

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

07/01/00

OMB No 1545-1150

2009

Open to Public Inspection

Α	For the	2009 calend	ar year,	or tax year beginning	0//01/09 ,and	ending	<u> 06/.</u>	30/ T	<i></i>			
В	Check if Address	• •	Please use IRS	C Name of organization	on					D	Emple	oyer identification number
H	Name ch		label or	The Junior	League of Ly	nchbu	rg,	Inc			54-	6049033
	initial ret	turn	type		O box, if mail is not delivered t		ress)		Room/suite	E	•	hone number
Ц	Termina	tion	See Specific	1225 Main	<u>Street, Suite</u>	204				<u> </u>		<u> -846-6641</u>
Ц	Amende	d return	instruc-	City or town, state or cou	• •					F	Grou	p Exemption
LL	Applicati	on pending	tions.	Lynchburg		VA 24	504				Numb	
	Sec	tion 501(c)(3)	-		nonexempt charitable tru	usts must	attach		G Accoun	٠.	thod	Cash X Accrual
		 _		npleted Schedule A (F					Other (spec		1 -	·
1	Websit			leaguelynch					H Check require	▶ [d to atta	If the	organization is not idule B (Form 990,
<u>J</u>		empt status (che				4947(a)(1)		527	990-EZ	or 990	-PF)	
K	Check	_		-	on 509(a)(3) supporting org							e than \$25,000 A
					if the organization chooses				ile a complet	e retu		101 600
					s, if \$500,000 or more, file Forn				aa tha ina	4	<u>▶ \$</u>	101,689
	Part I				nges in Net Assets o	or Funa	Balan	ces (S	ee the ins	truct		66,419
	1			its, and similar amounts red							1	00,419
	2	-		enue including governm	ent tees and contracts						2	
	3	·		d assessments							3	8,599
	4	Investment in					1 1	1			4	0,399
	5a			ale of assets other than	•		5a					
	Ь			asis and sales expense		>	_5b				-	
_	C	, ,			ory (Subtract line 5b from line 5			ahaak har		₽	5c	
ű	6	-			parts of Schedule G) If any amo		gaming,	check her	e P	X		
Revenue	a	a Gross revenue (not including \$ of contributions reported on line 1) 6a 26,091								001		
œ	l .	•	•	ththfdraw-	avnanaa		6b		41,			
	b		•	s other than fundraising	expenses Lactivities (Subtract line 6b	from line (11,	, 2,	6c	-15,636
	C			lory, less returns and all		nom me	7a	ł		470	00	
	7a				lowances	7b						
		c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)								7c	470	
	8)	8	110	
	9									9	59,962	
_	10			mounts paid (attach sch				-051	/FD	\exists	10	13,655
	11	Benefits paid			,		KE	ECEI			11	
₽,	12	•		ensation, and employee	e benefits		Γ			S-0SC	12	11,542
%	13	- '	•	d other payments to ind		680	NO	V 15	2010	Ŏ	13	4,600
Š	14	Occupancy,	rent, util	ities, and maintenance		1	•		Į.	RS	14	13,779
ش س	15	Printing, pub	lications	, postage, and shipping		ĺ	~	ンフに	1, UT	=	15	6,080
ب	16	Other expen	ses (des	scribe > See St	atement 3	<u> </u>		300	4, O I	رل <u>ـــ</u> ا)	16	16,666
UEL	17	Total expen	ses. Ad	d lines 10 through 16						>	17	66,322
<u> </u>	18	Excess or (d	leficit) fo	r the year (Subtract line	17 from line 9)						18	-6,360
먑	19	Net assets o	r fund ba	alances at beginning of	year (from line 27, column	(A)) (must	agree w	ith				
ANNEU Net Assets		end-of-year f	figure re	ported on pnor year's re	turn)						19	401,815
75	20	Other chang	es in ne	l assets or fund balance	s (attach explanation)	S	ee S	state	ment 4	:	20	3,800
ر	21				Combine lines 18 through 2					<u> </u>	21	399,255
<u>"_</u> E	art II	Baland	ce She	ets. If Total assets on	line 25, column (B) are \$1,	,250,000 o	r mor <u>e, f</u>				m 990-l	
				(See the instructions	for Part II)			(A)	Beginning of y			(B) End of year
		savings, and ii	nvestme	nts					391,	<u> </u>		387,944
		nd buildings		0 0				<u> </u>		215	23	14 550
		assets (descri	be 🕨	See Stater	ment 5)			346	24	14,559
	Total a			Goo State	mont 6				402,	594 779	-	402,503
		iabilities (des		·)	<u> </u>	401,		26 27	3, <u>248</u> 399,255
					must agree with line 21)	tions		1	- TOI,	<u>0 T O</u>		- 000 F7
FO	r Privac	y Act and Pa	perwork	Reduction Act Notice	, see the separate instruc	วนงกร.						/ } rorm ラブリーにん (2009)

	<u>ior League of Lynchbur</u>						Page 2
Part III Statement of Prog	gram Service Accomplishments (S	See the instruct	ons for Part II	<u>l.)</u>		Ex	penses
What is the organization's primary exemp	ot purpose?				(R	equired	for section
See Statement 7					50	11(c)(3) a	and 501(c)(4)
	out the organization's exempt purposes. In a c				orç	ganızatıc	ons and section
manner, describe the services provided,	the number of persons benefited, or other rele	evant information for	•		49	47(a)(1)	trusts, optional
each program title					for	r others)
28 Children's programs - pro	ovided theatrical presentation,					1	
entertainment and educati	ion for children at a local					1	
festival event.						1	
(Grants \$) If this amount includes foreign grants, che	ck here	<u> </u>	LL	28a		<u>30,552</u>
29 Various grants to provide	e resources to community programs				1	1	
that support nutrition, e	education and healthy activities						
to the youth of Central V	_			<u>, </u>			
(Grants \$ 5,150) If this amount includes foreign grants, che	ck here	<u> </u>		29a	<u> </u>	5,183
30 Community Project - Provi	iding education, training and	-	-		1 1	_	
information to battle chi	ildhood obesity in Central					1	
Virginia.				 -		ĺ	
(Grants \$) If this amount includes foreign grants, che	ck here	<u> </u>	Щ	30a	<u> </u>	4,262
31 Other program services (attach sche	dule) See Statement 8			_		ĺ	
(Grants \$) If this amount includes foreign grants, che	ck here	<u> </u>	Ц	31a	ļ	612
32 Total program service expenses (a	add lines 28a through 31a)			<u> </u>	32	L	40,609
Part IV List of Officers, Directo	ors, Trustees, and Key Employees. List eac						
(a) Na	me and address	(b) Title and average hours per week	(c) Compensation (If not paid,		Contribu	efit plans &	(e) Expense account and
(4) (14)	me and address	devoted to position	enter -0)		rred comp		other allowances
Beth Kent	Lynchburg	Past Pres.		ļ			
1225 Main Street, Suite 204	VA 24504	1.00	0	<u> </u>		0	0
Tracey Dixon	Lynchburg	President					
1225 Main Street, Suite 204	VA 24504	1.00	0	<u> </u>		0	0
Leah Jennings	Lynchburg	Director					
1225 Main Street, Suite 204	VA 24504	1.00	0	┞-		. 0	0
Beth Payne	Lynchburg	Secretary					
1225 Main Street, Suite 204	VA 24504	1.00	0	-		0	0
Libi Prince	Lynchburg	President El	ect				
1225 Main Street, Suite 204	VA 24504	1.00	0	┡-		0	0
Melissa Zadell	Lynchburg	Treasurer					
1225 Main Street, Suite 204	VA 24504	1.00	0	┡-		0	0
Stacey Kelleher	Lynchburg	Director					
1225 Main Street, Suite 204	VA 24504	1.00	0	₩		0	0
Sallie Carson	Lynchburg	Director					
1225 Main Street, Suite 204	VA 24504	1.00	0	₩-		0	0
Holly Perrow	Lynchburg	Community VP		1			
1225 Main Street, Suite 204	VA 24504	1.00	0	╄-		0	0
Cathy Dalton	Lynchburg	Director	_				_
1225 Main Street, Suite 204	VA 24504	1.00	0	Ή		0	0
Jennifer Perry	Lynchburg	Director	_			_	_
1225 Main Street, Suite 204	VA 24504	1.00	0	Ή—		0	0
Aimee Mills	Lynchburg	Director	_				_
1225 Main Street, Suite 204	VA 24504	1.00	0	 -		0	0
Tressa Gandy-Jones	Lynchburg	Director					_
1225 Main Street, Suite 204	VA 24504	1.00	0	-		0	. 0
Catherine Varner	Lynchburg	Director	_				_
1225 Main Street, Suite 204	VA 24504	1.00		Ή		0	0
Liz Reel	Lynchburg	Director	_			_	
1225 Main Street, Suite 204	VA 24504	1.00		Ή		0	0
Ashley Carter	Lynchburg	Director	_			_	_
1225 Main Street, Suite 204	VA 24504	1.00	0	Ή		0	0
Lisa Nickleson	Lynchburg	Director	_			_	=
1225 Main Street, Suite 204	VA 24504	1.00	0	' 		0	0
		1		1			

Form 9	990-EZ (2009) The Junior League of Lynchbu	rg, Inc 5	4-604	9033				Page 4	
Pari									
	501(c)(3) organizations and section 4947(a)(1) none	exempt charitab	le trusts	s must ai	nswer questioi	าร 46	-491	o	
	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 oppo	sition to				Yes	s No	
(candidates for public office? If "Yes," complete Schedule C, Part I					46		X	
	Did the organization engage in lobbying activities? If "Yes," complete Schedule	C, Part II				47		X	
	ls the organization operating a school as described in section 170(b)(1)(A)(ii)?		chedule E	<u> </u>		48		X	
	Did the organization make any transfers to an exempt non-chantable related o					49a		X	
	If "Yes," was the related organization a section 527 organization?					49b			
	Complete this table for the organization's five highest compensated employees	s (other than officers	, directors	, trustees a	ind key				
6	employees) who each received more than \$100,000 of compensation from the	organization If ther	e is none,	enter "Nor	ne "				
	(a) Name and address of each employee paid more	(b) Title and average		npensation	(d) Contributions to employee benefit plans &		Expe		
	than \$100,000	hours per week devoted to position			deferred compensation			vances	
None					-				
] _		_		-			
-									
			1						
		1							
		1	ļ						
			1						
f ·	Total number of other employees paid over \$100,000	•							
		_			•				
51 (Complete this table for the organization's five highest compensated independe	ent contractors who e	ach recei	ved more t	han				
	\$100,000 of compensation from the organization. If there is none, enter "None								
`	Troops of componed and mentals organization in the control of cont								
	(a) Name and address of each independent contractor paid more than \$100,000	(t) Type of	service	(c) (Compen	sation	1	
Non	e								
	Total number of other independent contractors each receiving over \$100,000	▶							
-	•								
	Under penalties of penury, I declare that I have examined this return, including	accompanying schedu	les and sta	tements, and	to the best of my kno	wledge			
	and belief, it is true, correct, and complete Declaration of preparer (other than	officer) is based on all	ınformatıon	of which pre	parer has any knowle	dge			
Sign	I Gally by		1	11-9.	-10				
Here	Signature of officer		C	ate					
	Traced Dixon								
	Type or print name and title								
	Preparer's	Date		Check if	Preparer's Ide	ntifying N	umber	(See instr)	
Paid	· · · · · · · · · · · · · · · · · · ·	10/2	5/10	self- employed	.ml				
	Tarrella a Markey Company DC								
Use	Delu								
JJ6 (T				Phone	1-52	8-	1246	
May H	he IRS discuss this return with the preparer shown above? See instructions				no ▶ 4.34		es	No	
ividy ti	no into discuss this retain with the preparer shown above. Occ manualions								

Yes No Form **990-EZ** (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.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

The Junior League of Lynchburg, Inc.

Employer identification number 54 – 6049033

	The Court of Bullio Charles Charles (All proprietions must complete this next \ Conjugations												
	art I	Reason for Public Charity Status (All organizations must complete this part.) See instructions. organization is not a private foundation because it is (For lines 1 through 11, check only one box.)											
Γhe	orgai	nization is not a	a private foundation because	it is (For lines 1 through 11, che	ck only or	ne box)							
1		A church, cor	vention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(<i>/</i>	4)(i).						
2		A school desc	cribed in section 170(b)(1)(A	i)(ii). (Attach Schedule E)									
3		A hospital or	a cooperative hospital service	e organization described in secti	on 170(b)	(1)(A)(iii)							
4	П	A medical res	earch organization operated	in conjunction with a hospital des	scribed in	section 1	70(b)(1)	(A)(iii).	Enter th	e hospi	ıtal's name,		
		city, and state		•									
5		•		a college or university owned or	operated	by a gove	rnmenta	ıl unıt de	scribed	ın			
Ū				1)	оролилов								
	-			vernmental unit described in sec			Α.						
6	-									ماط			
7	L_J	_	•	ubstantial part of its support from	a govern	mentai un	at or from	n the get	nerai pu	DIIC			
_	\Box		section 170(b)(1)(A)(vi). (Co	,									
8	닕	-		'0(b)(1)(A)(vi). (Complete Part II	•					_			
9	X		• • • • • • • • • • • • • • • • • • • •	more than 33 1/3 % of its suppo				-		-			
		receipts from	activities related to its exemp	ot functions—subject to certain ex	xceptions,	and (2) n	o more t	han 33	1/3 % o	fits			
		support from	gross investment income and	d unrelated business taxable inco	me (less	section 51	11 tax) fr	om busi	nesses				
	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)												
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).												
11	П	An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the	functions	of, or to	саггу оц	t the				
		purposes of o	ne or more publicly supporte	d organizations described in sect	tion 509(a)(1) or sec	ction 509	9(a)(2) S	See sec	tion			
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h												
		a Type	I b Type II	с Туре III—Functioла	illy integra	ted	d	Тур	e III-Otl	her			
e	\Box	٠. ب	_ ··	nization is not controlled directly	or indirect	lv bv one	or more	dısqualı	fied				
•	ليا		•	and other than one or more public						tion			
		•	ection 509(a)(2)		.,								
			` ` ` `	mination from the IRS that it is a	Type I Ty	ne II or T	vne III s	unnortin	п				
f		•		mination from the into that it is a	Type I, Ty	pe ii, oi i	ype iii s	apportin	9				
		-	check this box			41							\sqcup
g		•	· · · · · · · · · · · · · · · · · · ·	on accepted any gift or contribution	on irom ar	iy or the							
		following per											T
		.,		ntrols, either alone or together wil	th persons	describe	d in (ii)					Yes	No
		and (III) b	elow, the governing body of	the supported organization?							11g(i)	T	↓
		(ii) A famıly	member of a person describe	ed in (i) above?							11g(ii	Щ	<u> </u>
		(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?							11g(i	i)	
<u>h</u>		Provide the f	ollowing information about the	e supported organization(s)	·								
(i)		e of supported	(ii) EIN	(iii) Type of organization	1 ' '	rganization		ou notify		s the		nount of	
	org	anization		(described on lines 1–9		sted in your	the organ	nization in	organizat	ion in col zed in the	sup	port	
				above or IRC section (see instructions))	governing	document?		oort?		S ?			
				(555	Yes	No	Yes	No	Yes	No			
					ĺ								
											· · · · · · · · · · · · · · · · · · ·		
					 								
					 								
					-								
		_	<u> </u>			ļ			ļ				

Sche		Junior L						Page 2
P	art il Support Schedule for Or				(1)(A)(iv) and ⁻	170(b)(1)(<i>A</i>	۱)(vi)	
	(Complete only if you che	cked the box of	<u>on line 5, 7, or</u>	8 of Part I.)				*
	tion A. Public Support							
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	, —	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
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)	,		<i></i>			_	
6	Public support. Subtract line 5 from line 4							
	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					ļ <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 carried on							
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10							,
	· ·		L			ł	12	
12 13	Gross receipts from related activities, etc. (s First five years. If the Form 990 is for the o		second third fourt	n or fifth tay year a	s a section 501/o\/	(3)	14	
13	organization, check this box and stop here	ngamzation's inst, :	secona, mia, iouri	i, or illuriax year a	s a section son(c)	(3)		▶ □
500	tion C. Computation of Public Su	nnort Percent						
	Public support percentage for 2009 (line 6,	 		·			14	%
14	-			.17)		ŀ	15	<u> </u>
15	Public support percentage from 2008 Scher			and line 14 is 22	1/2 % or more she	l aak thia hay	13	
16a	33 1/3 % support test—2009. If the organic			o, and line 14 is 33	1/3 % of more, cale	SCK IIIIS DOX		▶ □
L	and stop here. The organization qualifies a 33 1/3 % support test—2008. If the organization			or 160, and line 15.	s 22 1/2 % or more	a chack this		
b					S 33 1/3 /6 01 111011	e, check this		▶ □
170	box and stop here. The organization qualifi		-		or 16h, and line 14	Lie 10% or		
17a	10%-facts-and-circumstances test—2009	-						
	more, and if the organization meets the "fact					V HOW LITE		▶ □
_	organization meets the "facts-and-circumsta		-		=	ne 15 is 100/	or	~ _
b	10%-facts-and-circumstances test—2008	-					UI .	
18	more, and if the organization meets the "fac organization meets the "facts-and-circumsta Private foundation. If the organization did	ances" test. The org	ganızatıon qualıfies	as a publicly suppo	orted organization			>

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

500	Complete only if you che	cked the box of	n line 9 of Part	. 1.)	·	 -	
	tion A. Public Support endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Çai	endar year (or fiscar year beginning iii)	(a) 2003	(b) 2000	(6) 2007	(4) 2000	(6) 2003	(I) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	78,329	96,858	70,045	70,140	66,419	381,791
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513	70,979	21,720	26,396	36,974	26,561	182,630
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	149,308	118,578	96,441	107,114	92,980	564,421
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	5,000	20,000		5,000	5,000	35,000
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						25.000
_	Add lines 7a and 7b	5,000	20,000		5,000	5,000	35,000
8	Public support (Subtract line 7c from line 6)	l l					529,421
Sec	tion B. Total Support	<u> </u>					<u> </u>
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	149,308	118,578	96,441	107,114	92,980	564,421
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,396	15,053	12,660	10,008	8,599	58,716
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	12,396	15,053	12,660	10,008	8,599	58,716
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on	1,081	3,903	687	142	110	5,923
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	162,785	137,534	109,788	117,264	101,689	629,060
14	First five years. If the Form 990 is for the company and stop here		econd, third, fourth	, or fifth tax year as	a section 501(c)(3	9)	▶ □
500	organization, check this box and stop here						
	Public support percentage for 2009 (line 8,					15	84.16%
15 16	Public support percentage from 2008 Sche			'''		16	84.91%
	tion D. Computation of Investme						
17	Investment income percentage for 2009 (lin			olumn (f))	_	17	9 %
18	Investment income percentage from 2008					18	9 %
19a	33 1/3 % support tests—2009. If the organity is not more than 33 1/3 %, check this bo	nization did not chec ox and stop here. Th	ck the box on line 1 the organization qua	alifies as a publicly s	supported organiza	tion	▶ X
b	33 1/3 % support tests—2008. If the orga- line 18 is not more than 33 1/3 %, check th						▶ □
20							

Schedule A (Form 990 or 990-EZ) 2009 The Junior League of Lynchburg, Inc 54-6049033

Page 4

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 G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information Regarding
Fundraising or Gaming Activities
Complete If the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

Open To Public Inspection

Employer identification number

The Junior League	of Lynchbu	urg	<u>, I</u>	nc	54-60490	
Part I Fundraising Activities. Complete if Form 990-EZ filers are not required				red "Yes" to Form	990, Part IV, line	÷ 17.
1 Indicate whether the organization raised funds through a	ny of the following a	ctivitie	s Ch	eck all that apply		
a Mail solicitations	e Solicitation	of non	-gove	rnment grants		
b Internet and email solicitations	f Solicitation	of gov	ernm	ent grants		
c Phone solicitations	g Special fund	draisin	ıg eve	nts		
d In-person solicitations						
2a Did the organization have a written or oral agreement wit or key employees listed in Form 990, Part VII) or entity in	h any individual (inc .connection-with pro	luding ofessio	office onal-fu	ers, directors, trustees indraising services? —		-YesNo
b If "Yes," list the ten highest paid individuals or entities (futo be compensated at least \$5,000 by the organization	ndraisers) pursuant	to agr	eeme	nts under which the fur	ndraiser is	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did raiser custo contro	have dy or ol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (I)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		\vdash				

Total			•			

Page 2

Schedule G (Form 990 or 990-EZ) 2009

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported Part II more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (c) Other events (b) Event #2 (d) Total events Ducky Derby & S None (add col (a) through col (c)) (event type) (event type) (total number) 41,957 41,957 Gross receipts Less Charitable 2 26,776 26,776 contributions Gross revenue (line 1 15,181 15,181 minus line 2) Cash prizes 194 194 Noncash prizes 1,889 1,889 Rent/facility costs Direct Expenses 5,913 5,913 Food and beverages 1,296 1,296 Entertainment 28,705 28,705 Other direct expenses 37,997 10 Direct expense summary Add lines 4 through 9 in column (d) -22,816 Net income summary Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (Add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming col (a) through col (c)) bingo/progressive bingo 10,910 10,910 Gross revenue 3,500 3,500 Cash prizes Direct Expenses Noncash prizes Rent/facility costs 230 230 Other direct expenses Yes 100.00 % Yes % Yes % Volunteer labor No No No 3,730) Direct expense summary Add lines 2 through 5 in column (d) 7,180 Net gaming income summary Combine line 1, column d, and line 7 Yes No VA Enter the state(s) in which the organization operates gaming activities X Is the organization licensed to operate gaming activities in each of these states? 9a If "No," Explain Requirement to license gaming activities applies only if total gaming income exceeds \$25,000 annually. X Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a If "Yes," Explain X 11 11 Does the organization operate gaming activities with nonmembers? Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity 12 formed to administer chantable gaming?

Sche	dule G (Fo	rm 990 or 990-EZ) 2009	The	Junior	League	of	Lynchburg,	Inc	54-604903	3	P	age 3
										<i></i>	Yes	No
13	Indicate ti	he percentage of gaming activi	ty operate	ed in								
а	The organ	nization's facility						13a				
b	An outsid	e facility						13b	100.00%			
14	Provide th	he name and address of the pe	rson who	prepares the	organization's (gaming	/special events books					
	and recor	rds										
	Name >	Karyn Pantoja										
		1225 Main Street,	Suite	e 204								
	Address >	Lynchburg						VA	24504			
15a	Does the	organization have a contract w	rith a third	party from wh	om the organiz	ation r	receives gaming					
	revenue?									15a		X
b		enter the amount of gaming rev				\$		and	the			_
		of gaming revenue retained by t						—			ĺ	
С	If "Yes," e	enter name and address of the	third party	1								
	Name >											
	Address >											
16	Gaming r	manager information										
	Name >	Tracey Dixon										
	Gaming r	manager compensation > \$			0							
	Description	on of services provided >	Presi	dent								
	X Direc	ctor/officer Emp	oloyee	<u> </u>	ndependent co	ntracto	or					
17		ry distributions										
а		janization required under state	law to ma	ke charitable o	listributions fro	m the	gaming proceeds to					
		state gaming license?								17a		X
b		amount of distributions require				xempt	organizations or spent					
	in the org	anization's own exempt activities	es during	the tax year	• \$					<u> </u>	L	

Form **4562**

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

See separate instructions.

► Attach to your tax return.

OMB No 1545-0172 2009

Identifying number

Attachment Sequence No 6

The Junior League of Lynchburg, Inc 54-6049033 Business or activity to which this form relates Indirect Depreciation Part 1 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000 Maximum amount. See the instructions for a higher limit for certain businesses. 1 2 Total cost of section 179 property placed in service (see instructions) 800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 946 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 0 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation Month and year (d) Recovery (e) Convention (f) Method (a) Depreciation deduction (a) Classification of property placed in (business/investment use period service only-see instructions) 3-year property 19a b 5-year property 7-year property d 10-year property 15-year property f 20-year property S/L 25 yrs 25-year property S/L 27 5 yrs MM Residential rental property мм S/L 27 5 yrs ММ Nonresidential real 39 yrs S/L property мм S/L Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System S/L 20a Class life 12 yrs S/L b 12-year 40-year 40 yrs MM S/L Part IV Summary (See instructions.) 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 946 22 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs 23 Form 4562 (2009) For Paperwork Reduction Act Notice, see separate instructions.

JRLEAGUE The Junior League of Lynchburg, Inc
54-6049033 Federal Statements

FYE: 6/30/2010

Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount				
Blaze Periodical	\$	110			
Total	\$	110			

10/25/2010 4:48 PM

10/25/2010 4:48 PM Statement 2 - Form 990-EZ, Part I, Line 10 - Payments to Affiliates 8,505 8,505 Amount of Payment Federal Statements Natl Affiliate Dues Purpose JRLEAGUE The Junior League of Lynchburg, Inc Association of Junior Leagues Intl 80 Maiden Lane New York, NY 10038

Name and Address

Total

FYE: 6/30/2010 54-6049033

JRLEAGUE The Junior League of Lynchburg, Inc 54-6049033 Federal Statements

FYE: 6/30/2010

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
Advertising	1,521
Training	1,084
Insurance	1,653
Supplies	2,601
Dues & Subscriptions	25
Miscellaneous	354
Bank Charges	115
Web Site Hosting	722
Food	1,577
Entertainment	6,225
Awards	639
Taxes & Licenses	150
Total	\$ 16,666

Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	 Amount		
Unrealized gains on pooled investment funds Unrealized gain on invested funds	\$ 849 2,951		
Total	\$ 3,800		

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginnin of Year		End of Year
Accounts Receivable	\$	\$	1,253
Prepaid Expenses and Deferred Charges	1,	096	1,899
Office Furniture & Equipment	10,	956	12,144
Less Accumulated Depreciation	8,	505	9,451
75th Anniversary Endowment	7,	049	7,964
Security Deposits		750	750
	11,	346	14,559

Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Be o	End of Year		
Accounts Payable and Accrued Expenses	\$	779	\$	3,248
		779		3,248

10/25/2010 4:48 PM

JRLEAGUE The Junior League of Lynchburg, Inc 54-6049033 Federal Statements

FYE: 6/30/2010

Statement 7 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

The Junior League of Lynchburg is an organization of women committed to promoting volunteerism, to developing the potential of women, and to improving the community through effective action and leadership of trained volunteers. It's purpose is exclusively educational and charitable. It's focuses are: children, women, environment, arts and preservation.

Statement 8 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description

Training of local women to be effective leaders by promoting voluntarism and improvement of the community.

10/25/2010 4:53 PM

JRLEAGUE The Junior League of Lynchburg, Inc
54-6049033 Federal Asset Report

FYE: 6/30/2010

Form 990, Page 1

Asset	Description	Date I <u>n Service</u>	Cost	Bus %	Sec 179Bonus	Basis for Depr	Per	Conv Meth	Prior	Current				
Other	Other Depreciation:													
4	File cabinet	7/01/76	25			25	10	MO S/L	25	0				
5	Floor Lamp	7/01/76	10			10	10	MO S/L	10	Ō				
7	Metal storage cabinet	7/01/76	75			75	10	MO S/L	75	0				
13	two designer Chippendale c	7/29/82	402			402	10	MO S/L	402	0				
20	Filing cabinet	2/13/84	119			119	10	MO S/L	119	0				
27	Plastic chair	7/01/85	182			182	5	MO S/L	182	0				
30	Folding tables	7/28/86	309			309	10		309	0				
31	Two folding tables	1/21/87	89			89	10	MO S/L	89	0				
32	Folding chair	4/22/87	100			100	10		100	0				
62	Software-AJLI	10/22/96	100			100	5	MO S/L	100	0				
66	Copier AI-2310 (Cobb)	9/20/00	5,016_			5,016	_	-MO S/L	5;016					
72	Dell Dimension 9100	8/17/05	1,025			1,025	5	MO S/L	786	205				
73	Chairs for new HQ	8/01/07	1,535			1,535	5	MO S/L	588	307				
74	Mini fridge, Micro-wave, and Shelves	7/11/07	537			537	5	MO S/L	215	107				
75	Tables for new HQ	7/31/07	269			269	5	MO S/L	103	54				
77	Ikea Furniture for Suite	7/31/07	838			838 325	5	MO S/L	321	168				
78 70	New Desk	6/30/08 5/01/10	325			1,188		MO S/L MO S/L	65 0	65 40				
19	Copier Km3035R	3/01/10 _	1,188		-)	MO 3/L	<u> </u>					
	Total Other Depreciation	_	12,144		_	12,144			8,505	946				
	Total ACRS and Other Depre	eciation =	12,144		=	12,144			8,505	946				
	Grand Totals Less: Dispositions and Transf Less: Start-up/Org Expense	ers —	12,144		-	12,144 0 0			8,505 0 0	946				
	Net Grand Totals	_	12,144		-	12,144			8,505	946				