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# Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other org. anizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the

2008

OMB No. 1545-1150

year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

Department of the Treasury Internal Revenue Service

SCANNED WAR 3 0 2010

Open to Public Impection

Α	For the 2008 calendar year, or tax year beginning 6/01 , 2008, and ending 5/31	, 2009
В	Check if applicable C	Employer identification number
	Address change   Please use IRS   THE JUNIOR LEAGUE OF WICHITA FALLS, INC.	75-1167897
	Name change   label or   2302 MIDWESTERN PARKWAY	Telephone number
⊨	Initial return   type   WICHITA FALLS, TX 76308-2328	(940) 692-9797
<b>—</b>	Termination Specific —	
	Amended return instructions.  Application pending	Group Exemption Number
	<ul> <li>Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts         must attach a completed Schedule A (Form 990 or 990-EZ).</li> <li>G Accounting m         Other (specify)</li> </ul>	
	H Check ►	if the organization is <b>not</b>
1	Website: ► WWW.JLWF.ORG required to a	ttach Schedule B (Form 990,
	Organization type (check only one) — [22] 301(C) ( 3 ) ~ (mset no )   [4347(a)(1) or   327	
<u> </u>	Check If the organization is not a section 509(a)(3) supporting organization and its gross receipts are r\$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete re-	normally <b>not</b> more than eturn.
L	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ	<b>▶</b> \$ 558,982.
	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the	instructions for Part I.)
	1 Contributions, gifts, grants, and similar amounts received	1 153,817.
	Program service revenue including government fees and contracts .	2
	3 Membership dues and assessments .	3 31,651.
	4 Investment income	4 2,609.
	5a Gross amount from sale of assets other than inventory  5a	
R	b Less: cost or other basis and sales expenses  Compar (loss) from only of exacts other than investory (Subtreet In Sh from In Sh) (att only)	5c
Ë	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)  6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here	7 90
REVENU	a Gross revenue (not including \$ 153,817. of contributions	<b>-</b>
Ë	reported on line 1) 6a 347, 67	13.
	b Less: direct expenses other than fundraising expenses 6b 347,88	
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c -208.
	7a Gross sales of inventory, less returns and allowances 7a 13, 45	55.
	b Less: cost of goods sold 7,54	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c 5,906.
	8 Other revenue (describe ► SEE STATEMENT 1	) 8 9,777.
	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) RECEIVED.	► 9 203,552.
	10 Grants and similar amounts paid (attach schedule) SEE STATEMENT 2	10 13,038.
Ê	11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors	11 17,733.
Ê	12 Salaries, other compensation, and employee benefits 2 WAR \$ 2010 YI 13 Professional fees and other payments to independent contractors	13 8,325.
EXPENSE	14 Company and thillies and market	14 29,165.
Ĕ	15 Printing, publications, postage, and shipping	15 9,582.
3	16 Other expenses (describe ► SEE STATEMENT 3	<b>16</b> 74,680.
	17 Total expenses (add lines 10 through 16)	<b>► 17</b> 152,523.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 51,029.
N S E S T T	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-ye figure reported on prior year's return)	ear 19 553,169.
Ţ	20 Other changes in net assets or fund balances (attach explanation)	. 20
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	► 21 604,198.
	Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 in	nstead of Form 990-EZ.
	(See the instructions for Part II.)  (A) Beginning of	
22		868. 22 412,636.
23		688. 23 175,152. 560. 24 101,364.
24 25		
26		947. 26 84,954.
27		169. 27 604, 198.
BA	A For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.	Form <b>990-EZ</b> (2008)

TEEA0803L 09/18/08

E orma	OO EZ (2000) THE HINLOR LEAC	HE OF WICHIMA FALL	C INC	75	110	7007	D 4
Par	990-EZ (2008) THE JUNIOR LEAG	rvice Accomplishments	s, INC. s (See the instructi		-116	57897   Expenses	Page <b>2</b>
	s the organization's primary exempt purpose? SE		o (occ and monded	0113.)	(Rea	uired for 501(c)(3	3)
Desc	ribe what was achieved in carrying out the ribe the services provided, the number of am title.		oses. In a clear and con elevant information for e	icise manner, each	and (	(4) organizations (a)(1) trusts; opti thers.)	and
	COMMUNITY ASSISTANCE FUND	) - (CAF)					
	ADMINISTERS FUNDS TO VARI	OUS NON-PROFIT AGE	NCIES WITHIN T	HE			
	COMMUNITY FOR A SPECIFIC	NEED.				_	
		is amount includes foreign gr	ants, check here	<u> ► </u>	28a	4,	<u>000.</u>
29	INTERNATIONAL FRIENDSHIP						
	PROVIDES SOCIAL AND EDUCATHEIR FAMILIES WHO ARE ST						
		is amount includes foreign gra			29 a	3.	354.
30	OPPORTUNITY KNOCKS	is amount includes loreign gr	arits, crieck fiere		LJa		<del>5011</del>
	DONATES VOLUNTEER HOURS A	ND DOLLARS TO ASSI	ST OTHER ESTAB	LĪSHĒD			
	COMMUNITY NON-PROFIT AGEN						
	(Grants \$ ) If th	is amount includes foreign gr	ants, check here		30 a	7,	<u>500.</u>
31	Other program services (attach schedule (Grants \$ ) If th	) SEE STATEMENT 7			21 -	2	579.
32	Total program service expenses (add lin	is amount includes foreign grades 28a through 31a)	ants, check here		31 a 32		433.
	List of Officers, Directors		iplovees. (List each o	one even if not cor			
		(b) Title and average hours	(c) Compensation (If	(d) Contributions	to	(e) Expense ac	count
	(a) Name and address	per week devoted to position	not paid, enter -0)	employee benefit plan deferred compensation	is and   tion	and other allow	ances
							_
SEE	STATEMENT 8		0.		0.		0.
	<b>-</b>						
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	·						
BAA		TEEA0812L (	01/14/09	<del></del>		Form <b>990-EZ</b>	(2008)

TEEA0812L 01/14/09

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		х
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If Yes, attach a conformed copy of the changes.	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35 a	Х	
b	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	35 b	X_	<u> </u>
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions .   37a 0.	-passessess		
	Did the organization file <b>Form 1120-POL</b> for this year?	37 b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38 a	2.2.2.	X
b	olf 'Yes,' complete Schedule L, Part II and enter the total amount involved . 38b N/A			
39	501(c)(7) organizations Enter:			
а	Initiation fees and capital contributions included on line 9  39a  N/P			
	Gross receipts, included on line 9, for public use of club facilities.  [39b]  N/P	-		
40 a	501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► 0.; section 4912 ► 0.; section 4955 ► 0.			
b	501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If 'Yes,' complete Schedule L, Part I	40 b		X
C	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e	2000a.i.	X
41	List the states with which a copy of this return is filed NONE			
42 a	The books are in care of ► JUNIOR LEAGUE OF WICHITA FALLS Telephone no. ► (940)  Located at ► 2302 MIDWESTERN PKWY, WICHITA FALLS, TX ZIP + 4 ► 76308			9 <u>7</u>
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No X
	If 'Yes,' enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If 'Yes,' enter the name of the foreign country:	<u>42c</u>		<u> </u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		► []	N/A N/A
44	Did_the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead		Yes	
45	of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'	44		X
	Form 990 must be completed instead of Form 990-EZ	45	   F7	(3008)
BAA	TEEA0812L 01/14/09	orm <b>99</b> 0	J-EZ (	(2008)

., Form 990-l	EZ (2008) THE JUNIOR LEAGUE (	OF WICHITA FALLS	S. INC.	75-116	7897	Р	age 4
Part VI		s only. All section		zations must answer		s 46·	
46 Did the	he organization engage in direct or indirect oblice? If 'Yes,' complete Schedule C		vities on behalf of o			Yes	No X
47 Did t	he organization engage in lobbying activit	es? If 'Yes,' complete S	chedule C, Part II		47		X
	e organization operating a school as descri				48		X
	he organization make any transfers to an	•	elated organization?	·····	49a		<u>X</u>
	es,' was the related organization(s) a secti	3		•	49Ь		
50 Comp	plete this table for the five highest compei ved more than \$100,000 of compensation	nsated employees (other from the organization, I	than officers, direct	tors, trustees and key empler 'None.'	oyees) who	each	l
(a)	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		pense nt and owances	s
NONE			-				
		0	<del></del>	0. 0.	· · · · · · · · · · · · · · · · · · ·		<u>0.</u>
					_		
	- <b></b>						
Total number	of other employees paid over \$100,000	0					
51 Comp	plete this table for the five highest comper the organization. If there is none, enter 'N	nsated independent cont None.'	ractors who each re	eceived more than \$100,000	of comper	nsation	1
	(a) Name and address of each independent conti			(b) Type of service	(c) Comp	ensatio	
NONE		<del></del>		(b) type of service	(0) 00		··
							0.
	<b>-</b>						
- <b>-</b>	<del>-</del>						
Total numb	per of other independent contractors recei	ving over \$100,000	•	0			
	Under penalties of perjury, I declare that I have exam	nined this return, including acco	mpanying schedules and s	statements, and to the best of my kn	owledge and l	belief, it	is
	true, correct and complete Declaration of preparer	Corner to an officer jis based on a	ill information of which pr				
Sign	- Cauch, or	run		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	1010		
Here	Signature of officer	ing Occas	· Lant	Date			
	Type or print name and title	1112 + 1105	dent				
	17/1	1.1	Date /		parer's Identif	ying Nui	mber
Paid Pre-	Preparer's signature	dus CPA	2/6/	self- employed P	e instructions 042223		
parer's	Firm's name (or MOORE, CAMP, PH		SON, LLP				
Use	employed),  1400 11TH STREE			(0.40	75-1711		<del></del>
Only	ZIP + 4 WICHITA FALLS,	1'Y 76301		Phone no ► (940	16.7		)
May the ID	S discuss this return with the preparer sh	TX 76301	hone	Phone no ► (940	V Yes	9256	No

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

Department of the Treasury Internal Revenue Service

Name of the organization

**Public Charity Status and Public Support** 

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

					MICHIIA FA							-		10/03			
		Reas	on for P	<u>ublic (</u>	<b>Charity Stat</b>	us (A	All organiz	zations	s must	compl	ete thi	s part	:.) (see	<u>instru</u>	ctions)		
The o	organi	zation	is not a pr	ivate fo	oundation becau	use it i	s: (Please o	check or	nly one o	rganıza	tion.)						
1	$\prod A$	\ chur	ch, conven	tion of d	churches or ass	sociation	on of church	nes desc	cribed in	section	170(b)(	IXAXi).					
2					ction 170(b)(1)(												
3										n 170/h	V1VAVii	i) (Atta	ach Sche	edule H \			
4	A hospital or cooperative hospital service organization described in section 170(bx1xAxiii). (Attach Schedule H.)  A medical research organization operated in conjunction with a hospital described in section 170(bx1xAxiii). Enter the hospital's																
7	_			-	iization operate	eu III C	orijuniciion	Williaii	ospitai u	escribed	1111 3601	1011 170		Kiny. Cite	si uie iiosp	itai 5	
5	$\square$	n org	city, and si anization o (1 <b>)(A)(iv).</b> (	perated	I for the benefit	of a	college or un	niversity	owned	or opera	ted by a	govern	nmental	unit desc	cribed in se	ction	
6 7																	
8																	
9														rahın fan	a and area		ounta
3	X An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)																
10	Ш△	n org	anızatıon o	rganıze	d and operated	i exclu	sively to tes	st for pu	blic safe	ty. See	section	509(a)(4	1). (see	instruction	ons)		
11	_ n	nore p	oublicly sup	ported	d and operated organizations opporting organi	descrit	oed in section	on 509(a	a)(1) or $s$	ection 5	09(a)(2)	tions of . See <b>s</b>	f, or carr <b>ection 5</b>	y out the <b>09(a)(3).</b> —	purposes Check the	of one box t	∍ or hat
	a	י ∐ ד	уре І		<b>b</b> Type II		c [	Type II	I - Fund	ctionally	ıntegrat	ed		d 🗌	Type III-	Other	ŕ
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).																
f	If	f the c	• •	receiv	ed a written de	termın	ation from t	the IRS	that is a	Type I,	Type II o	or Type	III supp	orting or	ganızatıon,		
g	S	ince i	August 17,	2006, h	as the organiza	ation a	ccepted any	y gift or	contribu	ution froi	m any o	f the fol	lowing p	ersons?		Yes	No
	(i	i) a	person wheelow, the g	o direct	tly or indirectly	contro	ols, either al ted organiz	lone or t ation?	ogether	with per	sons de	scribed	ın (ıı) ar	nd (III)	11 g (i)	162	NO
	(i		_		f a person des		•								11 g (ii)		
	(i	-	-		ntity of a persor		``		ove?						11 g (iii)		
h	•	-			rmation about		``	` '		sunnor:	te				119()	L	
			Supported	1		T							440	<u> T</u>	6.03 4		
	(1)	Organ	ization		(ii) EIN	((	i) Type of organ described on lin above or IRC so (see instruction	ection	organizat (i) lister gove	Is the tion in col d in your erning ment?	the organ	ou notify iization in (f) of ipport?	organizat	Is the tion in col zed in the S?	(vii) Amour	it or Sup	эрогч
									Yes	No	Yes	No	Yes	No			
						1					1						
						J				<u> </u>							
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				1							<del> </del>		1				
										1							
Total																	

che	edule A (Form 990 or 990-EZ) 200	8 THE JUNI	OR LEAGUE O	F WICHITA	FALLS, INC.	75-1167897	Page 2
<b>(4)</b>	Support Schedule for	-			)(b)(1)(A)(iv) a	nd 170(b)(1)(A)	(VI)
Sec	(Complete only if you check tion A. Public Support	ad the box on line	5, 7, or 8 of Part	1.)			
Cale	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
•	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
_	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
5	Total. Add lines 1-3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale Degi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	rities, etc. (see ins	structions)			. 12	
13	First five years. If the Form 990 organization, check this box and		ation's first, second	d, third, fourth, o	or fifth tax year as	a section 501(c)(3)	▶ []
Sec	tion C. Computation of Pu	ıblic Support	Percentage				
	Public support percentage for 20	•	•	e 11, column (f)	•	14	
	Public support percentage for 20	•	•			. 15	%_
16 a	a 33-1/3 support test — 2008. If the and stop here. The organization	organization did qualifies as a pub	not check the box blicly supported or	on line 13, and ganization.	the line 14 is 33-1/	/3 % or more, chec	k this box
t	33-1/3 support test — 2007. If the and stop here. The organization	organization did qualifies as a pub	not check a box o licly supported or	n line 13, or 16a, ganization.	and line 15 is 33-	1/3% or more, chec	ck this box
17 a	a 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	test, check this	box and stop here	. Explain in Part IV	how
ŧ	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	and-circumstances	test, check this	box and stop here	. Explain in Part IV	is 10% how the

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support Calendar year (or fiscal yr beginning in)► (a) 2004 (e) 2008 (f) Total **(b)** 2005 (c) 2006 (d) 2007 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') 140,324 113,239 182,681. 185,468 816,110. 194,398 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt 273,613 497,343 361,128 1,823,735. purpose 323,907 367,744. Gross receipts from activities that are not an unrelated trade or business 0. under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on 0. its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 413,937 437,146 562,142 680,024 546,596 2,639,845. 6 Total. Add lines 1-5 7a Amounts included on lines 1 3 received from disqualified 64,000 87,000 67,000 persons 73,570 42,000 333,570. **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 0 0 0 0 0 U 333,570. c Add lines 7a and 7b 73,570 42,000. 87,000. 67,000. 64,000. 8 Public support (Subtract line 7c from line 6.) 2,306,275. Section B. Total Support (a) 2004 **(b)** 2005 (d) 2007 **(e)** 2008 Calendar year (or fiscal yr beginning in) (c) 2006 (f) Total 680,024 546,596. 9 Amounts from line 6 413,937. 2,639,845. 437,146. 562,142 10a Gross income from interest. dividends, payments received on securities loans, rents, rovalties and income form similar sources 5,733 2,609 19,086. 1,762 3,589 5,393 **b** Unrelated business taxable income (less section 511 taxes) from businesses 0. acquired after June 30, 1975 1,762 2,609 19,086. c Add lines 10a and 10b 3,589 5,733. 5,393 Net income from unrelated business activities not included inline 10b, whether or not the business is 1,985 1,079 1,127 -727 4,651. regularly carried on 1,187 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV 9.777. 40,460. 3,352 6,408 9,591 11,332 2,704,042. 13 Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 85.3% 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g. 16 85.0% Section D. Computation of Investment Income Percentage 0.7% 17 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f) 0.6% 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 19a 33-1/3 support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form	990 or	990-E	Z) 200	8 I	HE	JUN	IOR	LE <i>P</i>	AGUE	OF	WIC	CHITA	FAL	LS.	INC	. 7	5-1	1678	97		Page 4
Part IV	Supp	lemer	ıtal l	nform	natio	n. C	omp	lete	this	part	to p	rovi	de the	exp	anat	ion r	eauir	ed b	v Pa	rt II. I	ine 10	: :
Part IV	Part I	II, line	17a	or 17	7b; oı	r Pa	rt III	, line	12.	Pro	vide	any	other	addı	tiona	linfo	orma	tion.	(see	ınstrı	uction	, S)
				·											· <u> </u>							
	_ <b></b>														_,							
																	<b></b>					
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#### SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047 2008

Open to Public

Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a. Department of the Treasury Internal Revenue Service nofragant Name of the organization Employer identification number 75-1167897 THE JUNIOR LEAGUE OF WICHITA FALLS, INC Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Solicitation of government grants Email solicitations Phone solicitations Special fundraising events In-person solicitations 2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990EZ filers are not required to complete this table. (v) Amount paid to (vi) Amount paid to (or retained by) (iii) Did fundraiser (i) Name of individual (ii) Activity (or retained by) (iv) Gross receipts or entity (fundraiser) have custody or control from activity fundraiser listed in organization of contributions? col.(I) Yes No Total List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Sche	dule	G (Form 990 or 990-EZ) 2008 THE JUN	IOR LEAGUE OF	WICHITA FALLS,	INC. 75-116	
Par		Fundraising Events. Complete if reported more than \$15,000 on F	the organization a orm 990-EZ, line 6	enswered 'Yes' to Foa. List events with	orm 990, Part IV, gross receipts gre	line 18, or eater than \$5,000.
R			(a) Event #1 FALLS FEST (event type)	(b) Event #2 CHRISTMAS MAGI (event type)	(c) Other Events  1 (total number)	(d) Total Events (Add col. (a) through col. (c))
REVENUE	1	Gross receipts	285,381.	204,912.	11,197.	501,490.
E	2	Less: Charitable contributions	116,617.	37,200.		153,817.
	3	Gross revenue (line 1 minus line 2).	168,764.	167,712.	11,197.	347,673.
	4	Cash prizes .				
DIRECT	5	Non-cash prizes				
	6	Rent/facility costs	34,546.	41,411.		75,957.
EXPENSES	7	Other direct expenses .	224,268.	43,749.	3,907.	271,924.
E S		Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar	•		▶	347,881. -208.
Par		<b>Gaming.</b> Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	es' to Form 990, Pa	art IV, line 19, or re	
REVENUE			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Ĕ	1	Gross revenue				
_	2	Cash prizes				
DIRECT S	3	Non-cash prizes				
C S T E S	4	Rent/facility costs				
	_ 5	Other direct expenses			<u> </u>	
	6	Volunteer labor	Yes% No	Yes % No	Yes%	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)		<b>•</b>	
	8	Net gaming income summary. Combine li	nes 1 and 7 in column (	(d)	<u> </u>	lyra Liva
a b 10 a	Is the If 'N	er the state(s) in which the organization operete organization licensed to operate gaming o,' Explain:	activities in each of the	se states?		9a 9a 10a
	·					
		s the organization operate gaming activitie e organization a grantor, beneficiary or tru inister charitable gaming?		nber of a partnership or	other entity formed to	11

Schedule G (Form 990 or 990 EZ) 2008 THE JUNIOR LEAGUE OF WICHITA FALLS, INC	. 75-1167897	Page 3
	YES	S NO
13 Indicate the percentage of gaming activity operated in:		
a The organization's facility	13a 8	
<b>b</b> An outside facility	13b %	
14 Provide the name and address of the person who prepares the organization's gaming/special event	s books and records:	
Name: •		
Address: •		
15a Does the organization have a contact with a third party from whom the organization receives gamin	- Contract C	Aming 2
b If 'Yes,' enter the amount of gaming revenue received by the organization \$	_and the amount	
of gaming revenue retained by the third party \$		
c If 'Yes,' enter name and address:		
Name: ►		: <b>M</b>
Name: •	·	
Address ►		
Address	· <b></b>	<b>3</b> . S
16 Garning manager information		
Name: <b>-</b>		
	<b>//</b>	
Gaming manager compensation • \$		
		1800 E.
Description of services provided:		
☐ Director/officer ☐ Employee ☐ Independent contractor		
		JYW.
17 Mandatory distributions		
a Is the organization required under state law to make charitable distributions from the gaming processtate gaming license?	eds to retain the	
		S
<b>b</b> Enter the amount of distributions required under state law distributed to other exempt organizations organization's own exempt activities during the tax year: ► \$	or spent in the	
BAA  TEEA3703L 07/18/08	Schedule <b>G</b> (Form 990 or 990-E	Z) 2008
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20	n	a
ZU	u	a

### SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

THE JUNIOR LEAGUE OF WICHITA FALLS, INC.

75-1167897

PART III	, LINE	<b>12 - OTHER</b>	INCOME
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NATURE AND SOURCE	2008	2007	2006	2005	2004
OTHER REVENUE	9,777.	11,332.	9,591.	6,408.	3,352.
	AL \$ 9,777.	11,332.	\$ 9,591.	6,408.	\$ 3,352.

2008	FEDERAL STATEMENTS  THE JUNIOR LEAGUE OF WICHITA FALLS, INC.		
STATEMENT 1 FORM 990-EZ, PART I, LINI OTHER REVENUE SUPPORT SERVICES ADVERTISING SALES	<b>E 8</b>	\$ TOTAL \$	7,203. 2,574. 9,777.
STATEMENT 2 FORM 990-EZ, PART I, LINI GRANTS AND SIMILAR AM  PAYMENTS TO AFFILIATES NAME: PURPOSE OF PAYMENT: AMOUNT:	OUNTS PAID	THE ASSN OF JUNIOR LEAGUE. INC NEW YORK, NY, MEMBERSHIP DUES	13,038.
STATEMENT 3 FORM 990-EZ, PART I, LINI OTHER EXPENSES  AJLI CONFERENCES ANNUAL DINNER/BOARD LICAF COMMITTE EXPENSE COMMUNICATION COUNCIL COMMUNITY ADVISORY BOY COMMUNITY ASSISTANCE IS COMMUNITY COUNCIL COMPUTER CREDIT CARD BILLING DEPRECIATION EMPLOYEE MILEAGE FINANCE COUNCIL HUGS PROGRAM INSURANCE INTERNATIONAL FRIENDSI JEFFERSON AWARDS MARKETING MEMBERSHIP ACTIVITIES MEMBERSHIP COUNCIL MEMORIALS/HONORARIUMS MIRACLE LEAGUE-SCRIPPS MISCELLANEOUS NOMINATING OFFICE EXPENSES OFFICE MACHINES OPPORTUNITY KNOCKS OPPORTUNITY KNOCKS OPPORTUNITY KNOCKS OPPORTUNITY FRESIDENT PRESIDENT ELECT FUND PRESIDENT'S FUND	UNCH ARD FUND PROJ HIP S GRANT		14,172. 7,029. 14. 26. 169. 4,000. 28. 200. 725. 10,557. 210. 37. 2,260. 3,354. 2,579. 13. 2,456. 58. 150. 1,000. 375. 1,992. 1,090. 7,500. 22. 113. 859. 611.

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2008	FEDERAL STATEMENTS  THE JUNIOR LEAGUE OF WICHITA FALLS, INC.		PAGE 2
			75-1167897
STATEMENT 3 (CONTINUE FORM 990-EZ, PART I, LI OTHER EXPENSES  PROVISIONAL PROJECT. PUBLIC RELATIONS - EX SUSTAINER PROJECT TRAINING & EDUCATION WEB SITE WEBSTER PAYOUT YEARBOOK. YOUTH COMMITTEE	NE 16 TERNAL	\$ TOTAL \$	1,729. 320. 822. 3,351. 1,639. 184. 2,072. 1. 74,680.
STATEMENT 4 FORM 990-EZ, PART II, L OTHER ASSETS	INE 24		
ACCOUNTS RECEIVABLE INVENTORIES MACHINERY AND EQUIPM PREPAID EXPENSES AND	ENT DEFERRED CHARGES	### BEGINNING  \$ 14,243. \$ 77,993. 1,479. 845.  **TOTAL \$ 94,560. \$	10,753. 73,003. 17,058. 550. 101,364.
STATEMENT 5 FORM 990-EZ, PART II, L TOTAL LIABILITIES	INE 26		-
ACCOUNTS PAYABLE AND DEFERRED REVENUE GRANTS PAYABLE	ACCRUED EXPENSES	BEGINNING \$ 12,222. \$ 42,725. 60,000. TOTAL \$ 114,947. \$	3,643. 41,311. 40,000. 84,954.

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#### **FEDERAL STATEMENTS**

PAGE 3

THE JUNIOR LEAGUE OF WICHITA FALLS, INC.

75-1167897

STATEMENT 7 FORM 990-EZ, PART III, LINE 31 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

	DESCRIPTION		0. GRANTS	PROGRAM SERVICE EXPENSES
JEFFERSON AWARDS	INCLUDES FOREIGN GRANT	C. NO		2,579.
	INCLUDES FOREIGN GRANI	S: NO TOTAL \$	0.	\$ 2,579.

#### STATEMENT 8 FORM 990-EZ, PART IV LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED			ACCOUNT/
RACHELLE COOPER 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	PRESIDENT 25.00	\$ 0.	\$ 0.	\$ 0.
PAULA PERKINS 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	PRESIDENT-ELECT 19.71	0.	0.	0.
RENEE BROWNING 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	FINANCE VP 8.17	0.	0.	0.
SUSIE TANNER 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	COMMUNICATIONS 9.62	0.	0.	0.
EMILY ARENS 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	COMMUNITY VP 3.94	0.	0.	0.
DEANDRA WEST 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	MEMBERSHIP VP 10.00	0.	0.	0.
JENNIFER HUDSON 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	ASST. TREAS. 3.65	0.	0.	0.
SUSAN BASHAM 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	NOMINATING 3.85	0.	0.	0.
KAREN GAGNE' 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	PLACEMENT 4.81	0.	0.	0.

#### **FEDERAL STATEMENTS**

PAGE 4

THE JUNIOR LEAGUE OF WICHITA FALLS, INC.

75-1167897

## STATEMENT 8 (CONTINUED) FORM 990-EZ, PART IV LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
SARA NEIMAN 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	ADMISSIONS-PROV 14.42	\$ 0.	\$ 0.	\$ 0.
REAGAN FOSTER 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	MEMBER-AT-LARGE 0.38	0.	0.	0.
MANDY JALOMO 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	MEMBER-AT-LARGE 0.38	0.	0.	0.
LISA KNIGHT 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	MEMBER-AT-LARGE 0.38	0.	0.	0.
STEPHANIE JONES 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	WEBSITE 2.88	0.	0.	0.
RICHELLE SONS 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	COOKBOOK 4.81	0.	0.	0.
JENNIFER HAISTEN 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	MIRACLE LEAGUE 17.69	0.	0.	0.
NANCY MARKS 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	SUSTAINING ADV. 3.00	0.	0.	0.
JULIA WHITMIRE 2302 MIDWESTERN PARKWAY WICHITA FALLS, TX 76308-2328	SUSTAINING ADV. 3.00	0.	0.	0.
	TOTAL	\$ 0.	<u>\$ 0.</u>	\$ 0.

#### STATEMENT 9 FORM 990-EZ, PART VI REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?
Instituting on it through benefit confident.

NO

NO