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Department of the Treasury Internal Revenue Service

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)

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

Open to Public Inspection

	For the 200	9 calendar ve	ear, or tax year beg	inning 06/	/01/09 , and endin	g 05/31	1/10			
	Check if applica		C Name of organization		IOR LEAGUE OF				D Emp	loyer identification number
$\overline{}$	Address change	e use IRS			E FUND, INC.		•		-	,
二	•	label or	Doing Business As		1 26	-4680155				
H,	Name change	print or type.		for P.O. box if mail is no	it delivered to street address)		R	oom/suite	1	phone number
∐ i	nıtıal retum	See		CAPITOL S	•		"	Companie	- 16,6,	mone number
\bigcap_{i}	Termination	Specific		te or country, and ZI					G Commun	cerpts \$ 892,514
$\overline{\Box}$	Amended return	Instruc- n tions.	JACKSON	te or country, and 21	MS 39201				G Gross re	ceipis \$ 0.92 , 514
\equiv		E Nom	and address of prin	aunal officer	115 55201				- -	a a grava rotum for
LJ '	Application pen	nding F Nami	s and address or prin	cipal officer						is a group return for ates? Yes X No
									H(b) Are	all affiliates
										ded? Yes No
_	Tau auamat	etetus Y	501(c) (3)	4 (maget ng.)	4047/2//42 22	507			- I II	o," attach a list. (see instructions)
	Tax-exempt		JLJACKSON	(insert no)	4947(a)(1) or	527				
	Website: >	7==1			7 ou .		Τ		2009	ip exemption number
	Type of organi			Association	Other >		L Year	r of formation	2009	M State of legal domicile MS
	art 1	Summa								
		•	•	nission or most si	ignificant activities					
9	S	EE SCHEI	DULE O							
ano										
n e										
Activities & Governance	2 Che	ck this box >	· 🔲 if the organi	zation discontinue	ed its operations or dispos	sed of more that	n 25% of	its net asse	ets	
ž G	3 Num	nber of voting	members of the	overning body (F	art VI, line 1a)				3	11
SS &		-	_		rning body (Part VI, line 1	b)			4	2
/itie			employees (Part V			-,			5	0
cţį									6	11
A		,,,								
	1	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34							7a 7b	0
	D Net	umerateu bu	siriess taxable ilica	ome nom Form 9	90-1, IIIIe 34			Prior Y		Current Year
	8 Con	tributions and	d grants (Part VIII,	line 1h)					10,450	
9	1		revenue (Part VIII	•						77-7-3
Revenue	1		ne (Part VIII, colun		and 7d\		\vdash			94
8	1		•	• • •	•		\vdash			33
2	1		· · · · · · · · · · · · · · · · · · ·	-	9c, 10c, and 11e)	40)	\vdash		10,450	002 514
2 2					Part VIII, column (A), line	12)	-+		10,430	892,514
- 3			ar amounts paid (F			FIVED	\neg \vdash			
S			or for members (Pa				- 1 ⊢			
S S	1				art IX, column (A), lines 5	-10) <u> </u>	$\mathfrak{A} \vdash$			
benses	1		Iraising fees (Part		7.111	\$ 2011	\$1 F			
	b Tota	_	expenses (Part IX			, ,	<u>ما ارہ</u>			
Jm.	17 Othe	er expenses	(Part IX, column (A	A), lines 11a-11d,	, 11f-24f) () () () ()	A. 1	3# L		1	
	18 Tota	al expenses	Add lines 13-17 (r	nust equal Part IX	(, column (A), line 25)				1	
2	19 Rev		penses Subtract I				·.*.		10,449	892,514
ြည် ရှိ								Beginning of C		End of Year
海島	20 Tota	al assets (Par	t X, line 16)				L		10, 44 9	902,704
Net Assets or Surgical Ex	21 Tota	al liabilities (P	art X, line 26)							
울	22 Net	assets or fun	d balances. Subtr	act line 21 from lii	ne 20				10,449	902,704
P	art II	Signatu	re Block		!!=					
		Under penal	ties of penury, I decla	re that I have exam	ined this return, including acc	companying sched	lules and s	statements, ar	nd to the best	of my knowledge
		and belief, it	is true, correct, and	complete Declaration	on of preparer (other than offi	cer) is based on a	il informati	ion of which p	reparer has a	iny knowledge
Sig	ın	1	Donie	W. Le	~~				4	1 13 11
He		Signatu	re of officer						L Dat	
		\ √√_\	78, 6	100 1	1207 A	ام (مد د	1000	1110 -	A Day	ka kam
		10\6	print name and title	4.11.	TENTOW A	W///X	MAG	Jue 2		
		y 13po 01	Print name and the		<u> </u>			-		Preparer's identifying number
Pai	id	Preparer's	11 A	judett E		Dat		Check, self-	k f	(see instructions)
	eparer's	signature	1 W.V		<u></u>		-12-11		oyed 🕨 💄	_ P00001694
	-	Firm's name	(Of VOURS &		IN & RUSS CO.	, PLLC			EIN	▶ 20-5630688
US	e Only	if self-emplo		5 EAST C	CAPITOL STREE	T			Phone	•
		address, and	ZIP+4 JZ	CKSON, M	ıs 39201				no	▶ 601-354-4926
May	the IRS di	scuss this re	tum with the prepa	arer shown above	? (see instructions)					Yes No

		LEAGUE OF JACKSON		6-4680155		Page 2
1	★ III Statement of Prog Briefly describe the organization's r EE SCHEDULE O	ram Service Accomplishme	ents		<u>.</u>	
	33323					
	•	significant program services during t	he year which were r	not listed on		
	the prior Form 990 or 990-EZ? If "Yes," describe these new servic	es on Schedule O			L	Yes X No
	·	ting, or make significant changes in h	ow it conducts, any p	program		
	services?	.		·		Yes 🗓 No
	If "Yes," describe these changes of		1- 4b 1	b	_	
		evements for each of the organizatior ganizations and section 4947(a)(1) tru				
		enses, and revenue, if any, for each p	•	•		
4a	(Code) (Expenses \$	ıncludıng	grants of \$) (F	Revenue \$)
		KEYSTON	IE			
_		WITHIN A STRUCTURE PORTING ELEMENT FO				RUCTURE
Pi Fi	ROJECTS YET TO CO UTURE - NOT ONLY HE FUTURE OF EACH	WILL SERVE AS THE ME, AND IS LITERAL FOR THE FUTURE OF LIFE THE LEAGUE VEXISTS TO SUPPORT	LY SOMETHE THE JUNION VILL TOUCH	ING TO BUILD R LEAGUE OF . IT WILL E	UPON FOR TH	Œ
4b	(Code) (Expenses \$	ıncludıng	grants of \$) (F	Revenue \$)
	•	•	•			
						•
			•			
	•				•	•
			•			
4c	(Code) (Expenses \$	ıncludıng	grants of \$) (Revenue \$)
			••			•
		• •		•		
		•				
				• • • •		
4d	Other program services (Describe	e in Schedule O)	<u> </u>			
	(Expenses \$	including grants of \$) (Revenue \$)	
40	Total program service expenses	; >				

Pa	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	ı
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	İ	ĺ
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	i	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	[
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			l
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			ŧ
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			Ī
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			Ī
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ļ		
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	ł		1
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	45	1	x
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	 	┢┻
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		x
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		┢┸
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	47		x
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	\vdash	┢▔
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40	1	x
46	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	 	 ^
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19	Į.	x
20	If "Yes," complete Schedule G, Part III	20	 	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		99C	

Form 990 (2009) THE JUNIOR LEAGUE OF JACKSON MS, INC 26-4680155 Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the X 22 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII. Section A. line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines X 24b through 24d and complete Schedule K. If "No," go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or X 25b 990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 X 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? X If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L. Part IV An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 X Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 X 34 III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X 35 Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 X organization? If "Yes," complete Schedule R, Part V, line 2 36

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

19? Note. All Form 990 filers are required to complete Schedule O

X Form 990 (2009)

37

X

37

Part VI

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1				
	U.S. Information Returns. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0]		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able		7		
	gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	1				
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authorized and the calendar year, did the organization have an interest in, or a signature or other authorized and the calendar year, did the organization have an interest in, or a signature or other authorized and the calendar year.	ority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ıal				
	account)?			4a		X
b	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 Bar	ık				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b	<u> </u>	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	ng		_	1	
_	Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
_	organization solicit any contributions that were not tax deductible?			6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	DΓ			1	
7	gifts were not tax deductible?			6b	ļ	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	10				I
а	and services provided to the payor?	15		7a		ŧ
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	 	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		•	"	1	1
·	required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7a	• •	1	 	<u> </u>
9	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal state of the property of the p			1		Ī
	benefit contract?			7e		Ī
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	•		7f		1
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	i	· •			
	required?			7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				"	1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				1	ŧ
	organization, have excess business holdings at any time during the year?			8	ļ	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.					•
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	ļ	<u> </u>
10	Section 501(c)(7) organizations. Enter	1 4	I			I
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter	1	I			177
а	Gross income from members or shareholders	11a				ļ, '
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b		┥	1	ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10			12a	 	ļ
<u>_ь</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	<u> </u>	1	‡

Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body 1b **b** Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? X 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? X 8a а X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X form? 11 Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this is done 12c X 13 13 Does the organization have a written whistleblower policy? X Does the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the BRENDA ROLAND **805 RIVERSIDE DRIVE** organization: 🕨 601-948-2357

MS 39202

JACKSON

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Check this box if the organization	(B)	Jale	arry (() (2)	iicei,	uile	(D)	(E)	(F)
Name and Title	Average					hat ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ALON BEE										
COMMUNITY TRUSTEE	1.00	x					!	0	0	0
MISSIE BROYLES										
SECRETARY/TREASURER	1.00	x						0	0	0
NANCY FLOWERS		1								
SUSTAINING TRUSTEE	1.00	x			ŀ			0	0	0
LISA LESTER										
TREASURER	1.00	X						0	0	0
VALERIE LINN		1								
PRESIDENT	1.00	X						0	0	0
SARA WILLIAMS								, ,		
SUSTAINING TRUSTEE	1.00	X						0	0	0
CRISLER BOONE										
FUND CHAIR	1.00	X				L		0	0	0
MARGARET CUPPLES		1				•				
FUND DEVELOPMET VP	1.00	X			L.	<u> </u>		0	0	0
LYNNE GREEN		1								
SUSTAINING TRUSTEE	1.00	X				<u> </u>		0	0	0
CHARLES LINDSEY		İ								
COMMUNITY TRUSTEE	1.00	X			_			0	0	0
FRAN WEEKS		l						_		_
PRESIDENT-ELECT	1.00	X						0	0	0

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
	* (A) Name and Title	(B) Average hours per		ition (chec	C) k all t	hat er		(D) Reportable compensation	(E) Reportable compensation	(F) Estima amoun	ted
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compens from t organiza and rela organiza	r sation he ation ated
						ļ	_					
						_	-					
	· · · · · · · · · · · · · · · · · · ·											
												
							 					
					<u> </u>							
1b 2	Total	aludina but nat la	اممان	40.46			4 - 6 -	<u> </u>		00.000	l	
	Total number of individuals (increportable compensation from				ose	liste	з авс	ve)	wno received more than \$1	00,000 in		
3	Did the organization list any for								e, or highest compensated			Yes No
4	employee on line 1a? If "Yes," For any individual listed on line the organization and related or	1a, is the sum of	repo	ortab	le co	mpe	ensat	ion a			3	X
5	individual Did any person listed on line 1a services rendered to the organ	a receive or accru	ie co	mpe	nsat	ion f	rom a	any i	unrelated organization for		4	x
Sec	tion B. Independent Contractor	-	رانان	piete	Sui	euui	e	JI SU	ich person		5	A
1	Complete this table for your five compensation from the organization	ation	nsate	d inc	depe	nder	nt coi	ntrac		·		(0)
	Name and	(A) business address							Descrip	(B) toon of services		(C) impensation
								-				
												-

<u>2</u>	Total number of independent c more than \$100,000 in comper						to th	ose	listed above) who received		0	,
DAA											Form	n 990 (2009)

Pa	rf V	III Stateme	ent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S	 1a	Federated camp	ainns	1a			0.777	1910.100		, , , , , , , , , , , , , , , , , , , ,
ant		Membership due	=	1b						
PE		Fundraising ever		1c						
ifts		Related organiza		1d						
S, E	e	Government grants (co		1e						
Sign		All other contributions,	-	<u> </u>		i				
ribut	•	and similar amounts no		1f		892,420				
Program Service Revenue Contributions, gifts, grants	g h	Noncash contributions Total. Add lines		1f \$	5		892,420			
-		Total. Add lines	10-11			Busn. Code	002/120	·		
eun	2a					Busin. Gode				
Sev.	b									
ce	C					1				
Ξ	d									
E S	u 0									
grai	•	All other program	n convice rever	a					•	
P				iuc		•				
_	3	Investment incor		widend	s interes					· · · · · · · · · · · · · · · · · · ·
		other similar am	- · ·	il via Cira	3, ancics	., a	94	94		
	4	Income from inv	•	evemn	t hand are	ceeds				
	5	Royalties	estinent of tax-	CACITIP	t borid pic	CCCCCC				
	•	Troyanies	(ı) Real		(n) F	Personal				
	6a	Gross Rents	(77.52.		(, .					
		Less rental exps								
	b C	Rental inc or (loss)							,	
	ď	Net rental incom	e or (loss)	L			3			
		Gross amount from	(i) Secuntie	s	(u)	Other				
		sales of assets	(7,000,000	-	(,					
	ь	other than inventory Less cost or other								
	•	basis & sales exps				1				
	C									
	d	Net gain or (loss			l				·	
	-			nte [,			
9	- Ou	(not including \$	riundialoning ever	·~						
79		of contributions rep	norted on line 1c)							
Other Revenue		See Part IV, line 1		a						
þer	h	Less direct expe		ь						
ŏ		Net income or (I		- (events				İ	
i		Gross income from			CVCIIIO		.,			7,
	34	See Part IV, line 19		a a						
	h	Less direct expe		ь						
		Net income or (I		- (vitios	•				
:		Gross sales of I		ing acti	Villes			, , ,		
	IVa	returns and allow		a					,	,
	_			b					,	
		Less cost of go		- (
	-		laneous Revenue		entory	Busn. Code			, , , , , , , , , , , , , , , , , , ,	
	44-	IVIISOEL	THE STATE OF THE S	<u> </u>		Dusii. Code		Ī	′	•
	11a		• • •			 		-		
	b					 		<u> </u>	 	
	0	All ather serves				 				
	d	All other revenue			•			,	,	
	12	Total. Add lines Total Revenue.				*	892,514	<u> </u>	0	0
	14	TOWN REVENUE.	つきき いるけいじじり	13			U	, 24	. •	, ,

Page 10

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16			7	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	· · · · · · · · · · · · · · · · · · ·			
	trustees, and key employees				
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)	-			
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other		<u>.</u>		
12	Advertising and promotion				
13	Office expenses		· . ·. <u>.</u>		
14	Information technology	<u> </u>			
15	Royalties	, ,			
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses		,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				,=
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
24	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	o to to total expenses shown on the 25 below y		. ,		
b					
C					
d	•				
6					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f				
26	Joint costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation	ļ <u>.</u>		<u> </u>	<u> </u>

Part 2	Balance Sheet				
			(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing			1	
2	Savings and temporary cash investments			2	644,405
3	Pledges and grants receivable, net			3	32,691
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors, tr	rustees, key			
	employees, and highest compensated employees Compl	lete Part II of			
	Schedule L			5	
6	Receivables from other disqualified persons (as defined u	inder section		,	
	4958(f)(1)) and persons described in section 4958(c)(3)(E	3) Complete			
	Part II of Schedule L			6	
Assets 8 4	Notes and loans receivable, net			7	
8 8	Inventories for sale or use			8	
4 9	Prepaid expenses and deferred charges			9	•
10a	Land, buildings, and equipment cost or				
'	other basis Complete Part VI of Schedule D	10a			
h	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities	[100]		11	225,608
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	··········
15	Other assets See Part IV, line 11		10,449	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	•	10,449	16	902,704
17	Accounts payable and accrued expenses		10,445	17	302,704
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
1 -	•	Cabaduta D		21	
Liabilities 52	Escrow or custodial account liability Complete Part IV of			-41	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Payables to current and former officers, directors, trustee	•			
<u>ia</u>	employees, highest compensated employees, and disqua	anneu	<u> </u>	22	
	persons Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated third	•		24	
24	Unsecured notes and loans payable to unrelated third par	nies	-	25	
25	Other liabilities Complete Part X of Schedule D				
26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶	?		26	
ĕ		s and			
Ĕ	complete lines 27 through 29, and lines 33 and 34.		10,449		970 012
E 27	Unrestricted net assets		10,449		870,013
m 28	Temporarily restricted net assets			28	32,691
E 29	Permanently restricted net assets	,		29	
죠	Organizations that do not follow SFAS 117, check her	re ▶ <u></u>			
ㅎ	and complete lines 30 through 34.				
र्घ 30	Capital stock or trust principal, or current funds			30	-
8 31	Paid-in or capital surplus, or land, building, or equipment	•		31	
8 32	Retained earnings, endowment, accumulated income, or	other funds		32	
Net Assets or Fund Balances	Total net assets or fund balances		10,449		902,704
Z 34	Total liabilities and net assets/fund balances .		10,449	34	902,704

Form 990 (2009)

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O		_	
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis X Consolidated basis Both consolidated and separate basis			I
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a_	<u> </u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ì	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	_3b		<u> </u>
		Fori	m 990	(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.

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

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

OMB No 1545-0047 2009

> Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE JUNIOR LEAGUE OF JACKSON MS, INC KEYSTONE FUND, INC.

Employer identification number 26-4680155

Schedule A (Form 990 or 990-EZ) 2009

The o	orgai	nization is not a	a private foundation because	it is (For lines 1 through 11, che	eck only or	ne box)					
1		A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(4)(i).				
2	Ш	A school dese	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)							
3		A hospital or	a cooperative hospital service	e organization described in sect	ion 170(b)	(1)(A)(iii)					
4		A medical res	earch organization operated	in conjunction with a hospital de	escribed in	section 1	70(b)(1)	(A)(iii).	Enter th	e hospita	al's name,
		city, and state									
5		An organizati	on operated for the benefit of	a college or university owned o	r operated	by a gove	ernmenta	l unit de	scnbed	ŧП	
		section 170(b)(1)(A)(iv). (Complete Part I	I)							
6		A federal, sta	te, or local government or go	vernmental unit described in se	ction 170(b)(1)(A)(v	') .				
7		An organizati	on that normally receives a si	ubstantial part of its support from	n a govern	mental un	it or fron	n the ger	neral pu	blic	
	_	described in s	section 170(b)(1)(A)(vi). (Co	mplete Part II)							
8	\Box	A community	trust described in section 17	'0(b)(1)(A)(vi). (Complete Part I	I)						
9	П	An organizati	on that normally receives (1)	more than 33 1/3 % of its supp	ort from co	ntribution	s, memb	ership fe	es, and	gross	
	_			ot functions-subject to certain e							
		support from	gross investment income and	l unrelated business taxable inc	ome (less	section 5	11 tax) fr	om busii	nesses		
		acquired by the	ne organization after June 30	, 1975 See section 509(a)(2).	(Complete	Part III)					
10	\Box	•	-	clusively to test for public safet	•		a)(4).				
11	X	An organization	on organized and operated ex	clusively for the benefit of, to pe	erform the	functions	of, or to	carry ou	t the		
		purposes of o	ne or more publicly supporte	d organizations described in sec	ction 509(a)(1) or se	ction 509	(a)(2) S	See sec	tion	
		509(a)(3). Ch	eck the box that describes th	e type of supporting organization	n and com	plete lines	11e thr	ough 11I	h		
		a X Type		c Type III-Function			d		e III-Oti	ner	
е	X	By checking t		nization is not controlled directly	or indirect	lly by one	or more	disquali	fied		
				ind other than one or more publ						tion	
		509(a)(1) or s	section 509(a)(2)								
f		If the organiza	ation received a written deteri	mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g		
		organization,	check this box								$\overline{\mathbf{X}}$
g		Since August	17, 2006, has the organization	on accepted any gift or contribut	tion from a	ny of the		•			
		following per	sons?								
		(i) A persor	who directly or indirectly cor	itrols, either alone or together w	nth persons	s describe	ed in (11)				Yes No
		and (III) b	below, the governing body of	the supported organization?							11g(i) X
		(ii) A family	member of a person describe	ed in (ı) above?							11g(ii) X
		(iii) A 35% c	ontrolled entity of a person de	escnbed in (i) or (ii) above?							11g(iii) X
h		Provide the f	ollowing information about the	e supported organization(s)							
(1)	Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi)	s the	(vii) Amount of
	org	janization		(described on lines 1–9		sted in your		nization in of your	organizat	ion in col	support
				above or IRC section (see instructions))	governing	document?		ort?		S?	
				(000	Yes	No	Yes	No	Yes	No	
TH	E	JUNIOR	LEAGUE OF JACE	SON MS, INC.							
			64-6011106	9	Х		x		X		802,410
					1						
										1	
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			, , , , , , , , , , , , , , , , , , , ,		4 3	£	1	1	1		
Tota	!		·	1 1 1					<u> </u>		802,410

Form 990 or 990-EZ.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

<u>S</u> che	dule A.(Form 990 or 990-EZ) 2009 THE	JUNIOR I	EAGUE OF	JACKSON M	S, INC 26	-4680155	Page 2
	rt II Support Schedule for O	rganizations D	escribed in S	ections 170(b)	(1)(A)(iv) and '	170(b)(1)(A)(vi)	
	(Complete only if you che	ecked the box	on line 5, 7, or	8 of Part I.)			
	tion A. Public Support			,			
Cal	endar 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")						
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						
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)						
6	Public support. Subtract line 5 from line 4		l				
	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			<u> </u>			
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	ļ					
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	<u> </u>	<u> </u>				
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year	as a section 501(c)	(3)	_
	organization, check this box and stop here						>
Sec	tion C. Computation of Public S	upport Percen	tage			· , , , , , , , , , , , , , , , , , ,	
14	Public support percentage for 2009 (line 6	, column (f) divided	by line 11, column	(f))		14	<u>%</u>
15	Public support percentage from 2008 School		•			15	%
16a	33 1/3 % support test—2009. If the organ	nization did not ched	k the box on line 1	3, and line 14 is 33	1/3 % or more, ch	eck this box	_
	and stop here. The organization qualifies		_			•	▶ _
b	33 1/3 % support test—2008. If the organ	nization did not che	k a box on line 13	or 16a, and line 15	ıs 33 1/3 % or mo	re, check this	
	box and stop here. The organization quali	fies as a publicly su	ipported organizati	on			▶ _
17a	10%-facts-and-circumstances test—200	9. If the organization	on did not check a	box on line 13, 16a	, or 16b, and line 1	4 is 10% or	
	more, and if the organization meets the "fa	icts-and-circumstar	ices" test, check th	is box and stop he	re. Explain in Part	IV how the	
	organization meets the "facts-and-circums						▶ _
b	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa						. –
	organization meets the "facts-and-circums	tances" test. The o	rganızatıon qualıfie	s as a publicly supp	oorted organization		P
18	Private foundation. If the organization did	i not check a box o	n line 13, 16a, 16b	, 17a, or 17b, checl	k this box and see	instructions	. ▶ ∟

Schedule A (Form 990 or 990-EZ) 2009 THE JUNIOR LEAGUE OF JACKSON MS, INC 26-4680155 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total, Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2008 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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.

SCHEDULE D . (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2009

Open to Public Inspection

	of the organization		Employer identification number
	HE JUNIOR LEAGUE OF JACKSON MS, INC	į	26-4680155
777	rt I Organizations Maintaining Donor Advised Fun the organization answered "Yes" to Form 990, P	nds or Other Similar Funds or A	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the	he assets held in donor advised	
	funds are the organization's property, subject to the organization's exclus		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wi		
	used only for charitable purposes and not for the benefit of the donor or d	lonor advisor, or for any other	
	purpose conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the orga	inization answered "Yes" to Form	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check at	li that apply)	
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically imp	oortant land area
	Protection of natural habitat	Preservation of certified historic s	tructure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conserva-	ation contribution in the form of a conserva	tion
	easement on the last day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure include	ded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06		2d
3	Number of conservation easements modified, transferred, released, extin	nguished, or terminated by the organization	during
	the taxable year ▶		
4	Number of states where property subject to conservation easement is loc		
5	Does the organization have a written policy regarding the periodic monitor	onng, inspection, handling of	m., n.,
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	ng conservation easements during the year	•
	-		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	nservation easements during the year	
	▶ \$		
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section	П., П.,
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation easement		
	balance sheet, and include, if applicable, the text of the footnote to the or	rganization's financial statements that desc	xides
	the organization's accounting for conservation easements	Historical Transverse or Other 6	Similar Appata
	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to	Form 990, Part IV, line 8.	ommar Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in		
	art, historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance of pu	ublic service,
	provide, in Part XIV, the text of the footnote to its financial statements that		
b	If the organization elected, as permitted under SFAS 116, to report in its		
	historical treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of public	service,
	provide the following amounts relating to these items.		
	(i) Revenues included in Form 990, Part VIII, line 1		. • \$
	(ii) Assets included in Form 990, Part X		. > \$
2	If the organization received or held works of art, historical treasures, or o		de the
	following amounts required to be reported under SFAS 116 relating to the	ese items.	
а	Revenues included in Form 990, Part VIII, line 1		. • \$
b	Assets included in Form 990, Part X		. > \$

	1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	LEAGUE OF				Page 2
Pa	rt III Organizations Maintaining (continued)
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other records, check	k any of the following t	hat are a significant i	use of its	
а	Public exhibition	d Loan	or exchange program	s		
ь	Scholarly research	e Othe	•			
С	Preservation for future generations	_		_		
4	Provide a description of the organization's collect Part XIV	tions and explain how th	ney further the organiza	ation's exempt purpo	se in	
5	During the year, did the organization solicit or re- assets to be sold to raise funds rather than to be					Yes No
Pa	rt IV Escrow and Custodial Arrar				Yes" to Form 99	
	IV, line 9, or reported an amo	_ ,	•			·
1a	Is the organization an agent, trustee, custodian of			assets not	-	
	included on Form 990, Part X?	,				Yes No
b	If "Yes," explain the arrangement in Part XIV and	d complete the following	table			٠٠٠ ب
						Amount
c	Beginning balance				1c	
	Additions during the year				1d	
u	Distributions during the year					
4					10	
1	Ending balance	000 D-+V b 040			1f	
	Did the organization include an amount on Form	990, Pan X, line 217				☐ Yes ☐ No
	If "Yes," explain the arrangement in Part XIV If V Endowment Funds. Comple	to if organization o	nousered "Vee" to	Form 000 Dod	tiv line 10	
1-8	rt V Endowment Funds. Comple					(-) F
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
	Beginning of year balance					
b	Contributions		····			
С	Net investment earnings, gains,					
	and losses					
d	Grants or scholarships					
θ	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
9	End of year balance					
2	Provide the estimated percentage of the year en	d balance held as				
а	Board designated or quasi-endowment ▶	%				
b	Permanent endowment ▶ %					
C	Term endowment ▶ %					
3a	Are there endowment funds not in the possession	on of the organization the	at are held and admini	stered for the		
	organization by.					Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations		•		•	3a(ii)
b	If "Yes" to 3a(ii), are the related organizations lis	ted as required on Sche	dule R?	•		3b
4	Describe in Part XIV the intended uses of the or	oanızation's endowment	funds	•		
Pa	rt VI Investments—Land, Buildin			Part X. line 10		
	Description of investment	(a) Cost or other basis	(b) Cost or oth	· · · · · · · · · · · · · · · · · · ·	cumulated	(d) Book value
	·	(investment)	basis (other	1 ''	eciation	(-,
10	Land					
	Buildings					
	Leasehold improvements				· · · · · · · · · · · · · · · · · · ·	
			-			
	Equipment					
	Other	L. Borm 000 Part Y sole	Imp (B) line 10(a))			·

Schedule D.(Form 990) 2009 THE JUNIOR LEAGUE OF		26-4680155	Page 3
Part VII Investments—Other Securities. See Form 99	U, Paπ X, line 12.	(c) Method of valuatio	
(a) Description of security or category (including name of security)	(b) Book value	Cost or end-of-year marke	
		000, 0, 0, 0, 0, 0, 0	
Financial derivatives			
Closely-held equity interests	-		
Other			
	· 		
	·		
	·	· · · · · · · · · · · · · · · · · · ·	
			
		·	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		<u> </u>	
Part VIII Investments—Program Related. See Form 99			
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year marke	t value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>	<u> </u>	
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
			
			
	· · · · · · · · · · · · · · · · · · ·		
			
			
			<u></u>
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		>	
Part X Other Liabilities. See Form 990, Part X, line 2		<u> </u>	··
1. (a) Description of liability	(b) Amount	4	
Federal income taxes			
		4	
		1	
		!	,
		!	
]	
		1	" "
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	·	, , , , , , , , , , , , , , , , , , , ,	<u> </u>
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organ	nization's financial statements	that reports the	
organization's liability for uncertain tax positions under FIN 48			

_	dule D (Form 990) 2009 THE JUNIOR LEAGUE OF JACKSON M			26-468015		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audit</u>	<u>ed Fir</u>	nancial Stateme	<u>ents</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)				_1_	892,514
2	Total expenses (Form 990, Part IX, column (A), line 25)				2	
3	Excess or (deficit) for the year Subtract line 2 from line 1				3	892,514
4	Net unrealized gains (losses) on investments				4	-259
5	Donated services and use of facilities				5	
6	Investment expenses				6	
7	Pnor period adjustments				7	
8	Other (Describe in Part XIV)				8	
9	Total adjustments (net) Add lines 4 through 8				9	-259
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9				10	892,255
_	rt XII Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Re	venue per Reti	ırn	
1	Total revenue, gains, and other support per audited financial statements				1	892,255
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a	i	-259		
ь	Donated services and use of facilities	2b				
c	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	2d				
6	Add lines 2a through 2d				2е	-259
3	Subtract line 2e from line 1			ŀ	3	892,514
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1	1		•	032,314
	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
a	Other (Describe in Part XIV)	4b		· · · · · · · · · · · · · · · · · · ·		
b	Add lines 4a and 4b	40	1		4.	
С 5					4c	892,514
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) If XIII Reconciliation of Expenses per Audited Financial Statement	nte V	Mith E	vnonege nor P	_ •	
1	Total expenses and losses per audited financial statements	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	* I (I) L	Apenses per it	4	<u> </u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
a	Donated services and use of facilities	2a	1			
	Prior year adjustments	2b				
b		2c	 			
C	Other losses		 			
đ	Other (Describe in Part XIV)	2d	l			
9	Add lines 2a through 2d Subtract line 2e from line 1			•	2е	
3		1	1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	 			
b	Other (Describe in Part XIV)	4b	<u> </u>	=	4-	
_	Add lines 4a and 4b	•		•	4c	
<u>5</u>					5	
	ert XIV Supplemental Information	40.00	1 4 0	4 15 4 15 15 15 15 15 15 15 15 15 15 15 15 15		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines					
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	za and	140 AI	so complete		
	eart to provide any additional information ART XIV - SUPPLEMENTAL FINANCIAL INFORMATIO	AT .				
<u>-</u>	WI WIA - DOLLHERMINIAN LINENCIAN INLOCKATION	`				·
_T	HERE_WERE NO_EXPENSES TO_BE REPORTED_IN PAR!	r_xi	III			
						· -
_						
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						. -

Schedule D (Fo	rm 990) 2009	THE JUNIOR	LEAGUE	OF J	JACKSON	MS, INC	26-4680155	Page 5
Part XIV	Supplemen	THE JUNIOR tal Information (c	ontinued)			· · · · · · · · · · · · · · · · · · ·		
			- -					
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		. 						
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public Inspection

OMB No 1545-0047

Name of the organization TH

THE JUNIOR LEAGUE OF JACKSON MS, INC KEYSTONE FUND, INC.

Employer identification number 26-4680155

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

THE GENERAL PURPOSE OF THE JUNIOR LEAGUE OF JACKSON KEYSTONE FUND, INC.

(THE KEYSTONE FUND) IS TO SECURE THE LONG-TERM FINANCIAL FUTURE OF THE

JUNIOR LEAGUE OF JACKSON, MISSISSIPPI (THE LEAGUE). THE KEYSTONE FUND WILL

HOLD AND INVEST FUNDS FOR THE BENEFIT OF THE LEAGUE AND DISTRIBUTE FUNDS

THAT WILL BE USED TO SUPPORT THE LEAGUE IN MEETING ITS MISSION.

FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT

OBJECTIVE IS TO GROW A FUND THAT WILL BE SUBSTANTIAL ENOUGH TO HELP SUPPORT

THE LEAGUE IN THE EVENT OF A DECLINE IN SPONSORSHIPS OR A SHORTFALL IN THE

LEAGUE'S FUND DEVELOPMENT BUSINESSES.

THE JUNIOR LEAGUE OF JACKSON HOPES TO STEADILY GROW THE KEYSTONE FUND
THROUGH TAX-DEDUCTIBLE DONATIONS AND TAX-WISE PLANNED GIVING, INCLUDING
GIFTS MADE TO THE KEYSTONE FUND THROUGH WILLS AND ESTATE PLANNING. WHILE
CERTAIN GIVING LEVELS HAVE BEEN DESIGNATED FOR SPECIAL RECOGNITION, THERE
IS NO MINIMUM DONATION. GIFTS OF ANY SIZE ARE WELCOMED AND APPRECIATED.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE BOARD OF DIRECTORS WILL BE PROVIDE A COPY OF THE FORM 990. THE
PRESIDENT WILL DISTRIBUTE A COPY ELECTRONICALLY TO EACH MEMBER. THE FORM
990 WILL BE VOTED UPON AND THEN FILED UPON APPROVAL OF THE BOARD OF
DIRECTORS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

Name of the organization

THE JUNIOR LEAGUE OF JACKSON MS, INC

Employer identification number 26-4680155

THE CONFLICT OF INTEREST STATEMENT MUST BE FILED AT LEAST ANNUALLY, BY EACH TRUSTEE AND VOLUNTEER OF KEYSTONE. THIS STATEMENT IS REVIEWED BY THE BOARD OF DIRECTORS, AND IF THERE IS ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE BOARD OF DIRECTORS DISCUSSES AND VOTES ON WHETHER A CONFLICT OF INTEREST EXISTS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

SCHEDULE R	Related Orga	Related Organizations and Unrelated Partnerships	nrelated Partne	rships		OMB No 15,45-0047
(255 1110 1)	Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.	tion answered "Yes" to I	orm 990, Part IV, line 3	3, 34, 35, 36, or 37.		2009
Department of the Treasury Internal Revenue Service	▶ Attach to	Attach to Form 990.	See separate instructions.	ú		Open to Public Inspection
Name of the organization	THE JUNIOR LEAGUE OF JACKSON MS, INCKEYSTONE FUND, INC.				Employer identific 26-4680155	Employer identification number 26–4680155
Part i Identific	Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	rganization answere	ed "Yes" to Form 99	90, Part IV, line 33.)		
Ÿ	(a) Name, address, and ElN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
:						
Part # dentific	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	omplete if the organ the tax vear.)	ization answered "	Yes" to Form 990, F	Part IV, line 34 beca	ause it
N.	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
THE JUNIOR LEAGUE OF 805 RIVERSIDE DRIVE JACKSON	SUE OF JACKSON, INC. 64-6011106 MS 39202	VOL. PROM	MS	50103	6	N/A
:						
For Privacy Act and Paper	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	90.			Sche	Schedule R (Form 990) 2009

Page 2 (j) General or managing partner? Yes Schedule R (Form 990) 2009 Percentage ownership Ξ amount in box 20 of Schedule K-1 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V—UBI (Form 1065) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) end-of-year assets Share of 6 (h) Dispro-portionate Yes alloc 2 (g) Share of end-of-year Share of total income (f) Share of total income (C corp. S corp. Type of entity or trust) Predominant income (related, unrelated, excluded from tax under sections 512-514) Direct controlling entity ਉ 26-4680155 (d) Direct controlling Legal domicile foreign country) (state or THE JUNIOR LEAGUE OF JACKSON MS, INC (c) Legal domicile (state or foreign ∞untry) Primary activity Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Schedule R (Form 990) 2009 Part IV Parti § : Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

			3	1
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			S	
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				:
a Receipt of (I) interest (II) annuities (III) royalties (Iv) rent from a controlled entity		<u>e</u>		4
b Gift, grant, or capital contribution to other organization(s)		9		×
c Gift grant or capital contribution from other organization(s)		19	×	
		14		×
d Louis of loan guarantees to or for other organization(s)		16		×
Sale of assets to other organization(s)		14		×
a Purchase of assets from other organization(s)		19		×
		ŧ		×
		=		×
				:
j Lease of facilities, equipment, or other assets from other organization(s)		=		×
k Performance of services or membership or fundraising solicitations for other organization(s)		¥		×
1 Performance of services or membership or fundraising solicitations by other organization(s)		=		×
m Shanng of facilities, equipment, mailing lists, or other assets		Ę	×	
n Sharing of paid employees		4		×
		•		>
 Reimbursement paid to other organization for expenses 		₽.		;
p Reimbursement paid by other organization for expenses		2	T	<u> </u>
		7		×
q Other transfer of cash or property to other organization(s)		-		×
	on thresholds			
(a)	(q)	<u>(၁</u>		
Name of other consultation	Transaction	Amount involved	lved	
ואמווים כו כווכן סואמוויבאוסו	type (a-r)			
ONT MOSMOET GO STIDEST GOTHIT SHE	U		802,	802,410
THE CONTON MENOCOLO TO CONTON TO CON				
(2)		ŀ	Ì	
(5)				
(4)				
(c)				•
(6)	Sohedu	Schedule R (Form 990) 2009	(066 1	2009

Page 4

26-4680155 THE JUNIOR LEAGUE OF JACKSON MS, INC Schedule R (Form 990) 2009 Part VF* Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

The first of centry (state or foreign of country) (state or foreign of country) (state or foreign of country) (state or foreign of country) (state or foreign of country) (state or foreign or country) (state or foreign of country) (state or foreign or country) (state or foreig	(a) (b) (c)	(a)	(0)	9	L	€	L	ε	_
County C	Name, address, and EIN of entity	Primary activity	Legal domicile	Are all partn		Disproportion		Gener	alor
Chem 1059 Chem			(state or foreign	section		allocations		mana	ging er?
7 458 NO) 	organization			(Form 1065)		
					0	-	0	Yes	ş
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Form **8868**

(Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Automatic 3-Month Extension of Time. Only submit original (no copies needed). Pařt-l A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Name of Exempt Organization Employer identification number Type or THE JUNIOR LEAGUE OF JACKSON MS, INC print 26-4680155 KEYSTONE FUND, INC. File by the due date for Number, street, and room or suite no. If a P O box, see instructions. filing your 415 EAST CAPITOL STREET return See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions JACKSON MS 39201 Check type of return to be filed (file a separate application for each return) Form 4720 Form 990 Form 990-T (corporation) Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 6069 Form 990-EZ Form 990-T (trust other than above) Form 8870 Form 990-PF Form 1041-A The books are in the care of FAX No. ▶ Telephone No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is If it is for part of the group, check this box for the whole group, check this box and attach a list with the names and EINs of all members the extension will cover. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 01/15/11 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar vear tax year beginning 06/01/09, and ending 05/31/10. Final return Change in accounting period If this tax year is for less than 12 months, check reason. Initial return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax \$ payments made. Include any prior year overpayment allowed as a credit. 3h Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3с Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev 4-2009)

W. Budett Run CAR

9-23-10