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1JACKJIL **539/0**4/2010 7 35 AM **Return of Organization Exempt From Income Tax** OMB No 1545-0047 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Department of the Treasury Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 06/01/09 05/31/10 For the 2009 calendar year, or tax year beginning and ending Please Check if applicable C Name of organization D Employer Identification number use IRS Jack and Jill of America Foundation Address change label or 51-0224656 Doing Business As Name change print or type. Number and street (or P O box if mail is not delivered to street address) Telephone number Room/suite Initial return 1930 17TH STREET NW 202-232-5290 Specific Termination City or town, state or country, and ZIP + 4 G Gross receipts \$ Instruc-WASHINGTON DC 20009 Amended return tions. F Name and address of principal officer: H(a) Is this a group return for Application pending PIER BLAKE affiliates? Are all affiliates included? 1930 17TH STREET WASHINTON DC 20009 If "No," attach a list. (see instructions) **X** 501(c) (**3** 1 √ (insert no) 4947(a)(1) or Tax-exempt status: website: ▶ www.jackandjillfoundation.org H(c) Group exemption number ▶ Type of organization X Corporation Trust M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: See Schedule O Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 Prior Year 502,144 Contributions and grants (Part VIII, line 1h) 9,720Program service revenue (Part VIII, line 2g) RECEIVED.. -632,108 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)-11,970 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII, dolumn (A) line 12) -108,274240,413 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), (line 4)) 135,089 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 252,356 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 627,858 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) -736,132 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year 58

POSTMARK

20 Total assets (Part X, line 16)

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

o o

94,520 66,985 21 Total liabilities (Part X, line 26) 182,064 414,461 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is you, correct, and configered. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of office **Executive Director Pier Blake** Type or print name and title Preparer's identifying number Check if Preparer's Paid signature 09/24/10 employed > 117-54-0540 Preparer's Graves and Associates 54-2044651 EIN Firm's name (or yours Use Only 8491 Brutus Court Phone if self-employed), 703-622-5141 22153-4006 address, and ZIP + 4 Springfield, VA May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Form 990 (2009)

2009

Inspection

1,627,154

Yes

Current Year

489,488

261,605

773,200

259,280

138,620

142,902

540,802

232,398

2,481,446

End of Year

2,276,584

14,734

7,373

form 990 (2009) Jack and Jill			51-0224656		Page 2
Part III Statement of Program		snments			
1 Briefly describe the organization's mission	ı.				
See Schedule O					
				• • • • • • • • • • • • • • • • • • • •	
		• • •		•••••	• • • •
2 Did the organization undertake any signifi	cant program services d	unng the year which w	ere not listed on		
the pnor Form 990 or 990-EZ?					Yes X No
If "Yes," describe these new services on \$					
3 Did the organization cease conducting, or	make significant change	es in how it conducts,	any program		□., .
services?					Yes X No
If "Yes," describe these changes on Sche			h		
4 Describe the exempt purpose achieveme Section 501(c)(3) and 501(c)(4) organizat					
allocations to others, the total expenses,				i grants and	
anocations to others, the total expenses, a	and revenue, it arry, for e	acii program service i	еропеа		
	460,201 inc) (Revenue \$)
The Foundation exists and Jill of America,					
Foundation has acted	to influence	the organi	on, che		•
development of childr	en A center	that furn	ig postcive		
personal, professiona				 ren	
in the area of leader					
development.		.0_0_			• •
	•	••••	• • • • • • • • • • • • • • • • • • • •		• •
	••	• •			
• • • • • • • • • • • • • • • • • • • •	•	•	• • •		
		• • •			
4b (Code:) (Expenses \$	inc	luding grants of \$) (Revenue \$)
		•••			
		••			
					• • • • • •
		•••		• • • • • • • • • • • • • • • • • • • •	
			•••	•••	• •
c (Code) (Expenses \$	inc	luding grants of \$) (Revenue \$	
				• • • • • • • • • • • • • • • • • • • •	
					••••
4d Other program services. (Describe in Sch	nedule O.)				
(Expenses \$	including grants of \$) (Revenue \$)
4e Total program service expenses ▶	460,20	1			
-	·				Form 990 (2009)

	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	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u>x</u>
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		
e		<u> </u>		
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,"			x
_	complete Schedule D, Part I	6		_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			77
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u> </u>
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		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 secunties 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			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 167 If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	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			
	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			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.			
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		X
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	ļ	X
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
15	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	1	x
		-``		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46	1	x
	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			_
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			,.
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	₩	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u> </u>	X

Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 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 990-EZ? If "Yes," complete Schedule L, Part I X 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X 26 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? If "Yes," complete Schedule L, Part III ... 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 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 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 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 X III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete X Schedule R, Part V, line 2 35 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related X organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38 X 19? Note. All Form 990 filers are required to complete Schedule O

Form 990 (2009) Jack and Jill of America Foundation 51-0224656

Part V Statements Regarding Other IRS Filings and Tay Compliance

rd	R V Statements Regarding Other IRS Filings and Tax Compliance		V	N :-
, 4c	Enter the number reported in Poy 2 of Form 1006. Applied Summany and Transmitted of		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable			
L		1		
D	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С		1c		x
0-	gaming (gambling) winnings to prize winners?	10		
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			
	Statements, filed for the calendar year ending with or within the year covered by this return [2a] If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b	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			
Ja	this return?	3a		x
ь	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 authority			
74	over, a financial account in a foreign country (such as a bank account, secunties account, or other financial	}		
	account)?	4a		x
h	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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
•	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	ļ	<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	4		I
8	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			1
	benefit contract?	78	├ ─	├──
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	\vdash	├
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			
	required?	7h	├	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	8		Ī
	organization, have excess business holdings at any time during the year?	-	 	
9	Sponsoring organizations maintaining donor advised funds.	9a		Ī
а	Did the organization make any taxable distributions under section 4966?	9b	╁	+-
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	"	 	1
10	Section 501(c)(7) organizations. Enter:		İ	
a	Illidation lees and capital contributions included on the truth in the capital contributions included on the truth in the capital contributions included on the capital contributions in capital capital contributions in capital cap	1		1
b	Gloss receipts, included on Form coo, Factoria, and Tal, Inc. passes and the second cool of the cool, the cool of	1	1	
11	Section 501(c)(12) organizations. Enter:			I
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	7		
b	1 1			1
40-	amounts due or received from them.)	12a	1	1
12a	12h		1	
_ <u>b</u>	If tes, effective amount of tax-exempt merest received or accuracy during the year.		00	U (2009)

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Form	990 (2009) Jack and Jill of America Foundation 51-0224656		Р	age 6
	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below	ı. and		-3
	for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	•		
•	Schedule O. See instructions.	,		
Sec	tion A. Governing Body and Management	-		
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent 1b 9			
2	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 customanly performed by or under the direct			ŀ
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	_	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	<u> </u>
Ь	Each committee with authority to act on behalf of the governing body?	8b	X	ــــــ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	enue Code.)			
		40	Yes	No.
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	40.		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		├
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	ا مما		x
44-	form?	11		
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	420		x
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b		
_	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schodule O how this is done	12c		1
42	Does the organization have a written whistleblower policy?	13		x
13 14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by	1.7		<u> </u>
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			Ī
а	The organization's CEO, Executive Director, or top management official	15a	İ	x
b	Other officers or key employees of the organization	15b		х
	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			1
.50	with a taxable entity during the year?	16a]	x
ь	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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
	0.00 A 10			• •

17	List the states with which a copy of this Form 990 is required to be filed None
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)
	available for public inspection. Indicate how you make these available. Check all that apply.
	Own website Another's website Upon request
	and the state of t

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 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 20 1930 17TH STREET NW organization > MS. PIER BLAKE DC 20009 WASHINGTON

202-232-5290

DAA

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)	(m)							ctor, or trustee.				
Name and Title	(B) Average hours per			chec	C) k all t	hat app	oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of		
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	-ormer	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
ERIK A CLIETTE	10.00	x		х				0	0			
PRESIDENT DARRYL TRAWICK	10.00	1		₽	-	\vdash		0	U	C		
VICE PRESIDE	10.00	x		x				o	0	C		
CHRISTINE GOVAN						1 1						
TREASURER	10.00	X		X		Ш		0	0	C		
PAULETTE KEYS												
SECRETARY	10.00	X		X	_	$\sqcup \downarrow$		0	0	0		
TARA JOSEPH-LABRI								_	_	_		
NAT PRESIDEN	5.00	X	_	X		\sqcup		0	0			
TAMARA ROBINSON						1 1				_		
NAT VP	5.00	X	<u> </u>	X	-	\vdash		0	0			
TERRI PARKER										_		
NAT TREAS.	5.00	X	<u> </u>	X	⊢	\vdash		0	0	<u>C</u>		
SHARON BOURGES-JOMEM AT LARGE	5.00	$ \mathbf{x} $		x				o	0	C		
CHERYL BEAL ANDER		Т										
NATIONAL PROGRAM DIR	5.00	X		X				0	0	C		
							-					
									-			

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) Name and business address Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization Form **990** (2009) DAA

Form 990 (2009) Jack and Jill of America Foundation 51-0224656

Pa	rt V	Statement 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
Program Service Revenue Contributions, gifts, grants and other similar amounts	b	Federated campaigns Membership dues Fundraising events	1a 1b 1c						
ns, gifts imilar a	d	Related organizations Government grants (contributions)	1d 1e						
ribution other s		All other contributions, gifts, grants, and similar amounts not included above	1f		489,488				
Con	_	Noncash contributions included in lines 1a-1f \$			489,488	·			
- PE	_				Busn. Code	14 604	14 604		
eke	2a				—	14,684	14,684		
e E	b	THOMPSON FAMILY				50	50		
흥	С								
S	d			•	<u> </u>				
E	e								
ğ	f	All other program service reven	nue .						
ے	g	Total. Add lines 2a-2f			. •	14,734			
	3	Investment income (including d	ividend	ds, interes	st, and				
		other similar amounts)			▶ [304,523	304,523		
	4	Income from investment of tax-	exemp	t bond pr	oceeds 🕨				
]	5	Royalties			▶				
1		(ı) Real		(n) l	Personal				
	6a	Gross Rents							
	b	Less rental exps							
	c	Rental inc or (loss)							
		Net rental income or (loss) .			•	Ī		İ	
	7a	Gross amount from (i) Securities	 5	(n)) Other				
		sales of assets	, 907		129				
	h	Less cost or other		<u> </u>					
		•	, 954	ł					
			,047		129				
		Net gain or (loss)			•	-42,918	-42,918		
		Gross income from fundraising ever		· · · · ·		,			
95	ua	(not including ©	ıw						
Ven		of contributions reported on line 1c)							
æ		Con Book IV Iron 40	· a	Ì					
Other Revenu		• • • • • • • • • • • • • • • • • • • •	d						
ē		Less direct expenses Net income or (loss) from fundi	raiciae	everte.		•			
		Gross income from gaming activitie	_	Everius					
,	Ja			1					
		•••••							
		Less: direct expenses			•		<u></u>		
		Net income or (loss) from gam	ing act	IVILIES	, .				
	l lua	Gross sales of inventory, less	_	Į					
	١.	returns and allowances	a						
	ı	Less. cost of goods sold	b						Ī
	<u> </u>	Net income or (loss) from sales		entory	. P				
		Miscellaneous Revenue			Busn. Code	7 272	7 272		Ī
	Ι.	MISCELLANEOUS INCOME			<u> </u>	7,373	7,373		
	Ь								
	c				1				
		All other revenue							
		Total. Add lines 11a-11d				7,373			
	12	Total Revenue. See instructio	ns		<u></u>	773,200	283,712	0	0

Statement of Functional Expenses Part IX

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).

	All other organizations must contain the second sec				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			· · · · · · · · · · · · · · · · · · ·	***************************************
	organizations in the U.S. See Part IV, line 21	259,280	259,280		
2	Grants and other assistance to individuals in			<u> </u>	
	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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	79,500	59,625	9,938	9,937
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 salaries and wages	59,120	47,296	11,824	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				<u></u>
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
þ	Legal	896	299	299	298
C	Accounting	24,431	13,073	9,179	2,179
	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				·
g	Other	007	076	276	075
12	Advertising and promotion	827	276	276	275
13	Office expenses	21,327	17,312	2,446	1,569
14	Information technology	11,683	8,178	1,753	1,752
15	Royalties	10 250	12 045	2,753	2,752
16	Occupancy	18,350 16,126	12,845 16,126	2,133	2,132
17	Travel	10,120	10,120		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	15,776	11,043	2,367	2,366
19	• •	252	252	2,301	2,300
20	Interest	2,72	232		
21	Payments to affiliates	8,332	8,332		
22	Depreciation, depletion, and amortization	2,275	1,593	341	341
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.)	1			
_	BANK & BROKER FEES	17,571	879	8,346	8,346
a b	Other	4,656	3,492	582	582
C	PROFESSIONAL DEVELOPMENT	400	300	50	50
d					
e	···· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·				
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	540,802	460,201	50,154	30,447
26	Joint costs. Check here ▶ if following				
20	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				
DAA	- Control - Cont				Form 990 (2009)

			(A)		(B)
1.			Beginning of year		End of year
1	Cash—non-interest bearing	-	26,614	1	35,567
2	Savings and temporary cash investments	-	303,475	2	511,115
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors, trustees, key			1	
	employees, and highest compensated employees. Complete Part II of	1			
1				5	
6	Receivables from other disqualified persons (as defined under section			1	
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			I	
.	Part II of Schedule L			6	
7	Notes and loans receivable, net			7	
7 8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges		8,565	9	5,150
108	Land, buildings, and equipment: cost or			1	
	other basis Complete Part VI of Schedule D 10a	52,205		1	
l t	Less. accumulated depreciation 10b	43,691	16,846	10c	8,514
11	Investments—publicly traded secunties		1,921,084	11	1,921,100
12	Investments—other securities. See Part IV, line 11			12	
13	Investments—program-related. See Part IV, line 11	··· · [13	
14	Intangible assets	Ϊ Τ		14	
15	Other assets. See Part IV, line 11	· · · · [15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	Г	2,276,584	16	2,481,446
17	Accounts payable and accrued expenses		47,930		16,995
18	Grants payable		46,590		49,990
19	Deferred revenue	•		19	
20	Tay exampt hand liabilities	····· · · · · · · · · · · · ·	· ·-	20	
	Escrow or custodial account liability Complete Part IV of Schedule D	• • • •		21	
21 22		· · · · · · · · · · · · · · · · · · ·			
	employees, highest compensated employees, and disqualified			Ī	
!	narrana, Campleta Port II of Schodula I	·		22	
23	*****	·· · · · ·		23	
24	Unsecured notes and loans payable to unrelated third parties	• • • •		24	
25	Other liabilities, Complete Part Y of Schedule D	·····		25	
26	Total liabilities. Add lines 17 through 25		94,520	26	66,985
+==	Organizations that follow SFAS 117, check here ▶ X and				
27	complete lines 27 through 29, and lines 33 and 34.	1			
	Hannak daka danak annaka	İ	2,182,064	27	2,411,711
27	***************************************	··· ·· ·· ·	L,10L,004	28	2,750
28		• • • • • • • • • • • • • • • • • • • •		29	2/100
29	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			25	
1 I	Organizations that do not follow SFAS 117, check here ▶				
2		F		۱ ا	
5	and complete lines 30 through 34.	1		י חקר ו	
30	Capital stock or trust principal, or current funds			30	· · · · · · · · · · · · · · · · · · ·
30 31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund			31	
3 ``	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds		2,182,064	31 32	2,414,461

Form **990** (2009)

Pa	ert 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			l
	Schedule O			l
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
С	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		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			İ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			ŧ
	issued on a consolidated basis, separate basis, or both			I
	Separate basis Consolidated basis Both consolidated and separate basis			ł
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			1
	the Single Audit Act and OMB Circular A-133?	3a		l
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A

Public Charity Status and Public Support (Form 990 or 990-EZ)

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

Jack and Jill of America Foundation

Employer identification number 51-0224656

			Juck and Dir	I OI PARCITCA FOR	mac.	<u> </u>			7#	022	1030		
P	art I	Rease	on for Public Charity	Status (All organizations	must co	mplete	this p	<u>art.) S</u>	<u>ee ins</u>	tructio	ns.		
Γhe	orgar	nization is not a	private foundation because	it is: (For lines 1 through 11, che	ck only on	e box)							
1		A church, con	vention of churches, or associ	ciation of churches described in s	section 17	70(b)(1)(<i>A</i>	۸)(i).						
2		A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)									
3	П	A hospital or a	a cooperative hospital service	organization described in section	on 170(b)	(1)(A)(iii).							
4	П	A medical res	earch organization operated	in conjunction with a hospital des	cnbed in	section 1	70(b)(1)	(A)(III). I	Enter th	e hospit	tal's name.		
		city, and state					(- / (- /	(,(,-		,	,		
5			• • • • • • • • • • • • • • • • • • • •	a college or university owned or	onerated	hv a gove	 mmenta	 Lunit de	 scabed	 in		•	
Ŭ	ш		b)(1)(A)(iv). (Complete Part II	-	operated	oy a gove	iiiiieiite	i uriit ue.	3011060				
		-			u 470/L	. \ / 4 \ / 4 \ /							
6	₩		•	vernmental unit described in sect	•		•						
7	X	•	•	ubstantial part of its support from	a governi	nentai un	it or mon	i the ger	ierai pu	DIIC			
			section 170(b)(1)(A)(vi). (Co	•									
8	Н	•		0(b)(1)(A)(vi). (Complete Part II	•								
9		An organization	on that normally receives: (1)	more than 33 1/3 % of its support	rt from co	ntributions	s, memb	ership fe	es, and	gross			
		receipts from	activities related to its exemp	t functions—subject to certain ex	ceptions,	and (2) n	o more t	han 33 1	1/3 % of	its			
		support from 9	gross investment income and	l unrelated business taxable inco	me (less s	section 51	1 tax) fr	om busır	nesses				
		acquired by th	ne organization after June 30,	1975 See section 509(a)(2). (C	complete l	Part III)							
10		An organization	on organized and operated ex	clusively to test for public safety.	See sect	ion 509(a	a)(4).						
11		An organization	on organized and operated ex	clusively for the benefit of, to per	form the f	unctions	of, or to	carry out	the				
		purposes of o	ne or more publicly supported	d organizations described in sect	ion 509(a)	(1) or sec	ction 509	(a)(2) S	ee sec	tion			
		509(a)(3). Cho	eck the box that describes the	e type of supporting organization	and comp	olete lines	11e thro	ough 11t	1				
		a Type	I b Type II	c Type III-Functional	lly integrat	ted	d [Туре	e IIIOth	ner			
е				nization is not controlled directly	or indirect	ly by one	or more	disqualıf	ied				
-				nd other than one or more public						tion			
		•	ection 509(a)(2)	·		·							
f			, ,, ,	mination from the IRS that it is a	Type I Ty	nell or T	voe III s	upportine	a				
•		. •	check this box		.,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•				
_		•		on accepted any gift or contribution	n from ar	 Iv of the	• • • •	• • • • • •	• • • •	• ••	•	••	Ш
g		following pers	•	on accepted any girt of contained)	., 00							
				trala, ather along or together wit	h noroone	docombo	d in (u)					Yes	No
				itrols, either alone or together wit	ii persons	describe	G III (II)				112		NO
		• •	pelow, the governing body of		• •	• •			• • •		. 11gi		1
		• • •	member of a person describe								. 11g		
			ontrolled entity of a person de	• • • • • • • • • • • • • • • • • • • •							11g	<u> </u>	<u> 1</u>
h		Provide the fo	ollowing information about the	e supported organization(s).	Γ	-							
(i)		e of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	•		ou notify	(vi) organizat	s the		mount of	
	org	anization		(described on lines 1–9 above or IRC section	in col (i) is	document?		nzation in of your		zed in the	St	pport	
				(see instructions))	,		sup	ort?	U	5?			
					Yes	No	Yes	No	Yes	No			
							l	1					
											_		
					 	 		-					
					1]					
						 			<u> </u>				
			[Ī	1]	1		l		

1JACKJILLFO 09/24/2010 7:35 AM Schedule A (Form 990 or 990-EZ) 2009 Jack and Jill of America Foundation 51-0224656 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (b) 2006 Calendar year (or fiscal year beginning in) (a) 2005 (d) 2008 (e) 2009 (f) Total (c) 2007 Gifts, grants, contributions, and membership fees received. (Do not 489,488 2,663,852 include any "unusual grants.") 509,138 591,265 571,817 502,144 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 2,663,852 571,817 502,144 489,488 509,138 591,265 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 975,065 shown on line 11, column (f) 1,688,787 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2008 (b) 2006 (c) 2007 (e) 2009 (f) Total (a) 2005 509,138 591,265 571,817 502,144 489,488 2,663,852 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar 66,299 130,259 108,292 92,397 72,337 469,584 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 3,133,436 11 Total support. Add lines 7 through 10 12 421,399 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 53.90% 14 Public support percentage from 2008 Schedule A, Part II, line 14 4.00% 15 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box 16a and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal 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 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 ıts 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (f) Total (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 Amounts from line 6 10a Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business 11 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.) Total support. (Add lines 9, 10c, 11, 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f) 15 15 16 % Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 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

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 Open to Public

Name of the organization

Inspection Employer Identification number

J	ack and Jill of America Foundation		51-0224656
Pa	Organizations Maintaining Donor Advised Fur the organization answered "Yes" to Form 990, F	nds or Other Similar Funds or Part IV, line 6.	Accounts. Complete if
		(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 (during 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 w		
	used only for charitable purposes and not for the benefit of the donor or o		
	purpose conferring impermissible private benefit?		Yes . No
Pá	art II Conservation Easements. Complete if the orga	· -	
1	Purpose(s) of conservation easements held by the organization (check a		
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically in	
	Protection of natural habitat	Preservation of certified historic	structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conserve	ation contribution in the form of a conser	vation
	easement on the last day of the tax year.		1
			Held at the End of the Tax Year
a	Total number of conservation easements		. 2a
	Total acreage restricted by conservation easements		2b
С.	Number of conservation easements on a certified historic structure include	• • • • • • • • • • • • • • • • • • • •	2c
d -	```		. [2d]
3	Number of conservation easements modified, transferred, released, extir	nguished, or terminated by the organizati	оп аиппд
	the taxable year	N	
4	Number of states where property subject to conservation easement is loc		
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, nandling or	☐ Yes ☐ No
_	violations, and enforcement of the conservation easements it holds?		, 🗀 🗀 😘
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	ig conservation easements during the ye	aı
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	neonyation easements during the year	
7	S	riservation easements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section	
0	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	e requirements of socion	☐ Yes ☐ No
α	In Part XIV, describe how the organization reports conservation easemer	 nts in its revenue and evnense statemen	
3	balance sheet, and include, if applicable, the text of the footnote to the or	•	
	the organization's accounting for conservation easements.	3	
P.	Organizations Maintaining Collections of Art,		Similar Assets.
<u> </u>	Complete if the organization answered "Yes" to If the organization elected, as permitted under SFAS 116, not to report in	· ·	at works of
14	art, historical treasures, or other similar assets held for public exhibition,		
	provide, in Part XIV, the text of the footnote to its financial statements that		,
h	If the organization elected, as permitted under SFAS 116, to report in its		orks of art.
	historical treasures, or other similar assets held for public exhibition, edu		
	provide the following amounts relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	000 B 4 V		▶ \$
2	If the organization received or held works of art, historical treasures, or o	ther similar assets for financial gain, pro	··
-	following amounts required to be reported under SFAS 116 relating to the		-
а	Povenues included in Form 990, Part VIII, line 1		▶ \$
	A contain the should be Form 000. Don't V		··· • • • • • • • • • • • • • • • • • •
_			

		ill of Amer				Page 2
Pa	rt III Organizations Maintaining (ets (continued)
3	Using the organization's acquisition, accession, a collection items (check all that apply):	and other records, che	ck any of the following	that are a significa	nt use of its	-
а	Public exhibition	d ☐ Loa	n or exchange program	25		
ь	Scholarly research	e Oth		113		
c	Preservation for future generations	e 📋 Oui	" – – – –	- -		_
·	_					
4	Provide a description of the organization's collect Part XIV.	tions and explain how	they further the organiz	zation's exempt pur	rpose in	
5	During the year, did the organization solicit or recassets to be sold to raise funds rather than to be	maintained as part of	the organization's colle	ection?		. Yes No
₽a	## IV Escrow and Custodial Arrar	ngements. Compl	ete if the organization	ation answered	d "Yes" to For	m 990, Part
	IV, line 9, or reported an amo	ount on Form 990	, Part X, line 21.			
1a	Is the organization an agent, trustee, custodian of	or other intermediary for	r contributions or othe	assets not		
				•		L Yes L No
b	If "Yes," explain the arrangement in Part XIV and	d complete the following	g table:			
						Amount
C	Beginning balance				1c	
d					1d	
0					1e	
f				·	1f	
2a	Did the organization include an amount on Form	990, Part X, line 21?		•		Yes No
	If "Yes," explain the arrangement in Part XIV.	, ,		•••••		
	rt V Endowment Funds. Comple	te if organization	answered "Yes" to	o Form 990. P	art IV. line 10	
		(a) Current year	(b) Prior year	(c) Two years bac		
1a	Beginning of year balance			 ` · · · · · · · · · · · · · · · · · · 	1,,,,,,,	
	Contributions			 		***************************************
	Net investment earnings, gains,			<u> </u>		
·						
	and losses			<u> </u>		
	Grants or scholarships			 	••••	
е	Other expenditures for facilities					
	and programs				·····	
T	Administrative expenses			 		
g	End of year balance			<u> </u>		
2	Provide the estimated percentage of the year en					
а	Board designated or quasi-endowment	%				
b	Permanent endowment ▶ %					
	Term endowment ► %					
3a	Are there endowment funds not in the possession	on of the organization the	nat are held and admin	istered 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 Sch	edule R?			3b
4					- -	· -
Pa	rt Vi Investments—Land, Buildin			0, Part X, line	10.	
<u>~</u>	Description of investment	(a) Cost or other basi			Accumulated	(d) Book value
	·	(investment)	basis (othe	''	epreciation	
4	Land	· · · · ·	•			
	Land		 	<u> </u>		1
	Buildings	·				
	Leasehold improvements			· ·		
	Equipment	 	- 			
	LUDOF		•	ı		•

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (F	orm 990) 2009	Jack	and	Jill	of	Ame	rica	Foundat	ion	51-0224656		Page 3
Part VII	Investment	s—Other	Secu	rities.	See F	orm 9	90, Pa	rt X, line 12.				
		ption of secur		gory				(b) Book value		(c) Method o		
		iding name of	secunty)							Cost or end-of-ye	ar market value	
Financial deriv												
	quity interests						.					
Other							-					
-	- -		. – –				_					
_ _							-	. <u> </u>				
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			4.14		40.1		_		-		***************************************	•••••
	n (b) must equal F)00 D	ort V line 12				
Part VIII					See	-orm s	190, Pa	art X, line 13. (b) Book value	1	(a) Mothod e	f valuation	
	(a) Desc	emption of invi	esiment ty	pe			1	(b) Book value		(c) Method o Cost or end-of-ye		
							_				ar market value	
												
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		-										
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Total. (Colum	n (b) must equal F	orm 990, P	art X, co	(B) line	e 13.)		>					
Part IX	Other Asse					ine 15.						
					(a) Des	scription					(b) Book	value
											:	
											ļ	
	 -											
			<u>-</u> .									
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					- 45 \		-			•		
Part X	n (b) must equal F Other Liabi					Y line	25	•				
		Description of		1 330,	1 art	Λ, ιιιιο		(b) Amount				
1. Federal incom					_	-	+	(2)10	\dashv			
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Total. (Colum	nn (b) must equal f	Form 990, F	Part X, co	ol (B) lin	e 25.)							
	potnote in Part XI		_			the orga	nization	's financial state	ments ti	nat reports the		

organization's liability for uncertain tax positions under FIN 48.

	tule D (Form 990) 2009 Jack and Jill of America Foundation 51-022465		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
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	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recovenes of prior year grants		
d	Other (Describe in Part XIV.)		
8	Add lines 2a through 2d	2е	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV.) 4b		
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	eturr)
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses 2c		
d	Other (Describe in Part XIV)		
0	Add lines 2a through 2d	2е	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV.)]	
C	Add lines 4a and 4b	4c	
*******	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Pa	rt XIV Supplemental Information		
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
and 2	b, Part V, line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
his p	art to provide any additional information.		
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SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.

Open to Public

Inspection

ŝ NATIONAL SCHOLARSHIP CREATING LEADERS FOR NATIONAL LEADERSHIP X Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (h) Purpose of grant or assistance TEEN PROJECTS TEEN PROJECTS TEEN PROJECTS Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 19 Employer Identification number non-cash assistance (g) Description of 51-0224656 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant sasistance (book, FMV, appraisal, assistance other) 11,386 5,100 16,500 28,000 5,100 5,100 15,000 6,150 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part IV and Schedule I-1 (Form 990) if additional space is needed Jack and Jill of America Foundation (c) IRC section if applicable General Information on Grants and Assistance (p) EIN the selection cntena used to award the grants or assistance? VA 22031-8077 45246 8260 WILLOW OAKS CORPORATE DRIVE BOYS & GIRLS CLUBS NASSAU COUNTY NY 11550 CA 92883 GA 30281 DC 20009 MO 63017 33612 (a) Name and address of organization 615 SPRAGGINS MEMORIAL PKWY JACK & JILL OF AMERICA INC ЮНО 답 UNITED NEGRO COLLEGE FUND 15702 HEATHERCROFT DRIVE or government 8351 SANCTUARY DRIVE 18 LITTLE CREEK LANE 40 WASHINGTON STREET 1930 17TH STREET NW 11101 WINTHROP WAY J/J CENTRAL REGION J/J INLAND EMPIRE HENRY COUNTY YMCA J/J SOUTHEASTERN J/J CINCINNATI Name of the organization STOCKBRIDGE WASHINGTON HEMPSTEAD ST LOUIS GLENDALE FAIRFAX Part II CORONA TAMPA

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) 2009

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Schedule I (Form 990) 2009 Jack and Jill	l of America	Foundation 5	51-0224656		Page 2
Part III Grants and Other Assistance to Individuals in the United States. Con Use Part IV and Schedule I-1 (Form 990) if additional space is needed	to Individuals in the (Form 990) if addition	• United States. Con nal space is needed	nplete if the organiza	United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. al space is needed.	m 990, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to pr	omplete this part to p	provide the information	ovide the information required in Part I,	line 2, and any other additional information	onal information.
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Schedule I (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Jack and Jill of America Foundation

Employer identification number 51-0224656

Form 990 - Organization's Mission or Most Significant Activities
To sponsor and support short term programs that improve the
quality of life for children and families through projects
that address educational literacy, scientific and
charitable needs. Its purpose is to help eliminate some of
the contemporary obstacles that confront minority children
and young adults.
Form 000 Port VI. Time 113 - Organization!s Process to Portion Form 000
Form 990, Part VI, Line 11A - Organization's Process to Review Form 990
No review was or will be conducted.
Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
No documents available to the public

		-		Special Events Schedule														
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