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Form 990-EZ

Department of the Treasury Internal Revenue Service

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)
Sponsoring organizations of donor advised funds and controlling organizations as defined in section
512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form
The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150 **2008** 

Open to Public

Inspection

A	For the	2008 calend	lar year,	or tax year beginning	10/01/08	, and e	nding	9/3	0/09			
В	Check if	k if applicable Please C Name of organization D Employer identification number							nployer identification number			
$\Box$	Address	change	use IRS									
Ш	Name ch	ange	label or print or	I DOWN'''OWN JAMESON DADI'NDDQ						6	4-0840093	
Ц	Initial reti	urn	type	Number and street (	or PO box, if mail is no	ot delivere	d to street a	ddress)		Room/suite	E Te	lephone number
Ц	Terminat	tion	See Specific	308 E. PEA	RL ST.					ST 101	6	01-353-9800
Ц	Amended	d return	Instruc-		r country, and ZIP + 4						F Gr	oup Exemption
Ш		on pending	tions	JACKSON			<u> 39201</u>				Nu	ımber •
	<ul><li>Sect</li></ul>	tion 501(c)(3)	_	zations and 4947(a)(1)			ts must at	tach		<b>G</b> Accounting	method	Cash X Accrual
				mpleted Schedule A (F		١.	<del></del>			Other (specify)		
1	Website			WNTOWN-JACK		-				H Check ► required to	X if t	he organization is <b>not</b> chedule B (Form 990,
				one)— X 501(c) (	4 ) <b> </b>		947(a)(1) or		527			
K	Check			zation is not a section 5					receipts	are normally no	t more	than \$25,000 A return
				nization chooses to file					000 57	<del></del>		012 962
	,,	,		to determine gross receipts						o the inetri	otions.	<del></del>
	Part I			penses, and Char		sets or	ruliu B	aiaiic	ses (Se	e me msnu		ioi Part 1)
	1 2			nts, and similar amounts rec enue including governm		.to					1 2	4,648
	3	•		ende including governm id assessments	ent lees and contrac	13	SE	E S	ТАТЕ	MENT 1	3	905,659
3010	4	Investment in		u assessments			011		-4-0	MINI I	4	1,404
₹	5a			sale of assets other than	, inventory		1	5a		1,05		2/101
S	b			asis and sales expenses			<u> </u>	5b		1,37		
				of assets other than inventor		m line 5a\	(attach sch.)		SEE	STMT 2		-322
3	6	, ,		rities (complete applicable p	• •		'				"	
₹	а	Gross reven				contribu	_	9,	oncok nore	, , ,	:	
-&	"	reported on	•	including #		COINTIDU		6a				
7	ь	•	•	s other than fundraising	eynenses		ŀ	6b	<del></del>	<del> </del>	=	
Ž	c			from special events and	•	line 6h fr	om line 6a)		<del></del>		- 6c	
2	7a			tory, less returns and all	·		1	7a			"	
OCANNITA.	Ь , ,	Less cost of			owanoco		ŀ	7b		·	7	
7			•	from sales of inventory	(Subtract line 7b from	m line 7a	1)	<u> </u>			7 <sub>C</sub>	
00	8			nbe > SEE SI	•		•7				) 8	101
	9			lines 1, 2, 3, 4, 5c, 6c, 7							9	911,490
	10			mounts paid (attach sch							10	
	11	Benefits paid	to or fo	r members	,				<u>/CD</u>		11	
S	12	Salanes, oth	er comp	ensation, and employee	ebenefits	Ĭ	REC	<u> </u>	VED	ان-	12	306,748
use	13	Professional	fees an	d other payments to indi	ependent contractors	3				<u> </u>	13	
Expenses	14			ities, and maintenance			MAR	29	2010	191	14	36,649
ũ	15	Printing, pub	lications	, postage, and shipping		35	11111	~ -		AS S	15	
	16	Other expen	ses (des	cribe <u>SEE ST</u>	TATEMENT 4				-		16	
	17	Total expen	ses. Add	lines 10 through 16			OGI	DFI,	<del>ال U</del> آ		17	
ets	18	Excess or (d	leficit) fo	r the year (Subtract line	17 from line 9)						18	
Net Assets	19	Net assets or t	fund balar	nces at beginning of year (fr	rom line 27, column (A))	(must agree	e with end-of-ye	ear figure	e reported or	prior year's return)	19	1,181,441
et/	20	Other chang	es in net	assets or fund balance	s (attach explanation	۱)					20	
	21			alances at end of year (							21	
_ <u>F</u>	art II	Balan	ce She	ets. If Total assets on	line 25, column (B)	are \$2,50	00,000 or m	nore, fi			orm 99	
	_		•	e the instructions for Pai	rt II )					Beginning of year		(B) End of year
		avings, and ii	nvestme	nts				,	1	104,60		
		nd buildings		ann an-	/TINTO 5			}		8,87		
		ssets (descri	be 🕨	SEE STATEM	1ENT 5		· · · · · ·	)		109,06	$\overline{}$	
	Total a				PMENT 6					41 10		
		abilities (des		-		. 04\		—'⊦	-	41,10 1,181,44		
41	INDI ASS	ous or tund I	vaiance:	s (line 27 of column (B)	must agree with line	: 21)				し,エロム,せせ	1 27	1 043,11

Form 990-EZ (2008)

For	Terror printers, and the second	WNTOWN JACKSON PARTNERS		<u>1-0840093</u>				Page 2
F	Part III Statement	t of Program Service Accomplishments	(See the instruct	ions for Part II	l.)		Ex	penses
Wh	at is the organization's prin	nary exempt purpose?				(Red	quired	d for 501(c)(3)
	SEE STATEMENT 7					1		rganizations
		n carrying out the organization's exempt purposes. In						'(a)(1) trusts,
		d, the number of persons benefited, or other relevant	information for each pr	ogram title		optic	onal t	or others)
28	SEE STATEMENT 8							
	(Grants \$	) If this amount includes foreign grants,	check here	•	П	28a		1,005,725
29	<u></u>	, was sured, messes to sign granto,	GHOOK HOLD		<u> </u>			
	(Grants \$	) If this amount includes foreign grants,	check here	<u> </u>	$\prod$	29a		
30								
					<del></del> 1			
	(Grants \$	) If this amount includes foreign grants,	check here		LL	30a		
31	Other program services (a			_	$\Box$	_		
22	(Grants \$	) If this amount includes foreign grants,	check here	<u>P</u>	Ļ	31a		1,005,725
		xpenses (add lines 28a through 31a) ers, Directors, Trustees, and Key Employees. List	each one over if not co	amponented (See t	bo in	32		
	artiv List of Office	ers, Directors, Trustees, and Key Employees. List	(b) Title and average	(c) Compensation	(d)	Contribution	is to	(e) Expense
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0- )		oyee benefit pl rred compens		account and other allowances
SE	E STATEMENT 9			1				
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Form **990-EZ** (2008)

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and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	P8	TY Other Information (Note the statement requirements in the instructions for	Part VI.)			
description of each activity  Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes,"  statich a conformed copy of the changes  If the organization had income from biseness skinlvies, such as those reported on line 2, 6s, and 7a (among others), but not reported for members, and the organization had income from biseness skinlvies, such as those reported on line 2, 6s, and 7a (among others), but not reported for members, and the organization had income from biseness gross income of 51,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?  If "Yes," has if filled a tax return on Form 990-T for this year?  Was there a sliquidation, dissolution, termination, or substantial contraction during the year? If "Yes," organization for form 1120-POL for this year?  Organization file Form 1120-POL for the year?  Of the organization file Form 1120-POL for the year?  Of the organization for Form 1120-POL for the year?  Of the organization for Form 1120-POL for the year?  If "Yes, complete Schedulue, Pan, or make any lians to, any officer, director, it uside, or key employee or were any such loans made in a prior year and still unipsuit at the start of the period covered by this return?  If "Yes, complete Schedulue, Pan, or make any lians to, any officer, director, it uside, or key employee or were any such loans made in a prior year and still unipsuit at the start of the period covered by this return?  If "Yes, complete Schedulue, Pan, or make any lians to, any officer, director, it uside, or key employee or were any such loans made in a prior year and any thing the folial manufaction of the period covered by this return?  If "Yes, complete Schedulue, Pan, or make any liand and the the total amount microbed  If "Yes, complete Schedulue, Pan, or make any liand and the total amount microbed  Organization (Institute, organization and the period organization organization during the year under sections 4912, 4955, and 4958  If the period of the organization organ					Yes	No
34   Were any changes made to the organization programing documents but not reported to the IRS? If "Yes," attach a stormed copy of the changes   34   X	33					
statch a conformed copy of the changes  If the organization had income from bissenss activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reported on Form 990-T and the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy star requirements?  If the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy star requirements?  If Yes, "has it filed a fair return on Form 990-T for this year?  If Yes, "has it filed a fair return on Form 990-T for this year?  If Yes, "has it filed a fair return on Form 990-T for this year?  If Yes, "has it filed a fair return on Form 990-T for this year?  If Yes, "has it filed a fair return on Form 990-T for this year?  If Yes, "complete applicable parts of Schedule N  If Yes, "complete Schedule N  If Yes, "complete Schedule L Part II and enter the total amount invoked  If Yes, "complete Schedule L Part II and enter the total amount invoked  If Yes, "complete Schedule L Part II and enter the total amount invoked  If Yes, "complete Schedule L Part II and enter the total amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount invoked  If Yes, "complete Schedule L Part II and enter the folds amount		•		33		_ <u>X</u>
15   the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, talked a statement explaining your reason for not reporting the motime on Form 990-T and proxy tax requirements?	34					
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?    1		•		34		_ <u>X</u>
bill the organization have unrelated business gross income of \$1,000 or more or section 603(e) notice, reporting, and prory tax requirements?  18 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," and shifled a tax return on Form 990-T for this year?  18 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," and shifled a tax return on Form 990-T for this year?  18 A X X Start around of political expenditures, direct or indirect, as described in the instr.  19 Did the organization for Form 1120-POL for this year?  19 Did the organization for Form 1120-POL for this year?  19 Section 501(c)(7) organizations Enter and shill unpend at the start of the period covered by this return?  20 Section 501(c)(7) organizations Enter and shill unpend at the start of the period covered by this return?  21 Section 501(c)(7) organizations Enter and shill unpend at the start of the period covered by this return?  22 Section 501(c)(7) organizations Enter and shill unpend at the start of the period covered by this return?  23 Section 501(c)(7) organizations Enter and shill unpend at the start of the period covered by this return?  24 Section 501(c)(3) and (4) organizations Enter amount of tax imposed on the organization during the year under section 501(c)(3) and (4) organizations Enter amount of tax wintposed on the organization engage in any section 4955 section 501(c)(3) and (4) organizations Did the organization engage in any section 4955 section 501(c)(3) and (4) organizations Pint transaction from a pror year? If "Yes," complete Schedule L, Part I  25 Section 501(c)(3) and (4) organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  26 Enter amount of tax in line 40 crembursed by the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 3886-T  26 Located at b JACKSON, MS  27 P 4 39201  27 P 4 39201  28 Section 501(c)(3) and (4) organization managers	35		t			
and proxy tax requirements?    16					1	
b   M'es, "has it flied a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes."  complete applicable parts of Schedule N  The tarnount of political expenditures, direct or indirect, as described in the initist  Did the organization file Form 1120-POL for this year?  376	а		orting,	ŀ		
38 Was there a laquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N  File amount of political expenditures, direct or indirect, as described in the instr  Did the organization file Form 1120-POL for this year?  Section 501(c)(7) organization brown from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?  If "Yes," complete Schedule I, Part II and enter the total amount involved  Section 501(c)(7) organizations Enter  Initiation fees and capital contributions included on line 9  Gross receipts, included on line 9, for public use of rub facilities  Gross receipts, included on line 9, for public use of rub facilities  Section 501(c)(3) organizations Enter amount of 1 ax imposed on the organization during the year under section 4911 ★						<u>X</u>
complete applicable parts of Schedule N 27a		•		35b		
176   Enter amount of political expenditures, direct or indirect, as described in the instr   37e   37b   X   X   B   Did the organization file Form 1120-POL for this year?   37b   Did the organization file Form 1120-POL for this year?   38b   Did the organization file Form 1120-POL for this year?   38b   M   X   X   B   If Yes, complete Schedule I., Part II and enter the total amount involved   38b   M   S   If Yes, complete Schedule I., Part II and enter the total amount involved   38b   M   S   If Yes, complete Schedule I., Part II and enter the total amount involved   38b   M   S   S   S   S   S   S   S   S   S	36					-
b Did the organization file Form 1120-POL for this year?  Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a pnor year and still unpaid at the start of the period covered by this return?  188			ı	36		<u>X</u>
Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the pend covered by this return?  38b   1			a		1	
any such leans made in a prior year and still unpaid at the start of the period covered by this return?    1		-		37b		X
b if "Yes," complete Schedule L, Part II and enter the total amount involved  39 Section 501(c)(7) organizations. Enter 39 Initiation fees and capital contributions included on line 9 39 Gross receipts, included on line 9, for public use of club facilities 39 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 \( \)	38a		re		1	
Section 501(c)(7) organizations Enter  a Initiation fees and capital contributions included on line 9 b Gross receptls, included on line 9, for public use of club facilities  Section 501(c)(3) organizations. Enter amount of fax imposed on the organization during the year under section 4915 b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 b Section 501(c)(3) and (4) organization but the organization engage in any section 4955 b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 b Section 501(c)(3) and (4) organization but the very complete Schedule L, Part I  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 and party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed    MS  Telephone no  601-353-9800  308 E PERRI ST.  Located at   JACKSON, MS  ZIP + 4 39201  b At any time during the calendar year, did the organization have an interest in or a signature or other authonity over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an effice outside of the U S ?   If "Yes," enter the name of the foreign country   See the instructions for exceptions and filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No.  Yes No.  Yes No.  Yes No.  Yes No.  It is any related organization a controlled entity of the organization within the meaning o				38a		<u>X</u>
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911			<u>b</u>			
b Gross receipts, included on line 9, for public use of club facilities  Section 601 (c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶		, , , , , , , , , , , , , , , , , , ,			1	
Section \$01(c)(3) organizations Enter amount of tax imposed on the organization during the year under section \$911 \inspecies section \$911 \inspecies section \$911 \inspecies section \$951 \inspecies section \$950 \inspecies		·	<del></del>			
section 4911		· · · · · · · · · · · · · · · · · · ·	b		1	
b Section 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  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  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  Located at No JACKSON, MS  Telephone no 308 E PEARL ST.  Located at No JACKSON, MS  JIP +4 39201  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 accounts of exceptions and filing requirements for Form TD F 90-22.1, Report of 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  Section 4947(a)(1) nonexempt chartable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Section 4947(a)(1) nonexempt chartable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No	40a					
during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956  d Enter amount of tax on line 40c reimbursed by the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8866-T  List the states with which a copy of this return is filed  MS  Telephone no 308 E PEARL ST. Located at  JACKSON, MS  ZIP+4 39201  b At any time during the calendar year, did the organization have an interest in or a signature or other authonity over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  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 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  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Yes No  Yes No  Yes No  Yes, "Form 990-EZ  Is any related organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If  "Yes," Form 990 must be completed instead of Form 990-EZ  Section 4947 (a)(1) nonexempt charitable interest received or accrued during the tax year  Yes No  Yes No  Yes No  Yes No  Yes, "Form 990 must be completed instead of Form 990-EZ	_				1	
L, Part I  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  e 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  List the states with which a copy of this return is filed   MS  Telephone no 308 E PEARL ST.  Located at   JACKSON, MS   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; a file organization from TD F90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the US?  If "Yes," enter the name of the foreign country   See the instructions for exceptions and filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the US?  If "Yes," enter the name of the foreign country   Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Ves. No  144	D				1	
the year under sections 4912, 4955, and 4958  d Enter amount of tax on line 40c reimbursed by the organization  e 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  List the states with which a copy of this return is filed  BEN ALLEN  308 E PEARL ST.  Located at  JACKSON, MS  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)?  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 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  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Yes No  At any related organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			Schedule	406	1	v
the year under sections 4912, 4955, and 4958 d Enter amount of tax on line 40c reimbursed by the organization e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8866-T  List the states with which a copy of this return is filed    MS  Telephone no    601-353-9800  308 E PEARL ST.  Located at    JACKSON, MS  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)?  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 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  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  144 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  15 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	_			40B		
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transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed    The books are in care of    BEN ALLEN  308 E PEARL ST.  Located at    JACKSON, MS  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)?  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 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    If "Yes," enter the name of the foreign country    If "Yes," enter the name of the foreign country    If "Yes," enter the amount of tax-exempt interest received or accrued during the tax year   Yes No  Yes No  Yes No  Yes No  Yes No  Lothe organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		,     •				
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308 E PEARL ST.  Located at ▶ JACKSON, MS  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)?  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 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 ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  14 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			Telephone no ▶ 601	-35	3 - 9	800
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over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  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 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 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Yes No  Yes No  Yes No  If "Yes," Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	b					
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See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of 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 ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  X  X  X  X  X  X  X  X  X  X  X  X  X				42b		
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Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X	С	At any time during the calendar year, did the organization maintain an office outside of the U S?		42c		X
and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  14 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  15 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X		If "Yes," enter the name of the foreign country				
Yes No  14 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  15 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here				▶ 🗌
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Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X				1		
Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If  "Yes," Form 990 must be completed instead of Form 990-EZ  44 X  X				·······	Yes	No
Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If  "Yes," Form 990 must be completed instead of Form 990-EZ  45  X	14	•				
"Yes," Form 990 must be completed instead of Form 990-EZ				44		X
	45					
	-	"Yes," Form 990 must be completed instead of Form 990-EZ			0.55	

ign Iere	and belief, it strue, corr	AMIN HILEN THSING	) is based on all information		
aid	Preparer's signature	Joseph E. Hins, CPA	12/11/09	Check if self-employed	Preparer's Identifying Number (See instr P00001696
reparer's Ise Only	Firm's name (or yours if self-employed), address, and ZIP + 4	TANN, BROWN & RUSS CO., 415 EAST CAPITOL STREET JACKSON, MS 39201	PLLC		EIN ▶ 20-5630688  Phone no ▶ 601-354-4926
May the IRS di	scuss this return with t	the preparer shown above? See instructions			▶   Yes   No

Form 990-EZ (2008)

### Form **4562**

Department of the Treasury Internal Revenue Service

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

2008
Attachment Sequence No 67

Name(s) shown on return

DOWNTOWN JACKSON PARTNERS

Identifying number 64 - 0840093

	ess or activity to which this form relates LL BUSINESS ACTIVI	TTES								
**********	art I Election To Expens		erty Under Se	ction 1	79					
	Note: If you have a					comi	olete Pa	rt I		
1	Maximum amount See the instruction				ololo you	00111	<del>Jicto i a</del>		1	250,000
2	Total cost of section 179 property pl	•							2	
3	Threshold cost of section 179 prope			struction	s)				3	800,000
4	Reduction in limitation Subtract line	•	•		-,				4	
5	Dollar limitation for tax year Subtract line	4 from line 1 If zero or	less, enter -0- If mar	ried filing	separately, see	nstruc	ctions		5	
	(a) Description		·		(business use			lected cost		
6									,,,	
7	Listed property Enter the amount from	om line 29	·			7				
8	Total elected cost of section 179 pro	perty Add amounts	in column (c), lines	6 and 7					8	
9	Tentative deduction Enter the small	ller of line 5 or line 8							9	
10	Carryover of disallowed deduction fr	rom line 13 of your 2	007 Form 4562						10	
11	Business income limitation. Enter th	e smaller of busines	s income (not less	than zero	o) or line 5 (s	ee insi	ructions)		11	
12	Section 179 expense deduction Ad-	d lines 9 and 10, but	do not enter more	than line	11				12	<del></del>
13	Carryover of disallowed deduction to				<u> </u>	13				
	: Do not use Part II or Part III below for									
Pŧ	ert II Special Depreciation	<u>on Allowance a</u>	nd Other Depr	reciatio	on (Do no	t incl	<u>ude liste</u>	<u>d prope</u>	rty.)	See instructions.)
14	Special depreciation allowance for o		ner than listed prop	erty) plac	ed in service	•				
	during the tax year (see instructions	•							14	
15	Property subject to section 168(f)(1)								15	
<u> 16 _ </u>	Other depreciation (including ACRS						<del></del>		16	20,298
Pe	art III MACRS Depreciati	on (Do not inclu			see instru	ction	s.)			
	***************************************			ion A						
17	MACRS deductions for assets place	•	• •					<b>►</b> □	17	
<u>18</u>	If you are electing to group any assets pla	aced in service during the Assets Placed in Se						iation Sv	stom.	
	Section B—/	(b) Month and	(c) Basis for depr			Gene	iai Debiec	nation sy	Steili	
	(a) Classification of property	year placed in service	(business/investmonly-see instruc	ent use	(d) Recovery period	(e) (	Convention	(f) Me	thod	(g) Depreciation deduction
19a	3-year property		,							<del>724</del>
b	5-year property								•	
c	7-year property									
d	10-year property									
е	15-year property									
f	20-year property									
	25-year property				25 yrs			S/L		
h	Residential rental				27 5 yrs		MM	S/L		
	property				27 5 yrs		ММ	S/L		
i	Nonresidential real				39 yrs		MM	S/L		
	property						MM	S/L		
	Section C—As	sets Placed in Ser	vice During 2008 1	Tax Year	Using the A	lterna	tive Depr	ciation S	ystem	
20a	Class life							S/L		
<u>b</u>	12-year				12 yrs			S/L		
	40-year		<u> </u>		40 yrs		MM	S/L		
<u>Pa</u>	art IV Summary (See inst	tructions)							1	
21	Listed property Enter amount from	line 28							21	
22	Total. Add amounts from line 12, lin	_		_						
	Enter here and on the appropriate li	•	· ·	corporati	ons—see ins	tr			22	20,298
23	For assets shown above and placed									
	enter the portion of the basis attribu	table to section 263/	A costs			23				

64-0840093

### **Federal Statements**

#### Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	 Amount
BID ASSESSMENTS	\$ 905,659
TOTAL	\$ 905,659

# <u>Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities</u>

		Description	1		How Received	<u></u>	Who Sol		
	Date Acquired	Date Sold	Sale Price		Cost & Expense	_	Depreciation		Gain / Loss
VARIOUS	VARIOUS	VARIOUS	\$	1,050 \$	DONATION 80,510	;   \$_	79,138	\$_	-322
TOT	'AL		\$	1,050 \$	80,510	\$_	79,138	\$	-322

#### Statement 3 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	A	mount
OTHER REVENUE	\$	101
TOTAL	\$	101

### **Federal Statements**

#### Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
TRAVEL	1,205
BANK CHARGES	698
BOOKKEEPING	14,830
CONTRACT LABOR	68,288
INSURANCE	13,327
DUES AND SUBSCRIPTIONS	11,642
EQUIPMENT MAINTENANCE	751
OFFICE SUPPLIES	11,369
MARKETING MATERIALS	76,742
POSTAGE	812
WEBSITE MAINTENANCE	1,578
SPONSORSHIPS/GRANTS/DONAT	60,773
PROFESSIONAL FEES	81,640
OTHER DEVELOPMENT/MARKET	459
PRINTING	2,252
TELECOMMUNICATIONS	11,271
OTHER	4,751
PARKING	2,446
TAXES AND LICENSES	470
COMPUTER CONSULTANTS	6,254
ADVERTISING	13,775
CONFERENCES AND EVENTS	98,013
ENTERTAINMENT	6,434
RESEARCH / STRATEGIC PLAN	30,907
AMBASSADOR/SAFETY PATROL	364,680
TOTAL	\$ 885,367

#### Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	 Beginning of Year	 End of Year
ACCOUNTS RECEIVABLE PREPAID EXPENSES AND DEFERRED CHARGES	\$ 101,006 8,059	\$ 95,276 9,334
	109,065	104,610

#### Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	E	Beginning of Year	 End of Year
ACCOUNTS PAYABLE AND ACCRUED EXPENSES ACCRUED EXPENSES PAYROLL LIABILITIES	\$	34,373 5,678 1,053	\$ 57,590 5,269 6,732
	-	41,104	 69,591

#### **Federal Statements**

#### Statement 7 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

#### Description

DOWNTOWN JACKSON PARTNERS EXISTS TO FACILITATE DEVELOPMENT, ENHANCE THE ECONOMIC CLIMATE, AND IMPROVE THE OPERATIONAL FUNCTIONS AND AESTHETIC APPEARANCE OF THE CENTRAL BUSINESS DISTRICT OF JACKSON, MISSISSIPPI.

### <u>Statement 8 - Form 990-EZ, Part III, Line 28 - Statement of Program Service</u> Accomplishments

#### Description

VARIOUS ACTIVITIES DESIGNED TO ENCHANCE THE IMAGE AND PERCEPTION OF JACKSON, MISSISSIPPI'S CENTRAL BUSINESS DISTRICT, RECRUIT AND RETAIN BUSINESSES AND TENANTS IN THE DISTRICT, AND PROVIDE LANDSCAPING AND SECURITY SERVICES TO BUSINESSES AND RESIDENTS OF THE DISTRICT.

## Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees

### Name and Address

	Title	Average Hours	Compensation	Benefits	Expenses
TED DUCKWORTH	CHAIRMAN		0	0	0
HILDA STAUSS-OWE	N SECRETARY		0	0	0
SYLVIA STEWART	CFO		0	0	0
DAVID WATKINS	OFFICER		0	0	0
BEN ALLEN	PRESIDENT	40	150,000	0	0
BARTON LAMPTON	BD MEMBER		0	0	0
MIKE PETERS	BD MEMBER		0	0	0
JOHN TURNER	BD MEMBER		0	0	0
MICHAEL WALKER	BD MEMBER		0	0	0
MALCOLM WHITE	BD MEMBER		0	0	0
JOHN CALHOUN	BD MEMBER		0	0	0

### **Federal Statements**

# Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees (continued)

Name and Address

	Title	Average Hours	Compensation	Benefits	Expenses
TIMOTHY MANNING	BD MEMBER		0	0	0
MAURICE JOSEPH	BD MEMBER		0	0	0
TROY STOVALL	BD MEMBER		0	0	0
HARRY WALKER	BD MEMBER		0	0	0
LELAND SPEED	BD MEMBER		0	0	0
LEROY WALKER	BD MEMBER		0	0	0
MENDE ALFORD	BD MEMBER		0	0	0
SAM BEGLEY	BD MEMBER		0	0	0
ANDREW MATTIACE	BD MEMBER		0	0	0
SOCRATES GARRETT	BD MEMBER		0	0	0