTAINER. SUSTAINERS PAY ANNUAL DUES TO MAINTAIN THEIR LEAGUE MEMBERSHIP.

THEY HAVE NO OTHER REQUIRED RESPONSIBILITIES AND NO VOTING PRIVILEGES.

SUSTAINERS CAN AND ARE ENCOURGED TO PARTICIPATE IN ANY AND ALL ASPECTS OF

THE LEAGUE.

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

THE JLC'S MEMBERSHIP VOTES TO ELECT THE GOVERNING BODY FOR THE NEXT FISCAL YEAR AT THE ANNUAL MEETING.

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

CERTAIN BOARD RECOMMENDATIONS ARE SUBJECT TO MEMBER APPROVAL. THEY INCLUDE,

BUT MAY NOT BE LIMITED TO, BYLAW CHANGES, THE STRATEGIC PLAN,

SIGNIFICANT PROGRAM CHANGES AND THE DISPOSITION OF ASSETS.

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2018)

 832211
 10-10-18

 30

Name of the organization

THE JUNIOR LEAGUE OF CHICAGO, INC.

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

THE FINANCE COMMITTEE PERFORMS A DETAILED REVIEW OF THE 990 AND A COPY OF THE FORM 990 IS PROVIDED ELECTRONICALLY TO THE BOARD OF DIRECTORS PRIOR TO

ITS FILING.

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

THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY. WHILE THIS POLICY DOES NOT REQUIRE ANNUAL CERTIFICATION OF COMPLIANCE, IT DOES REQUIRE WRITTEN DISCLOSURE TO THE EXECUTIVE COMMITTEE IF MEMBERS BECOME AWARE OF CONFLICTS, AND SUCH MEMBER MAY NOT PARTICIPATE IN NOR BE PRESENT FOR ANY DISCUSSION, VOTE, OR SUBSEQUENT NEGOTIATIONS IN CONNECTION WITH SUCH PROPOSED TRANSACTION WITHOUT WRITTEN APPROVAL BY THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION HAS NO KEY EMPLOYEES.

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

THE ORGANIZATION MAKES ITS BYLAWS, CONFLICT OF INTEREST POLICY AND

FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.

832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)

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TAX RETURN FILING INSTRUCTIONS

ILLINOIS FORM AG990-IL

FOR THE YEAR ENDING

MAY 31, 2019

Prepared for	THE JUNIOR LEAGUE OF CHICAGO, INC. 1447 N. ASTOR STREET CHICAGO, IL 60610
Prepared by	WARADY & DAVIS LLP 1717 DEERFIELD RD SUITE 300S DEERFIELD, IL 60015
Amount due or refund	BALANCE DUE OF \$15.00
Make check payable to	ILLINOIS CHARITY BUREAU FUND
Mail tax return and check (if applicable) to	OFFICE OF THE ATTORNEY GENERAL CHARITABLE TRUST BUREAU 100 WEST RANDOLPH ST., 11TH FLOOR CHICAGO, IL 60601-3175
Return must be mailed on or before	DECEMBER 2, 2019
Special Instructions	THE REPORT SHOULD BE SIGNED AND DATED BY THE AUTHORIZED INDIVIDUAL(S). WE RECOMMEND THAT YOU USE CERTIFIED MAIL WITH POSTMARKED RECEIPTS FOR PROOF OF TIMELY FILING.

For Off	ice Use Only ILLINOIS CHARITABLE ORGANIZATION ANNUAL		Form AG990-IL Revised 3/05
PMT			
	Charitable Trust Bureau, 100 West Randol 11th Floor, Chicago, Illinois 60601	ph CO	# 01-001628
	, , ,		Check all items attached:
AMT	Report for the Fiscal Period:	X	
		Make Checks 🛛	
		Payable to	Copy of Form IFC
INIT		Charity X	· · · ·
		Bureau Fund	\$100.00 Late Report Filing Fee
	al ID # <u>**-**5474</u> MO DAY YR		MO DAY YR
Are co		anization was created	d: 06/29/1912
	LEGAL	Year-end	
	NAME THE JUNIOR LEAGUE OF CHICAGO, INC.	amounts	
	MAIL	A) ASSETS	A) \$ 2,218,664.
	DDRESS 1447 N. ASTOR STREET	B) LIABILITIES	B) \$ 259,771.
	, STATE CHICAGO, IL	C) NET ASSETS	C) \$ 1,958,893.
	P CODE 60610	DEDOENTAGE	
I.	SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
	D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	50.584%	D) \$ 394,329.
	E) GOVERNMENT GRANTS & MEMBERSHIP DUES	42.062%	E) \$ 327,895.
	F) OTHER REVENUES	7.355%	F) \$ 57,334.
I	G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100 %	G) \$ 779,558.
II.	SUMMARY OF ALL EXPENDITURES DURING THE YEAR:	17 041.	
	H) OPERATING CHARITABLE PROGRAM EXPENSE	17.841%	H) \$ 132,055.
	I) EDUCATION PROGRAM SERVICE EXPENSE	%	I) \$
		17.841%	
	J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	1/.041%	J) \$ 132,055.
	J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$		
	K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	%	К) \$
	K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	70	κ) φ
	L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	17.841%	L) \$ 132,055.
	L_j TOTAL CHARTTABLE FROM AN SERVICE EXPENDITORE (ADD 5 & K)	T1.04T%	
	M) MANAGEMENT AND GENERAL EXPENSE	48.832%	M)\$ 361,438.
		10.002%	M)\$ 50171500
	N) FUNDRAISING EXPENSE	33.326%	N)\$ 246,669.
	0) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100 %	0) \$ 740,162.
		100 /0	
III.	SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES: (Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.)		
	PROFESSIONAL FUNDRAISERS:		
	P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100 %	P) \$ 0.
	Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$
	R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R) \$
	PROFESSIONAL FUNDRAISING CONSULTANTS:		
	S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$ 0.
IV.	COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YE	AR:	
1	T) NAME, TITLE: JACEE BURNES, OPERATIONS DIRECTOR		T) \$ 44,231.
1	U) NAME, TITLE DAN KANTER, FINANCE MANAGER		U) \$ 66,491.
	V) NAME, TITLE: LYDIA HAWTHORNE, MEMBERSHIP MANAGER		V) \$ 45,275.
v.	CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDE CODE CATEGORIES	D)	List on back side of instructions
	CODE CATEGORIES		CODE
898091 04-01-18	W) DESCRIPTION: FURNISHED SERVICES OR FACILITIES TO OTH	IER ORGS	W)# 151
91 0.	X) DESCRIPTION:		X) #
8980	Y) DESCRIPTION:		Y) #

IF	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES	NO
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		Х
2.	HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?	2.		X
3.	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.		X
4.	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?	4.		X
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?	5.		X
6.	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.		X
7a.	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	7.		X
7b.	. IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$			
8.	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?	8.		Х
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?	9.		X
10.	. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10.		X
11.	. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:			
	JPMORGAN CHASE BANK, NA, PO BOX 182051, COLUMBUS, OH 43218 (3	3 A	CCOU	NTS)
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: JACEE BURNES - 312-664-4462			

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

BE SURE TO INCLUDE ALL FEES DUE:	DELANE HELDT						
1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.	PRESIDENT OR TRUSTEE (PRINT NAME)	SIGNATURE	DATE				
2.) FOR FEES DUE SEE INSTRUCTIONS.	SARAH MCCARRON						
 REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY. 	TREASURER OF TRUSTEE (PRINT NAME)	SIGNATURE	DATE				
·	SUSAN GREGGO						
898101 04-01-18	PREPARER (PRINT NAME)	SIGNATURE	DATE				