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Short Form

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OMB No 1545-1150

Form **990-EZ**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

- ▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
- ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2009 calendar year, or tax year beginning JULY 1, 2009, and ending JUNE 30, 2010

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization		D Employer identification number
		THE JUNIOR LEAGUE OF WILKES-BARRE, INC.		23-6297641
		Number and street (or P.O. box, if mail is not delivered to street address) Room/suite 280 NORTH SHERMAN STREET 102		E Telephone number 570-288-4818
		City or town, state or country, and ZIP + 4 WILKES-BARRE, PA 18702		F Group Exemption Number . . . ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method ☒ Cash ☐ Accrual
Other (specify) ▶

H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ **JLWB.ORG**

J Tax-exempt status (check only one) - ☒ 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts. If \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **51,474**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	40,669
	2	Program service revenue including government fees and contracts	2	5,529
	3	Membership dues and assessments	3	
	4	Investment income	4	42
	5a	Gross amount from sale of assets other than inventory	5a	2,612
	5b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . STMT. 7	5c	2,612
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ☐		
	6a	Gross revenue (not including \$ 26,031 of contributions reported on line 1)	6a	2,622
	6b	Less direct expenses other than fundraising expenses	6b	2,622
Expenses	6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . STATEMENT 1	6c	
	7a	Gross sales of inventory, less returns and allowances	7a	
	7b	Less cost of goods sold	7b	
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ▶)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	48,852
	10	Grants and similar amounts paid (attach schedule) . . . STATEMENT 4	10	17,145
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	1,594
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	6,210
	15	Printing, publications, postage, and shipping	15	3,903
	16	Other expenses (describe ▶ STATEMENT 3)	16	20,082
	17	Total expenses. Add lines 10 through 16	17	48,934
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-82
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	74,850
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	74,768

Part II Balance Sheet. If total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	74,850	74,768
23 Land and buildings		
24 Other assets (describe ▶)		
25 Total assets	74,850	74,768
26 Total liabilities (describe ▶)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	74,850	74,768

SCANNED OCT 25 2010

RECEIVED
OCT 19 2010
OGDEN, UT

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28DEVELOPMENT AND TRAINING OF MEMBERS; COMMUNITY SERVICE AND RESEARCH

28a

26,957

29

29a

30

30a

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31a

32

26,957

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
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JSA
9E1009 2 000

Part V Other Information (Note the statement requirements in the instructions for Part V)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 0		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0, section 4912 ▶ 0, section 4955 ▶ 0		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41 List the states with which a copy of this return is filed ▶ PA		
42a The organization's books are in care of ▶ TREASURER Telephone no ▶ 570-288-4818		
Located at ▶ 280 NORTH SHERMAN STREET, WILKES-BARRE, PA ZIP ▶ 18702		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	No
If "Yes," enter the name of the foreign country ▶		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U S ?		X
If "Yes," enter the name of the foreign country ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ▶ ☐		
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51

- 46 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. Yes No
46 X
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II. 47 X
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. 48 X
- 49a Did the organization make any transfers to an exempt non-charitable related organization? 49a X
- b If "Yes," was the related organization a section 527 organization? 49b
- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 0

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors receiving over \$100,000 0

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 true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Date

☒ Kathryn Hughes 10/16/2010

Signature of officer Date

KATHRYN HUGHES, President

Type or print name and title

Paid Preparer's Use Only Preparer's identifying number (See instructions)

Preparer's signature [Signature] Date Check if self-employed ☐

10-7-10

Firm's name (or yours if self-employed), address, and ZIP + 4 LAWRENCE, CABLE AND COMPANY, LLP EIN

106 SOUTH MAIN STREET, ELKES-BARRE, PA Phone no 570-825-0622

May the IRS discuss this return with the preparer shown above? See instructions X Yes No

THE JUNIOR LEAGUE OF WILKES-BARRE, INC.

FORM 990-EZ

23-6297641

FORM 990-EZ		SPECIAL EVENTS			STATEMENT 1
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUTION INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPECIAL EVENTS	28,653	26,031	2,622	2,622	0
TO FORM 990-EZ, LINE 6C					<u>0</u>

FORM 990-EZ		PAYMENTS TO AFFILIATES		STATEMENT 2
AFFILIATE'S NAME	ADDRESS	EXPLANATION	AMOUNT	
AJL	NEW YORK, NY	DUES ALLOCATION	6,317	
TO FORM 990-EZ, STATEMENT 3				<u>6,317</u>

FORM 990-EZ		OTHER EXPENSES			STATEMENT 3
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
MEETINGS	6,700	6,700			
SUPPLIES	3,317	2,701	616		
CONFERENCES	140	140			
INSURANCE	541	271	270		
POSTAGE	1,213		556	657	
MEMBERSHIP					
DEVELOPMENT	294		294		
PUBLIC RELATIONS	239		239		
FEES	200		100	100	
UTILITIES	263		263		
TELEPHONE	104		104		
BANK CHARGES	40		40		
DUES	129		129		
ADVERTISING	585			585	
PAYMENTS TO AFFILIATES	6,317		6,317		
TO FORM 990-EZ, LINE 16					<u>20,082</u>
	20,082	9,812	8,928	1,342	

THE JUNIOR LEAGUE OF WILKES-BARRE, INC.

FORM 990-EZ

23-6297641

FORM 990-EZ		GRANTS AND ALLOCATIONS			STATEMENT 4
CLASSIFICATION	DONEE'S NAME	ADDRESS	RELATIONSHIP	AMOUNT	
CHARITABLE	RUTH'S PLACE HOMELESS SHELTER	RR 425 N PENNSYLVANIA WILKES-BARRE, PA	NONE	50	
CHARITABLE	THE LUZERNE FOUNDATION	140 MAIN STREET LUZERNE, PA 18709	NONE	50	
CHARITABLE	CEO	165 AMBER LANE WILKES-BARRE, PA	NONE	45	
CHARITABLE	EARTHLY ANGELS AUTISM FUND	140 MAIN STREET LUZERNE, PA 18709	NONE	100	
CHARITABLE	AMERICAN CANCER SOCIETY	190 WELLES ST FORTY FORT, PA	NONE	100	
CHARITABLE	CHILDREN'S SERVICE CENTER	335 SOUTH FRANKLIN ST WILKES-BARRE, PA	NONE	150	
CHARITABLE	ST VINCENT DEPAUL SOUP KITCHEN	33 E NORTHAMPTON ST WILKES-BARRE, PA	NONE	200	
CHARITABLE	WYOMING VALLEY CHILDREN'S ASSOCIATION	71 N FRANKLIN ST WILKES-BARRE, PA	NONE	5,150	
CHARITABLE	MATERNAL & FAMILY HEALTH SERVICE	15 PUBLIC SQUARE WILKES-BARRE, PA	NONE	5,150	
CHARITABLE	CATHOLIC YOUTH CENTER	36 SOUTH WASHINGTON WILKES-BARRE, PA	NONE	5,150	
SCHOLARSHIP	MORGAN MICHELE HARDING	PA	NONE	500	
SCHOLARSHIP	SAMANTHA COCO	PA	NONE	500	

TO FORM 990, PART II, LINE 22

17,145

THE JUNIOR LEAGUE OF WILKES-BARRE, INC.

23-6297641

Officers/Directors - 2009/2010 League Year

Cynthia Johnson
President
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Kathryn Hughes
President Elect
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Rose Morkavage
Treasurer
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Deb Pavlico
Recording Secretary
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Melissa Alexander
Corresponding Secretary
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Melissa Jones
Community Vice President
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Ruth Corcoran
Fund Development Vice President
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Tina Marianacci
Communication Council Vice Pres.
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Mariah Harned
Membership Council Vice Pres.
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Kristyn Conrad
Nominating Chair
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

Linda Mancinelli
Sustainer Vice President
280 North Sherman St., Ste 102
Wilkes-Barre, PA 18702

THE JUNIOR LEAGUE OF WILKES-BARRE, INC.

FORM 990-EZ

23-6297641

FORM 990-EZ STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 6

TO FORM 990-EZ, PART III

THE JUNIOR LEAGUE OF WILKES-BARRE, INC IS AN ORGANIZATION OF WOMEN COMMITTED TO PROMOTING VOLUNTARISM, DEVELOPING THE POTENTIAL OF WOMEN AND IMPROVING COMMUNITIES THROUGH THE EFFECTIVE ACTION AND LEADERSHIP OF TRAINED VOLUNTEERS ITS PURPOSE IS EXCLUSIVELY EDUCATIONAL AND CHARITABLE

FORM 990-EZ SALE OF ASSETS OTHER THAN INVENTORY STATEMENT 7

LINE 5

ENDOWMENT FUND NET GAIN (LOSS) 2,612

TOTAL TO FORM 990-EZ, LINE 5C 2,612

FORM 990-EZ, SCHEDULE A OTHER INCOME STATEMENT 8

DESCRIPTION	2005 AMOUNT	2006 AMOUNT	2007 AMOUNT	2008 AMOUNT	2009 AMOUNT
OTHER	0	35	0	0	0
TO FORM 990-EZ, SCHEDULE A, PART IV	0	35	0	0	0

23-6247641

Dec. 10, 2010 LTR 2695C 0 R
23-6297641 201006 67

0425830663

00018172

THE JUNIOR LEAGUE OF WILKES-BARRE
INC
280 N SHERMAN ST STE 102
WILKES BARRE PA 18702



320447

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

R. Markavage
Signature of officer or trustee

2-3-11
Date

Treasurer
Title