

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



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

OMB No. 1545-0047 Open to Public

4947(a)(1) nonexempt charitable trust. Department of the Treasury Inspection ► Attach to Form 990 or Form 990-EZ. See separate instructions. Internal Revenue Service Employer identification number Name of the organization NATIONAL ASSN OF JUNIOR AUXILIARIES INC 64-0362384 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) X An organization that normally receives. (1) more than 33 1/3 % of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III-Functionally integrated Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the q following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? . 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . 11g(iii) Provide the following information about the supported organization(s). (iti) Type of organization (iv) is the organization (vi) is the (v) Did you notify (vii) Amount of (i) Name of supported (ii) EIN (described on lines 1-9) in col. (I) listed in your the organization in organization in col support organization above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? U S.2 0 0 0 0 0

Schedi	tie A.(Form 990 or 990-EZ) 2009 NATIONAL AS					64-0362384				
Par	•				1)(A)(iv) and	170(b)(1)(A)(vi)			
ŧ	(Complete only if you checked to	the box on line	5, 7, or 8 of	Part I.)						
	ion A. Public Support									
Cale	ndar 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.")				,		0			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0			
4 5	Total. Add lines 1 through 3	O	0	0	0	0	0			
6	Public support. Subtract line 5 from line 4.						0			
	ion B. Total Support									
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	. (c) 2007	(d) 2008	(e) 2009	(f) Total			
7 8	Amounts from line 4	0	0	0	0	O	0			
9	sources Net income from unrelated business activities, whether or not the business is regularly carried on				·		0			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0			
11	Total support. Add lines 7 through 10.		ئـــــــــــــــــــــــــــــــــــــ				0			
12	Gross receipts from related activities, etc. (s				•	12				
13 Sect	First five years. If the Form 990 is for the or organization, check this box and stop here ion C. Computation of Public Support	· · · · <u>· </u>		rd, fourth, or fift	-		(3)			
14	Public support percentage for 2009 (line 6, c		ed by line 11	column (fi)		14	0 00%			
15	Public support percentage from 2008 Sched					15	0.00%			
16a	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 and stop here. The organization qualifies as a publicly supported organization									
b 17a	box and stop here. The organization qualifies as a publicly supported organization									
b 18	or more, and if the organization meets the "f the organization meets the "facts-and-circum 10%-facts-and-circumstances test-2008, or more, and if the organization meets the "f the organization meets the "facts-and-circum Private foundation. If the organization did not ch	nstances" test If the organizat acts-and-circum nstances" test.	The organizati ion did not che nstances" test The organizati	on qualifies as eck a box on lin , check this box on qualifies as	a publicly sup e 13, 16a, 16b and stop her a publicly sup	ported organiza , or 17a, and lin e. Explain in Pi ported organiza	tion ▶ ☐ ne 15 is 10% art IV how			

NATIONAL ASSN OF JUNIOR AUXILIARIES INC 64-0362384 Page 3 Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 479,288 520,444 503,386 547,484 541,183 2,591,785 include any "unusual grants") . . . Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 11,828 32,311 33,668 82.871 49,451 210,129 organization's tax-exempt purpose. . Gross receipts from activities that are not an 0 unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on 0 its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 515,214 579.795 574.851 562,159 569,895 2,801,914 7a Amounts included on lines 1, 2, and 3 0 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 0 amount on line 13 for the year O n 0 0 c Add lines 7a and 7b. Public support (Subtract line 7c from line 6) 2,801,914 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 515,214 579,795 574,851 562,159 569,895 2,801,914 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 54,700 76,058 28,392 -96,320 14,568 77,398 **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 ۵ c Add lines 10a and 10b. 54,700 76.058 28,392 -96,320 14,568 77,398 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 0 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).... 0 Total support. (Add lines 9, 10c, 11, 569,914 655,853 603,243 2,879,312 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) **▶** [Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 97 31% Public support percentage from 2008 Schedule A, Part III, line 15. 16 91.17% Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)). . . 17 2.69% Investment income percentage from 2008 Schedule A, Part III, line 17. 18 18 3.53% 19a 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 .**▶** X not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. b 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 20

Schedule A! (Form	990 or 990-EZ) 2009	NATIONAL A	SSN OF JUNIO	OR AUXILIARI	ES INC		64-0362384	Page 4
Part IV	Supplemental	Information.	Complete this	part to provi	de the explanati	ons required	by Part II, line 1	0;
	Part II, line 17a	or 17b; and P	art III, line 12	Provide any	other additional	information.	See instructions	

								•••••
		,						
••								
		· • • • • • • • • • • • • • • • • • • •						
		• • • • • • • • • • • • • • • • • • • •						
	•••••							