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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

2009 (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 \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

Open to Public Inspection

om 990-EZ (2009)

OMB No 1545-1150

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning and ending Employer identification number Name of organization Check if applicable Please use IRS Address change label or 20-8570449 LAUREL EXPRESS INC Name change print or Telephone number Initial return type. Number and street (or P O box, if mail is not delivered to street address) Room/suite See 601-433-3255 P O BOX 1256 Termination Specific Group Exemption City or town, state or country, and ZIP + 4 Amended return Instruc-MS 39441-1256 LAUREL Number Application pending tions Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach X Cash G Accounting method a completed Schedule A (Form 990 or 990-EZ). Other (specify) Check X if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF) Website: ► N/A **X** 501(c) (**3**) **◄** (insert no) 4947(a)(1) or 527 Tax-exempt status (check only one) — If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ **S** Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 3 Membership dues and assessments 4 Investment income 4 5a Gross amount from sale of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here Revenue Gross revenue (not including \$ of contributions reported on line 1) 6b Less: direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c Gross sales of inventory, less returns and allowances 7a 7b Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c C 8 8 Other revenue (describe 71,797 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 9 Grants and similar amounts paid (attach schedule) 10 11 11 Benefits paid to or for members 34,693 Salaries, other compensation, and employee benefits 12 12 13 13 Professional fees and other payments to independent contractors 1,447 14 Occupancy, rent, utilities, and maintenance 14 4,927 15 15 Printing, publications, postage, and shipping Other expenses (describe SEE STATEMENT 1 37,595 16 16 78,662 17 17 Total expenses. Add lines 10 through 16 -6,865 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 त्राचा विकास के किया कि alances at beginning of year (from line 27, column (A)) (must agree with 46,584 nd-of-year figure reported on prior year's return) 19 Other changes in net assets or fund balances (attach explanation) 20 39,719sets or fund balances at end of year Combine lines 18 through 20 Balance-Sheets Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ OGDEN, UT (See the instructions for Part II) (A) Beginning of year (B) End of year <u>39</u>,719 46,584 Oash, sevings, and investments 23 Land and buildings 24 Other assets (describe 24 46,584 25 25 Total assets 26 Total liabilities (describe 46,584 27 Net assets or fund balances (line 27 of column (B) must agree with line 21)

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Form 990-EZ (2009) LAUREL E	EXPRESS INC	20	-8570449			Page 2
Part III Statement of Prog	ram Service Accomplishmen	ts (See the instruct	ions for Part III		Ex	penses
What is the organization's primary exemp	t purpose?			()	Required	for section
SEE STATEMENT 2				5	01(c)(3) a	and 501(c)(4)
Describe what was achieved in carrying o	=				_	ons and section
manner, describe the services provided, t	he number of persons benefited, or oth	er relevant information for	Г	4	947(a)(1)	trusts, optional
each program title				fc	r others)
28 IMPROVEMENT OF DOWNTOWN ST	REETS AND PROMOTING EVENTS					
(O	N. 16 Alban ann ann an Aireachan Sananna ann an	a abaalabaaa	•	m 20-		
(Grants \$) If this amount includes foreign grant	s, cneck nere		28a	1	
29				İ		
				-	1	
(Grants \$) If this amount includes foreign grant	s check here	•	29a		
30	The time difficult included to eight grant	o, one or here				
(Grants \$) If this amount includes foreign grant	s, check here	•	30a		
31 Other program services (attach sched						
(Grants \$) If this amount includes foreign grant	s, check here	<u> </u>	31a	<u> </u>	5,393
32 Total program service expenses (a	dd lines 28a through 31a)			▶ 32	<u> </u>	5,393
Part IV List of Officers, Directo	rs, Trustees, and Key Employees. Li			he instruct	ions for F	
(a) Nan	ne and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contri employee be		(e) Expense account and
(a) Nan	- and address	devoted to position	enter -0)	deferred cor		other allowances
AMY GONZALEZ	LAUREL	PRESIDENT				
409 OAK STREET	MS 39440	2.00	0		0	0
ERIC ROBERTS	LAUREL	VICE PRES				
409 OAK STREET	MS 39440	2.00	0		0	0
JUNE WHEELER	LAUREL	SECRETARY				
409 OAK STREET	MS 39440	2.00	0		0	0
DAVID DILL	LAUREL	TREASURER				_
409 OAK STREET	MS 39440	2.00	0	1	0	0
JACKIE LEE	LAUREL	DIRECTOR				
409 OAK STREET	MS 39440	40.00	30,000		0	0
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Form **990-EZ** (2009)

Form 990-EZ (2009)

					T
				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		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached 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 not	: reported		1	
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			1	
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section				
	6033(e) notice, reporting, and proxy tax requirements?		35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets				
	during the year? If "Yes," complete applicable parts of Schedule N		36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr	<u>ı </u>		1	
b	Did the organization file Form 1120-POL for this year?		37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or wer	e			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?		38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	<u> </u>			
39	Section 501(c)(7) organizations Enter				
а	Initiation fees and capital contributions included on line 9	a			
b	Gross receipts, included on line 9, for public use of club facilities 39				
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under				
	section 4911 ▶, section 4912 ▶, section 4955 ▶				
	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess bene	fit			
	transaction during the year or is it 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		40b		X
	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on				
	organization managers or disqualified persons during the year under sections 4912,				
	4955, and 4958				
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c				I
	reimbursed by the organization				
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter				1
	transaction? If "Yes," complete Form 8886-T		40e		X
	List the states with which a copy of this return is filed NONE				
		Telephone no ▶ 60:	1-43	3-3	255
	409 OAK STREET	•			
	Located at LAUREL, MS	ZIP+4 ▶ 39	440		
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			Yes	No
	account)?		42b		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 Foreign Bank				I
	and Financial Accounts.				I
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		42c		x
	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	▶ 43			
					
				Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of				l
	Form 990-EZ		44	ĺ '	X
					•
45	is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If				
45	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	i .	X

Pa	rt VI	Section 501(c)(3) organizations and section 4947 501(c)(3) organizations and section 4947(a)(1) nor and complete the tables for lines 50 and 51.			•			
46	Did the o	rganization engage in direct or indirect political campaign activities of	on behalf of or in oppos	ution to			Yes	No
		es for public office? If "Yes," complete Schedule C, Part I	остан от от иг оррос			46		X
47		rganization engage in lobbying activities? If "Yes," complete Schedu	ile C. Part II			47		X
48		panization operating a school as described in section 170(b)(1)(A)(ii)		hedule E		48		X
49a	_	rganization make any transfers to an exempt non-charitable related				49a		X
b		was the related organization a section 527 organization?	J			49b		
50		e this table for the organization's five highest compensated employer	es (other than officers.	directors, trustees	and kev			
	•	es) who each received more than \$100,000 of compensation from the	•	•	•			
		(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 & deferred compensation	acc	Expension are	nd
NONE	1							
		<u> </u>						
						_		
f 51	Complete	nber of other employees paid over \$100,000 this table for the organization's five highest compensated independ of compensation from the organization. If there is none, enter "Non		ach received more t	- han			
		lame and address of each independent contractor paid more than \$100,000		Type of service	(6) (ompens	ation	
NO		arrie and address or each independent contractor paid more than \$100,000	(0)	Type of service	(6) 0	ompens	auon	
_								
d	Total nun	mber of other independent contractors each receiving over \$100,000	>		l .		·	
Sigr Here		Under penalties of perjury, I declare that I have examined this return, including and belief, it is true, correct, and complete. Declaration of preparer (other that a significant of preparer of the property	an officer) is based on all in					
Paic	1	Preparer's signature W. Dawil Dill	Date 03/04	Check if self-employed	Preparer's Iden		-	e instr)
Prej	parer's	Firm's name (or yours HOLT & ASSOCIATES PI				4-0		275
Use	Only	if self-employed), PO BOX 226			Phone			
	-	address, and ZIP + 4 LAUREL, MS 39441-02	226			-64	9-3	000
May	the IRS di	scuss this return with the preparer shown above? See instructions				XY		No
						m 99		(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

LAUREL EXPRESS INC

20-8570449 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

▶ Attach to Form 990 or Form 990-EZ.

The o	rga		•	it is (For lines 1 through 11, ch	•	•							
1	Ц	A church, con	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A)(i).						
2	Ц	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	Ц	A hospital or	a cooperative hospital service	e organization described in sect	tion 170(b)	(1)(A)(iii)							
4		A medical res	earch organization operated	in conjunction with a hospital de	escribed in	section 1	170(b)(1))(A)(iii).	Enter th	ne hospit	tal's name,		
		city, and state	•										
5		An organization	on operated for the benefit of	a college or university owned o	r operated	by a gove	ernmenta	al unit de	scribed	l ın			
		section 170(l	b)(1)(A)(iv). (Complete Part I	l)									
6		A federal, stat	te, or local government or go	vernmental unit described in se	ction 170(b)(1)(A)(v	/).						
7	X	An organization	on that normally receives a si	ubstantial part of its support fror	n a govern	mental un	nt or fron	n the ge	neral pu	plic			
			section 170(b)(1)(A)(vi). (Co		•			_	·				
8				'0(b)(1)(A)(vi). (Complete Part	II)								
9	П	-		more than 33 1/3 % of its supp	•	ntribution	s. memb	ership f	ees. and	d aross			
_	ш	-	• • • • • • • • • • • • • • • • • • • •	ot functions—subject to certain				•		•			
		•	•	unrelated business taxable inc	•								
			•	, 1975 See section 509(a)(2).	•			200.					
10	\Box			clusively to test for public safet	-	•	a)(4)						
11	H	_	•	clusively for the benefit of, to p	•	•		carry or	t the				
••	ш	-		d organizations described in sec				-		tion			
		-		e type of supporting organizatio	-								
		a Type		c Type III–Function		-	d	—ī	 e III–Ot	hor			
е	П			nization is not controlled directly						1101			
G	Ш	-		ind other than one or more publ				•		ction			
			ection 509(a)(2)	and other than one of more publi	iciy Suppoi	ica organ	Zalions	acscribe	.u III 300	Stiori			
£		` ' ' '	` ' ' '	mination from the IDS that it is s	Type I Ty	me II or T	Tuno III e	unnortin	~				
f			check this box	mination from the IRS that it is a	турет, ту	rpe II, UI I	ype iii s	upportin	y				
		•			ham faana ah	£4b-							
g			_	on accepted any gift or contribut	lion from a	ny or the							
		following pers											١
			•	itrols, either alone or together w	ith persons	s describe	ed in (ii)					Yes	No
			pelow, the governing body of	• •							11g(ı)	├─	
		•	member of a person describe	***							11g(ıı)		ļ
		(iii) A 35% c	ontrolled entity of a person de	escnbed in (ı) or (ıı) above?							11g(III)	<u></u>	l
<u>h</u>		Provide the fo	ollowing information about the	e supported organization(s)	_	-			1				
(i)		e of supported	(iı) EIN	(iii) Type of organization	1 ' '	organization		ou notify		Is the	(vii) Am		
	org	anization		(described on lines 1–9 above or IRC section		sted in your document?		nization in of your	organizat (i) organi	ized in the	supp	ort	
				(see instructions))	governing			port?		S?			
					Yes	No	Yes	No	Yes	No			
							1						
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Total					1	1	1						

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

	(Complete only if you che	ecked the box	on line 5, 7, or	8 of Part I.)			
	tion A. Public Support		<u>,</u>	ı ————————————————————————————————————		1	-
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				72,945	71,797	144,742
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		<u> </u>		72,945	71,797	144,742
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						65,964
6	Public support. Subtract line 5 from line 4						78,778
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4				72,945	71,797	144,742
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carned on					0	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				1,567		1,567
11	Total support. Add lines 7 through 10		<u> </u>		<u> </u>		146,309
12	Gross receipts from related activities, etc. (see instructions)				12	
13	First five years. If the Form 990 is for the o	organization's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)(3)		
	organization, check this box and stop here	1					•
Sec	tion C. Computation of Public Su	ipport Percent	tage				
14	Public support percentage for 2009 (line 6,	column (f) divided	by line 11, column	(f))		14	53.84%
15	Public support percentage from 2008 Sche	dule A, Part II, line	14			15	7.44%
l6a	33 1/3 % support test-2009. If the organi	zation did not ched	k the box on line 13	3, and line 14 is 33	1/3 % or more, check	this box	
	and stop here. The organization qualifies a						▶ X
b	33 1/3 % support test—2008. If the organi		-	or 16a, and line 15	is 33 1/3 % or more,	check this	
	box and stop here. The organization qualif				•		>
17a	10%-facts-and-circumstances test—200	. ,	•		or 16b, and line 14 is	10% or	
	more, and if the organization meets the "fac	-					
	organization meets the "facts-and-circumst			-	<u>-</u>	- · ···	▶□
b	10%-facts-and-circumstances test—200		•		•	15 is 10% or	
-	more, and if the organization meets the "fac						
	organization meets the "facts-and-circumst				•		▶□
18	Private foundation. If the organization did		•		•	ructions	
. •	roundation. If the organization did	GICON & DOX O	10, 10a, 10b,	, 01 170, 01606	and box and see ma		

Schedule A (Form 990 or 990-EZ) 2009 Part III Support Schedule for Organizations Described in Section 509(a)(2)

Galled, grants, controlbutions, and membranes places are selected. (Controlbutions, and membranes) less researed (Controlbutions and membranes) less researed (Controlbutions and membranes) less researed (Controlbutions and membranes) less researed (Controlbutions and membranes) less researed (Controlbutions and Market and Language (Controlbutions) less researed (Control	Sac	tion A. Public Support	cked the box	on line 9 of Pa	π1)	-		
1 Offis, grants, contributions, and membershoty less received (Do not include say function (grant and property) and property of the property o			(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
membeshy fees received (0 not notable any "unsual grants") 2 Gross receipts from admissions, merchands sold or services performed, or facilities from admissions, merchands sold or services performed, or facilities from admissions and the organizations for severally purpose or burners under section \$13 3 Gross receipts from admissions that error du an unreliefed state for burners under section \$13 4 Tax revenues leveral for the organization's benefit and either goal for organization without charge or sold the part of organization without charge organization	-	ionali your (or noon your boginning my p	(4) 2000	(5) 2000	(6) 2007	(d) 2000	(6) 2003	(I) Total
soli or services performed, or facilities turnished any activity that is included to the comparation's tiex-exempl purpose of Gross receipts from activities that are not an unrelated trade or business under section \$13 and unrelated trade or business under section \$13 and unrelated trade or business under section \$13 and unrelated trade or business under section \$13 and unrelated trade or business under section \$13 and unrelated trade or business under section \$13 and unrelated trade or business under section \$10 and unrelated trade or business under section \$10 and unrelated trade or business under section \$10 and unrelated trade or business under section \$10 and unrelated trade or business under section \$10 and unrelated trade or business under \$10 and section \$10 and unrelated trade or \$10 and \$10 an	1	membership fees received (Do not include						
4 Tax revenues leved for the organization'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 7 Energy and the paid to or expended on the paid to organization without charge 6 Total. Add lines 1 through 5 7 Energy and the paid to organization without charge 6 Total. Add lines 1 through 5 8 Amounts included on lines 1, 2, and 3 9 Energy and the paid to organization that organization without charge of through the paid on lines 2 and 3 received from disequalified persons the exceed the greater of \$5,000 or 1% of the amount on line 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization in 15 for the year organization organization organization organization organization organization organization organization organization organization of public Support Percentage 7 Public support percentage for 2009 (in the organization of check the box on time 14, and time 15 in more than 33 173 %, and time 15 in nore than 33 173 %, check this box and stop here. The organization qualifies as a publicly supported organization in 15	2	sold or services performed, or facilities furnished in any activity that is related to the						
beself 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 change of Total. Add lines 1 through 5 6 Total. Add lines 1 through 5 7 Amounts included on lines 12, and 3 received from other than dequalified persons by Amounts included on lines 2 and 3 received from other than dequalified persons that exceed the greater of 35,000 or 1% of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the year of the amount on line 13 for the year of the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount of line 13 for the year of the amount of line 13 for the year of the year of the line 13 for the year of the line 13 for the year of line 13 for the year of line 13 for the year of line 13 for the year of line 13 for the year of line 13 for the year of line 13 for the year of line 13 for the year of line 13 for the year of line 13 for line 13	3							
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Schedule A (Form 990 or 990-EZ) 2009 LAUREL EXPRESS INC

20-8570449

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Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

PART II, LINE 10 - OTHER INCOME DETAIL

VARIOUS

\$

1,567

2849 L'AUREL EXPRESS INC

20-8570449

Federal Statements

3/4/2010

FYE: 12/31/2009

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
ADVERTISING AND PROMOTION	29,527
CONFERENCES/MEETINGS	3,418
INSURANCE	400
DUES TO STATE	4,250
TOTAL	\$ 37,595

2849 LAUREL EXPRESS INC

20-8570449 FYE: 12/31/2009

Federal Statements

3/4/2010

Statement 2 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

TO REVITALIZE HISTORIC DOWNTOWN LAUREL IN PARTNERSHIP WITH MEMBERS, PUBLIC AND PRIVATE CONTRIBUTORS AND AS PART OF THE MISSISSIPPI MAIN STREET ASSOCIATION.

Statement 3 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description

IMPROVEMENT OF DOWNTOWN STREETS AND PROMOTING EVENTS LOCATED DOWNTOWN