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# SCANNED SEP 2

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 \$500,000 and total assets less than \$1,250,000 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

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning , 2009, and ending								, 20
В	Check if a	pplicable	nployer identification number					
	Address	change	33-1051164					
닏	Name ch	•	ephone nu	mbe	er			
H	Initial retu Terminate		228-865-5413					
H	Amended	-	E G	F Group Exemption				
Ħ		on pending	Instruc- tions.	GULFPORT, MS 39501		umber ▶	•	OII
=			omania		Accounting			Cash Accrual
	<b>-</b> 000	11011 30 1 (0)(3)	-	npleted Schedule A (Form 990 or 990-EZ).	Other (speci		ب	Casii L. Accidai
_								
	Nebsit	lo. N		<b> </b>			-	nization is <b>not</b>
-			ahaak a	nly one) — ✓ 501(c) ( <b>3</b> ) <b>◄</b> (insert no.) ☐ 4947(a)(1) or ☐ 527	990-EZ, or 9		iea	lule B (Form 990,
				· · · · · · · · · · · · · · · · · · ·				
	Check I			ration is not a section 509(a)(3) supporting organization and its gross receip				
_				urn is not required, but if the organization chooses to file a return, be sur		<del> </del>	irn.	
	art I			9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Fi		<u>▶ \$</u>	fo	189,025
	_			enses, and Changes in Net Assets or Fund Balances (S	ee me msu		101	
	1		_	s, grants, and similar amounts received		1		42,710
	2			evenue including government fees and contracts		2		
	3		•	and assessments		3		22,595
	4	Investment				4		227
	5a			n sale of assets other than inventory		-		
	b			r basis and sales expenses				
0	C	Gain or (los	ss) from	i sale of assets)differ than inventory (Subtract line 5b from line 5a) vities (compl <u>ete applicable parts of Schedule G</u> ). If any amount is from <b>gaming</b> , che	) :. •	5c		
Š	6			( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	eck nere ►			
Revenue	a	Gross reve	_					
ď		reported or	3					
	b	Less: direc	t exper	ses other than fundraising expenses 6b	72,96	8		
	C			s) from special events and activities (Subtract line 6b from line 6a	3)	6c		50,525
	7a	Gross sales	<b> </b>					
	b	Less: cost						
	С	Gross profi	7c					
	8	Other rever	•		)	8		
	9			Id lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<u> ▶</u>	9		116,057
	10	Grants and	l similar	amounts paid (attach schedule)		10		91,269
	11	•		for members		11		28,740
es	12			npensation, and employee benefits		12		
Expenses	13	Professiona	al fees	and other payments to independent contractors		13		
ğ	14	Occupancy		14				
Ш	15	Printing, pu	15					
	16	·-		escribe INSURANCE COSTS, BANK CHARGES, MEETING LUNG	<del></del> ′	16		9,828
	17	Total expe	17		129,837			
ţ	18			for the year (Subtract line 17 from line 9)		18		(13,780)
Net Assets	19	Net assets	or fund	d balances at beginning of year (from line 27, column (A)) (must	t agree with			
As				reported on prior year's return)		19		85,252
de t	20	Other chan	iges in i	net assets or fund balances (attach explanation)		20		
	21			balances at end of year. Combine lines 18 through 20		21		71,472
Р	art II	Balance	Shee	ts. If Total assets on line 25, column (B) are \$1,250,000 or more,			of	Form 990-EZ.
				(See the instructions for Part II.)	(A) Beginning	of year		(B) End of year
22	: Ca	sh, savings,	and in	vestments		85,252 2	2	71,472
23	La	nd and build	lings .			2	3	
24				e▶		2	4	
25	То	tal assets .				85,252 2	5	71,472
26	То	tal liabilities	s (desci	nbe ▶		2	6	
27	Ne	et assets or	fund b	alances (line 27 of column (B) must agree with line 21)	<u> </u>	85,252 2	7	71,472

						· 490 <b>-</b>				
Par	t III Statement of Program Service Accom	plishments (See the instr	uctions for Part II	l.)		Expenses				
Wha	(Required for section 501(c)(3) and 501(c)(4)									
Desc	hat is the organization's primary exempt purpose? Raise funds and contribute to various organizations escribe what was achieved in carrying out the organization's exempt purposes. In a clear and concise									
man	anner, describe the services provided, the number of persons benefited, and other relevant information for									
each	program title.				for ot	(a)(1) trusts; optional hers.)				
28	Through a wide variety of small fundraisers, raised	money and contributed to va	rious charitable and	<u> </u>						
	educational organizations	***************************************								
	(Grants \$ 116,057) If this amount	: includes foreign grants, ch	ack hore	<b>▶</b> □	28a	91,269				
29					200					
23	their families.	Through a wide variety of small fundraisers, raised money and contributed to various members and								
	•••••••••••••••••••••••••••••••••••••••	•••••								
	(Grants \$ 28,740) If this amount	unaludas fararas arasta ab		. ▶ □	29a	28,740				
30	<del></del>				298	20,740				
30										
	10									
		includes foreign grants, ch	eck here	. ▶ ⊔	30a	,				
31	Other program services (attach schedule)									
		includes foreign grants, ch			31a					
	Total program service expenses (add lines 28a				32	120,009				
Par	t IV List of Officers, Directors, Trustees, and Ke									
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contribute employee benefi	t plans &	(e) Expense account and				
	<del></del>	devoted to position	enter -0)	deferred compe	nsation	other allowances				
MIC	HAEL MIDDLETON, 2992 W. BEACH BLVD.	PRESIDENT								
_	FPORT, MS 39501		0							
REN	E WILEY, 2992 W. BEACH BLVD	VICE-PRESIDENT		l						
GUL	FPORT, MS 39501	TIOE-I REGIDENT	0							
SAL	LY SHARLOW, 2992 W. BEACH BLVD.	SECRETARY								
GUL	FPORT, MS 39501	SECRETART	0							
DON	IALD WILSON, 2992 W. BEACH BLVD.	TREASURER								
GUL	FPORT, MS 39501	TREASURER	0							
REB	ECCA MONTGOMERY, 2992 W. BEACH BLVD.	EVECUTIVE DIDECTOR		-						
GUL	FPORT, MS 39501	EXECUTIVE DIRECTOR	0							
		1								
		1								
		1								
	<del></del>		<u> </u>							
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	•••••••••••••••••••••••••••••••••••••••	1								
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	<del></del>					<del></del>				
		1								
		1	1		I					

	90-EZ (2009)		P	age 3
Part	Other Information (Note the statement requirements in the instructions for Part V.)	,		
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	Yes	No ✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
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 why the organization did not report the income on Form 990-T.	<u> </u>		
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		1
ь 36	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	35b 36		
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0  Did the organization file Form 1120-POL for this year?	37b		
38a	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 outstanding at the end of the period covered by this return?	38a		1
39	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b  Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on line 9	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	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		✓
С	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 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	40e		1
41	List the states with which a copy of this return is filed. ▶ MISSISSIPPI			•
42a	The state of the second property of the secon		5-5413	3
h	Located at ► 2992 W. BEACH BLVD., GULFPORT, MS ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority	39	501	
-	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		✓
	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.			
	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: ▶	42c		1
43	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		. •	<b>▶</b> □
	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		Yes	No
45	Form 990-EZ	44		✓
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	  -FZ	(2000)
	FOR	. 356		シルバロ

Part VI

Part \	Section 501(c)(3) organizations and 501(c)(3) organizations and section 49 and complete the tables for lines 50 a	section 4947(a)(1) nor 947(a)(1) nonexempt chand 51.	nexempt charit aritable trusts m	able trusts only. A ust answer question	II sect	tion –49b
46	Did the organization engage in direct or indirect	ct political campaign activ	rities on behalf of	or in opposition to		Yes No
	candidates for public office? If "Yes," complete				46	- ✓
	Did the organization engage in lobbying activitie				47	<b>√</b>
	Is the organization a school as described in secti				48	- 1
	Did the organization make any transfers to an e If "Yes," was the related organization a section	•	~		49a	<b>-   ✓</b>
50	Complete this table for the organization's five hemployees) who each received more than \$100	nighest compensated emp		n officers, directors,	<b>49b</b>   trustee ter "No	es and key one "
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation		(e)	Expense ount and allowances
NONE						
		·				
					<del></del>	
						-
f	Total number of other employees paid over \$10	<u> </u>				
	\$100,000 of compensation from the organization  (a) Name and address of each independent contractors	·		Type of service	(c) Com	pensation
NONE		· · · · · · · · · · · · · · · · · · ·			-	
				,		
d	Total number of other independent contractors	ozah racawan ayar \$100	000	0	<del></del>	
	,					
0:	Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete Declaration	ned this return, including accompin of preparer (other than officer) is	anying schedules and s based on all informat	statements, and to the bestion of which preparer has	t of my k any knov	knowledge vledge
Sign Here	Signature of officer			Date 8/2/2010		
	Type or print name and title					<del></del>
Paid Prepare	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying num	iber (See i	- instructions)
Use Onl	Firm Shame (or			EIN ► Phone no ►		
May the	e IRS discuss this return with the preparer show	n above? See instructions		<b>.</b> 🕨 🗀	Yes	☐ No
				For	ggn.	-F7 (2000)

#### 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.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number MISSISSIPPI POWER COMMUNITY CONNECTION, INC. 33 1051164 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33\% % 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 331/3 % 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I **b** Type II c ☐ Type III–Functionally integrated **d** Type III-Other e 🗆 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). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting f Since August 17, 2006, has the organization accepted any gift or contribution from any of the α following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? . . . . 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (ii) EIN (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of the organization in organization (described on lines 1-9 in col (i) listed in your organization in col support col (i) of your above or IRC section. governing document? (i) organized in the (see instructions)) support? US? Yes Yes Yes

Total

Schedule	A /Earm	000 0-	000 EZ	2000

Page 2

Pa	Support Schedule for Org (Complete only if you chec	<b>janizations</b> l ked the box	Described in on line 5, 7,	Sections 17 or 8 of Part I.	'O(b)(1)(A)(iv) .)	and 170(b)(	1)(A)(vi)
Sec	tion A. Public Support						-
Ca	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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				<u>.                                    </u>		
4	Total. Add lines 1 through 3						
5 6	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) Public support. Subtract line 5 from line 4						
	tion B. Total Support						
	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	, , , , , , , , , , , , , , , , , , , ,	(4) 2000	(5) 2000	(6) 2001	(d) 2000	(e) 200 <del>3</del>	(i) rotal
7	Amounts from line 4		-	·-			
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 carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 .	:					
12	Gross receipts from related activities, etc	(see instruction	ons)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he		on's first, secon				
Sec	tion C. Computation of Public Su	port Perce	ntage	<u> </u>	<u> </u>		<u> </u>
14	Public support percentage for 2009 (line	•		L. column (fl)		14	%
15	Public support percentage from 2008 Sch		-	,, 00,0,,,,,		15	%
	33½ % support test—2009. If the organiz	•	•	n line 13 and l	ine 14 is 33% 9		
	and <b>stop here</b> . The organization qualifies						
ь	331/3 % support test - 2008. If the organiz	_	· · ·		and line 15 is:	331/2 % or more	
	box and stop here. The organization qua						
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances" the organization meets the "facts-and-circumstances" the organization meets the "facts-and-circumstances" the organization meets the	09. If the organ	nzation did not o nstances" test,	check a box on licheck this box a	line 13, 16a, or and <b>stop here.</b>	16b, and line 1 Explain in Part	4 is 10% or IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circum nces" test. The	nstances" test, c organization qua	heck this box a ilifies as a public	ind <b>stop here</b> ly supported or	Explain in Part ganization	IV how the

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

_	(Complete only if you check	ed the box or	n line 9 of Pa	rt I.)			
	ction A. Public Support						
C	alendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include						
	any "unusual grants ")	14,397	80,804	26,691	30,251	65,305	217,448
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	77,851	96,334	166,787	212,848	123,493	677,313
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied 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					ļ	
6	Total. Add lines 1 through 5	92,248	177,138	193,478	243,099	188,798	894,761
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year					,	
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						894,761
	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	92,248	177,138	193,478	243,099	188,798	894,761
iva	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	145	247	311	236	227	1,166
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		,				
С	Add lines 10a and 10b	145	247	311	236	227	1,166
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			,			
13	Total support. (Add lines 9, 10c, 11, and 12.)					İ	895,927
14	First five years. If the Form 990 is for toganization, check this box and stop I			d, third, fourth,			n 501(c)(3)
Sec	tion C. Computation of Public Sup				- •		<del></del>
15	Public support percentage for 2009 (line	e 8, column (f)	divided by line	13, column (f	)) L	15	99.9 %
16	Public support percentage from 2008 S	Schedule A, Pa	rt III, line 15		<u></u> . [	16	99.9 %
Sec	tion D. Computation of Investmen	· · · · · · · · · · · · · · · · · · ·			1		
17	Investment income percentage for 2009				lumn (f)) .	17	0.1 %
18	Investment income percentage from 20					18	0.1 %
19a	331/3 % support tests – 2009. If the orga 17 is not more than 331/3 %, check this bo	inization did no	t check the bo	x on line 14, ar	nd line 15 is mo	ore than 331/3 %	6, and line nization ▶ ☑
b	33% % support tests – 2008. If the organi line 18 is not more than 33% %, check this	zation did not d	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	3⅓ %. and
20	Private foundation. If the organization of						

	orm 990 or 990-EZ) 20						Page 4
Part IV	Supplemental Part II, line 17a	Information. or 17b; and	Complete this Part III, line 12	part to provi Provide any	ide the explana other addition	ations required al information.	by Part II, line 10; See instructions.
•							
************							
					••••		
		• • • • • • • • • • • • • • • • • • • •					
		•					

Mississippi Power Community Connection, Inc. 990 Attachment 1 - Grants and Similar amounts paid For year-end December 31, 2009 EIN: 33-1051164 Page 1

#### Line 10 Grants and similar amounts paid

Coast Chapter	φ	04.00
March of Dimes	\$ \$	24.00
Dues Reimbursement	φ \$	1,195.00
St. Vincent DePaul	\$	36.00 750.00
Twelve Baskets Food Bank	\$	500.00
Diabetes Foundation of MS	\$	500.00
Alzheimers Association of MS	\$	500.00
Mental Health Association of MS	\$	500.00
Salvation Army	\$	250.00
Pink Heart Funds	\$	1,000.00
Long Beach Food Pantry	\$	255.00
Pass Road Elementary	\$	300.00
Family Court Volunteer Fund	\$	500.00
Feed My Sheep	\$	1,500.00
1/29-American Heart Assoc-Jackson County Heart Walk	\$	500.00
2/6-Dalton State College-Clifton Parrett scholarship	\$	250.00
2/6-MGCCC-Clinton Parrett scholarship	\$	250.00
2/9-Mississippi College-Ashton Dearman scholarship	\$	250.00
2/10-Mississippi State University-Allan Rowe scholarship	\$	250.00
2/10-University of South Alabama-Allison Everett scholarship	\$	250.00
2/26-American Cancer Society-Ocean Springs Relay for Life	\$	250.00
2/26-American Cancer Society-East Central Relay for Life	\$	250.00
3/16-University of Alabama-Darrell Rudolph scholarship	\$	250.00
3/16-American Cancer Society-George County Relay for Life	\$	250.00
3/16-American Cancer Society-Pascagoula Relay for Life	\$	250.00
3/16-Gulf Coast Community Foundation Explosion of Excellence-Jackson County	\$	1,000.00
3/26-The Leukemia & Lymphoma Society - Carly Amber Phillips (Team in Training	\$	100.00
4/9-Gulf Coast Community Foundation Explosion of Excellence-George County	\$	1,000.00
7/23-Gayle Crump-Christmas in July school supplies shopping	\$	200.00
7/31-Wal-Mart (Christmas in July school supply purchase)	\$	346.37
8/3-Glenda York reimbursement for Christmas in July shopping (Academy Sports)	\$	23.96
8/4-Sally Sharlow reimbursement for Chirstmas in July shopping	\$	303.64
8/12-Gulf Coast Down Syndrome Society (2009 Buddy Walk) 8/14-March of Dimes (Jackson County March for Babies)	\$	500.00
9/23-The Lord Is My Help (Christmas food bank)	\$ \$	750.00
9/23-United Christian Outreach, IncOur Daily Bread (Christmas food bank)	\$ \$	750.00
9/23-Jackson County Youth Court-Rhonda Crane Shelter (Christmas)	•	750.00
9/24-Salvation Army-George County (Holiday food)	\$ \$	500.00 500.00
10/2-Mississippi State University- Seth Dearman scholarship	Φ \$	250.00
10/2-University of South Alabama-Nicole Henderson scholarship	φ \$	250.00
10/2-Mississippi State University- Allan James Rowe scholarship	\$	250.00
10/2-University of Southern Mississippi - Timothy R. Hill scholarship	\$	250.00
10/2-Alcorn State University - DwunShae Wells scholarship	\$	250.00
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## Mississippi Power Community Connection, Inc. 990 Attachment 1 - Grants and Similar amounts paid For year-end December 31, 2009

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10/28-Jackson County Multisport Club (Hurley Hustle)-Angels Over The Children ε	\$ 225.00
11/2-St. Vincent DePaul Community Pharmacy	\$ 1,000.00
11/5-Home of Grace	\$ 400.00
11/5-Home of Grace-The Haven - Women & Families	\$ 400.00
11/5-The Salvation Army - Domestic Violence Shelter	\$ 400.00
11/5-The Salvation Army - Jackson County	\$ 500.00
11/5-Jackson County Literacy Council	\$ 150.00
11/9-Cash (Salvation Army Angel Tree shopping)	\$ 3,000.00
11/18-Wal-Mart-Jackson County Literacy Council items	\$ 21.94
11/19- Fort Bayou Volunteer Fire Department - support 8 Jackson County Fire Dis	\$ 100.00
11/24-Cash (Salvation Army Angel Tree shopping)	\$ 2,500.00
11/24-Born-Literacy Council Items reimbursement	\$ 75.25
12/4-Wal-Mart - Salvation Army Angel Tree shopping	\$ 1,049.96
12/14-Wal-Mart - Salvation Army Angel Tree shopping	\$ 925.64
12/21-Sonda Williams - reimbursement for Angel Tree shopping lunches (S. Willia	48.36
12/21-Wanda Born-reimbursement for Angel Tree shopping 2 children and Mrs. El	\$ 222.00
1/2-Salvation Army (balance of cash dispersed & can recycle money)	\$ 770.21
4/8 - Make a Wish	\$ 500.00
5/05 - Relay for Life - American Cancer Society	\$ 8,620.63
5/06 - American Cancer Society - funnel cake proceeds	\$ 2,696.75
12/1 - Cash Angel Tree money to disperse to employees to buy gifts	\$ 5,000.00
9-22 - American Heart Assn.	\$ 1,000.00
11-3 - Diabetes Foundation of Mississippi	\$ 1,000.00
11-3 - United Way of Southeast Mississippi	\$ 530.00
11-13 - Domestic Abuse Family Shelter	\$ 500.00
11-13 - Waiting for a Cure	\$ 500.00
11-30 - Pinebelt Association for Families	\$ 500.00
11-30 - Friends of The South Miss. State Hospital	\$ 500.00
11-30 - Home of Hope for Children	\$ 500.00
11-30 - Sav-A-Life of Pearl River Area, Inc.	\$ 500.00
11-30 - Petal Children's Task Force	\$ 3,000.00
11-30 - Children's Center for Communication and Development	\$ 3,000.00
12-2 - Petal Lighthouse Mission	\$ 1,000.00
12-8 - Salvation Army - Hattiesburg	\$ 3,000.00
12-8 - Salvation Army - Laurel	\$ 2,000.00
12-10 - City of Petal - Canine Fund	\$ 500.00
March of Dimes	\$ 891.00
Salvation Army Angel Tree	10,000.00
Families in Need	1,143.00
Harrison County Volunteer Fund (Children's Shelter)	\$ 3,000.00
Kids Kicking Cancer	\$ 200.00
Sisters with Purpose	\$ 250.00
American Cancer Society/ Relay for Life	\$ 482.59
Marketing United Way	\$ 206.99
	\$ 765.00
Kiwanis Foundation	\$ 500.00

Mississippi Power Community Connection, Inc. 990 Attachment 1 - Grants and Similar amounts paid For year-end December 31, 2009 EIN: 33-1051164

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Total

American Heart Association	Φ	44.50
	\$	14.50
American Heart Association	\$	14.50
American Heart Association	\$	23.50
American Heart Association	\$	9.00
American Heart Association	\$	74.25
American Heart Association	\$	46.50
American Heart Association	\$	58.00
American Heart Association	\$	20.00
American Heart Association	\$	20.00
American Heart Association	\$	20.00
American Heart Association	\$	20.00
American Heart Association	\$	80.00
Harrison County Children's Emergency Shelter	\$	500.00
First Baptist Church	\$	300.00
United Way Jeans Pass Day	\$	10.00
Salvation Army Christmas bike drive	\$	1,000.00
Salvation Army Angel Tree	\$	5,000.00
Salvation Army Christmas bike drive	\$	290.00
Salvation Army Christmas bike drive	\$	385.00
Salvation Army Christmas bike drive	\$	50.00
Salvation Army Christmas bike drive	\$	375.00
Salvation Army Christmas bike drive	\$	100.00

\$

91,269