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SCANNED

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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

benefit trust or private foundation)

Open to Public Inspection

OMB No 1545-0047

A For the 2009 calendar year, or tax year beginning OCT 1 2009 and ending SEP C Name of organization D Employer identification number Check if applicable use IRS AMERICA'S JUNIOR MISS SCHOLARSHIP label or Address Ichange FOUNDATION print or Name change Doing Business As 23-7438720 Initial See Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-Instruc- P.O. BOX 2786 (251)438-3621 Amende return City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-MOBILE, AL 36652 H(a) Is this a group return pending F Name and address of principal officer. ROBERT CAMPBELL _Yes X No for affiliates? 3353 HALLS MILL RD. MOBILE. AL 36609 H(b) Are all affiliates included? Yes No I Tax-exempt status X 501(c) (3) ◀ (insert no) J 4947(a)(1) or If "No," attach a list (see instructions) J Website: ► WWW.DISTINGUISHEDYW.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Association Trust Other > Year of formation: 1958 M State of legal domicile; AL Part I | Summary Briefly describe the organization's mission or most significant activities: THE PRIMARY PURPOSE OF AMERICA'S Governance JUNIOR MISS SCHOLARSHIP FOUNDATION IS TO PROVIDE THE SERVICES Check this box I 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) <u>15</u> Number of independent voting members of the governing body (Part VI, line 1b) 4 4 Activities & 0 5 Total number of employees (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C)-line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 0. 0 FEB 1 4 2011 **Prior Year Current Year** 105,864. Contributions and grants (Part VIII, line 1h) <u>819</u>,835. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and DEDEN, UT 9,903. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 935,602. 742,832. 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) 14,146. 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) 55,603. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 812,581. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 123,021. Revenue less expenses Subtract line 18 from line 12 s or Beginning of Current Year **End of Year** 1,759,155. 20 Total assets (Part X, line 16) 1,906,589. 1,370,714. 1,513,967. Total liabilities (Part X, line 26) 388,441 39<u>2,622.</u> Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block It is return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, is based on all information of which preparer has any knowledge Under penalties of periory, I declare that I have examined 2/7/2011 Sign Signature of officer Here ROBERT CAMPBELL, PRESIDENT Type or print name and title Date Preparer's identifying number (see instructions) Check if Preparer's Paid signature 02/02/11 employed ▶ Preparer's Firm's name (o SMITH, DUKES & BUCKALEW yours if Use Only self-employed), 3800 AIRPORT BLVD., SUITE 101 address, and Phone no. \triangleright (251)343-1200 MOBILE, AL 36608 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

Form **990** (2009)

Pa	t III Statement of Progra	am Service Accomplis	shments								
1	Briefly describe the organization's mission										
	AJMSF'S PRIMARY PURPOSE IS TO PROVIDE THE SERVICES NECESSARY TO ADMINISTER THE AWARDING OF APPROPRIATE EDUCATIONAL SCHOLARSHIPS BY										
	AMERICA'S JUNIOR	MISS PROGRAMS	(NOW D/B/A DIS	STINGUISHED YOUNG	WOMEN)						
	Did the organization undertake any significant program services during the year which were not listed on										
2	-	any significant program servi	ces during the year which we	ere not listed on	ি ডে						
	the prior Form 990 or 990-EZ?				Yes X No						
_	If "Yes," describe these new ser				Yes X No						
3	Did the organization cease cond		nanges in now it conducts, a	iny program services?	LYes LA_No						
	If "Yes," describe these changes										
4	Describe the exempt purpose as			report the amount of grants and							
	allocations to others, the total ex	-		- · · · · · · · · · · · · · · · · · · ·							
	anocations to others, the total ex	Apenses, and revenue, it any	, for each program service re	ported							
4a	(Code) (Expo	enses \$ 742,832	Including grants of \$	742,832.)(Revenue\$	819,835.)						
				MISS PAGEANT, INC							
	AFFILIATES AND A										
			·								
		•									
4b	(Code) (Exp	enses \$	including grants of \$) (Revenue \$)						
	10.1			\(\frac{1}{2} \cdot \cdo							
4c	(Code) (Exp	enses \$	including grants of \$) (Revenue \$)						
											
											
											
											
				······································							
					 						
			· · · · · · · · · · · · · · · · · · ·								
4d	Other program services (Descri	be in Schedule ()									
,,,	(Expenses \$	including grants of \$) (Rever	nue\$							
4e	Total program service expense		832.	/							
<u> </u>	to. p. og. ain oo. Hoe expella	<u> </u>	<u></u>		Form 990 (2009)						

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FOUNDATION

23-7438720 Page 3

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Part IV	Checklist of Required Schedules	

			· ·	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		_===	
•	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		_ <u></u>
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 169 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 in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? 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	Ì		
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	<u> </u>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	1		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X	 -		v
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,			v
45	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4-		v
40	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		v
4	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			\ v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		_ v
40	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,"	40		v
20	complete Schedule G, Part III	19 20		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		990	
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F0III **330** (2009)

Part IV | Checklist of Required Schedules (continued)

 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 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part I column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c 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? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b 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 II Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disquaperson outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III Was the organ			
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instructions for applicable filing thresholds, conditions, and exceptions)	27		X
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A current or former officer, director, trustee, or key ampleyee? If "Vee " complete Cabadyle I - Port IV		1	
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	/ 28b	 	X
c 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, Part IV	28c	ļ	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
contributions? If "Yes," complete Schedule M	30	ļ	X
31 Did the organization liquidate, terminate, or dissolve and cease operations?			
If "Yes," complete Schedule N, Part I	31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
Schedule N, Part II	32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34 Was the organization related to any tax-exempt or taxable entity?		İ	
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
If "Yes," complete Schedule R, Part V, line 2	35		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	tion?		
If "Yes," complete Schedule R, Part V, line 2	36	X	
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, Part VI	37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
Note. All Form 990 filers are required to complete Schedule O	38	X	L
	Form	990	(2009

23-7438720 Page 5

Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter 4- if not applicable 1	Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
U.S. Information Returns Enter O-f not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) with more of forms W23 included in in a 1. Enter O-f not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) with more of propriess reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this returns? 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				Yes	No
b Enter the number of Forms W2G included in line 1a. Enter 0-if not applicable	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			ĺ
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) wirnings to prize winners? 2 Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 10 If all least one is reported on line 22, did the organization fiel all required federal employment tax returns? Note, if the sum of line 31 and 22 is greater than 250, you may be required to e-file this return (see instructions) 3 If "Yes," has it field a Form 990-T for this year? If "No," provide an explanation in Schedule O 4 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 two a bank account, excerning the calendar year, did the organization have an interest in, or a signature or other authority over, a financial Account in a foreign country two as bank account; or other financial account; or the financial account; or the financial Accounts 5 If "Yes," return the name of the foreign country two as a bank account, excerning the structions for exceptions and filling requirements for form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 Was the organization party to a prohibited tax shelter transaction? 6 Does the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7 If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 8 If "Yes," did the organization neture of Forms 8882 field during the year 9 If Yes," did the organization neture of Forms 8882 field during the year 10 If Yes," did the organization neture of Forms 8882 field during the year 11 If Yes, "Indicate the number of Forms 8882 field during the year 12 If Yes, "Indicate the number of Forms 8882 f					İ
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2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-rife this return (see instructions) 3a Did the organization have innested business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an inferest in, or a significant or other authority over, a financial account in a foreign country (such as a bank account, secunties account, or other financial accountly over, a financial account in a foreign country (such as a bank account, secunties account, or other financial accountly over, a financial account in a foreign country (such as a bank account, secunties account, or other financial account)? b If "Yes," there is mean of the foreign country (such as a bank account, secunties account, or other financial account)? b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Da dany taxable party notify the organization file Form 8886-T, Discisure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction? c If "Yes," did the organization flee Form 8886-T, Discisure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction? b If "Yes," did the organization in excluse section that it was or is a party to a prohibited tax shelter transaction? c If "Yes," did the organization in exclusion of the organization and party to goods and services provided to the payor? b If "Yes," did the organization network that section of the value of the goods or services provided? c If "Yes," did the organization network that accompliation is a payment in excess of \$75	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			-
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p For all contributions of qualified intellectual property, did the organization file Form 8899 as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h 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 organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Tob Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
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b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			9a		
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a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		•			
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amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a	а	, , , , , , , , , , , , , , , , , , ,			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
		amounts due or received from them.)	1		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Form **990** (2009)

Form 990 (2009)

FOUNDATION

23-7438720

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

Sec	tion A. Governing Body and Management				
		1 45		Yes	No
	Enter the number of voting members of the governing body	15			
b	Enter the number of voting members that are independent	15		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	any other	_	7.7	
	officer, director, trustee, or key employee?	· ·	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct	t supervision			37
	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 99	J 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		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	of the	- -		v
	governing body?	•	7a		X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	, the year			
	by the following		0-	v	
a			8a	X	
b	· · · · · · · · · · · · · · · · · · ·	_1.15_	8b	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	at the			v
`	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	- Codo)	9		<u>X</u>
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code)		Yes	No
40-	Describe averaged as been been bronched or offlicted?		10a	162	No X
	Does the organization have local chapters, branches, or affiliates?	ore affiliatos	102		- 41
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapt	ers, armates,	10b		
	and branches to ensure their operations are consistent with those of the organization?	o form?	11		Х
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	e lolliti	 -	-	Λ
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		120		X
	Does the organization have a written conflict of interest policy? If "No," go to line 13	10 F100	12a		
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give to conflicts?	e nse	12b		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	describe	IZU	<u> </u>	
C	in Schedule O how this is done	describe	12c		
13	Does the organization have a written whistleblower policy?		13		Х
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 ii	ndenendent			
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	aopondom			
_	The organization's CEO, Executive Director, or top management official		15a		X
a	Other officers or key employees of the organization		15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)				
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement v	with a			
104	taxable entity during the year?		16a		X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	its participation	100		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization				
	exempt status with respect to such arrangements?		16b		
Sec	etion C. Disclosure				
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 X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflic	t of interest policy, a	nd fina	ancial	
	statements available to the public	, ,,			
20	State the name, physical address, and telephone number of the person who possesses the books and rec	cords of the organiza	tion 🗎	>	
	PAIGE YANCE - (251)438-3621	3			
	751 GOV'T STREET , MOBILE, AL 36652				
			Form	990	(2009

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)	(B)	ny current officer, directo (C)						(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	neck	all	that	app	ly)	compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ROBERT CAMPBELL										
PRESIDENT	5.00	X		X				0.	0.	0.
JACK V. GREER, SR.		ļ							_	_
DIRECTOR	1.00	X			L	<u> </u>		0.	0.	0.
JERRY CURRAN, JR.								_	_	_
DIRECTOR	1.00	X	ļ	ļ	_			0.	0.	0.
JOHN J. CROWLEY, JR.				l	ļ				_	
SECRETARY/TREASURER	1.00	X		X		<u> </u>		0.	0.	0.
PHILLIP KAISER		Ì								
DIRECTOR	1.00	X	<u> </u>	<u> </u>		├ —		0.	0.	0.
THOMAS B. CLEMENT	1 00			1					0	
DIRECTOR	1.00	X	ļ	├	-	-		0.	0.	0.
JAMES BLEDSOE	1 00								•	
DIRECTOR	1.00	X				-		0.	0.	0.
HARWELL E COALE JR	1.00	.						0.	0.	0.
DIRECTOR R E PATTERSON	1.00	^		\vdash				0.	0.	U •
VICE PRESIDENT	1.00	x		X				0.	0.	0.
LORI JO CARBONNEAU		^	<u> </u>	<u> </u>					<u>0.</u>	
DIRECTOR	1.00	v	ŀ					0.	0.	0.
JOHN ROBBINS	1.00	A	\vdash					0.	<u>.</u>	
DIRECTOR	1.00	x			1			0.	0.	0.
RUSSELL E. ALLMAN	1.00	1	\vdash		T					-
DIRECTOR	1.00	$ \mathbf{x} $				ľ		0.	0.	0.
JEFFREY P. ADAMS		 ==	1			Ì				
DIRECTOR	1.00	$ \mathbf{x} $						0.	0.	0.
J. KENNY CROW, JR.										
DIRECTOR	1.00	X						0.	0.	0.
ARTHUR B. FORWARD										
DIRECTOR	1.00	X						0.	0.	0.
		_	<u> </u>	\vdash	\vdash	\vdash				
	I	Ц	<u> —</u>		<u> </u>	Ь	Ц	<u> </u>	<u> </u>	5 000 (0000)

23-7438720 Page 8

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		-		

Pai	t VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)			
	(A)	(B) (C)							(D)	(E)		(F)	
	Name and title	Average Position hours (check all that apply)						I. A	Reportable Reporta			Estimate	
	,	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC))	amount of other compensation from the organization and relation organization organization of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other control of the other compensation of the other control of the other control of the other compensation of the other compensation of the other compensation of the other control of t	tion e ion ed
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1b	Total .						▶		0.	1	0.		0.
2	Total number of individuals (including but recompensation from the organization	not limited to th	nose	liste	ed a	bov	e) wl	ho r	eceived more than \$100	0,000 in reportable			0
	Compensation from the organization					-						Yes	No
3	Did the organization list any former officer			e, ke	y en	nplo	yee,	or I	nighest compensated ei	nployee on			v
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si			omp	ens	atıoı	n and	d ot	her compensation from	the organization		3	X
٠	and related organizations greater than \$15	0,000? If "Yes,	," cc	mpl	ete	Sch	edul	e J	for such individual		ļ	4	X
5	Did any person listed on line 1a receive or the organization? If "Yes," complete Sched	•			from	n any	y uni	relat	ted organization for serv	ices rendered to	į	5	х
Sec	ction B. Independent Contractors	uie o jui sucii	рега	5011									
1	Complete this table for your five highest co	ompensated in	dep	ende	ent d	cont	racto	ors 1	that received more than	\$100,000 of comp	ensa	ation from	
	the organization NONE (A)								(B)			(C)	
	Name and business	address							Description of s	services	C	ompensatio	n
	1970	.							-				
2	Total number of independent contractors (\$100,000 in compensation from the organ	-	not i	ımıte	ed to		ose li O	ste	d above) who received r	nore than			
	#100,000 in compensation from the organ	Zation					<u> </u>					Form 990 ((2009)

AMERICA'S JUNIOR MISS SCHOLARSHIP

			OATION				23-7438	3720 Page 9
Pai	t VI	II Statement of Rever	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
at st	1 a	Federated campaigns	1a					
gra	b	Membership dues	1b					
a, a	С	•	1c					
<u>ig</u>	d	•	1d					
sim	e	• ,						
真	f	, , , ,	1 1	105 064				
Contributions, gifts, grants and other similar amounts	_	similar amounts not included abo		105,864.				
ago	9	Noncash contributions included in lines Total. Add lines 1a-1f	s 1a-1f \$		105,864.			
Ť		1 Total. Add lines 14 11		Business Code	103,004.			
e l	2 a	SCHOLARSHIPS-ST	TATE/LOC	99999	745,321.	745,321.		
5	_ b	COULCE A DOUGLE DO AND		99999	74,514.	74,514.	· -	
Se	c							
Program Service Revenue	d	1						
<u>Б</u> т	е	·						
ਕ∣	f	All other program service reve	enue					
	g			•	819,835.		,	
	3	Investment income (including	dividends, inter	est, and	10 001			10 001
		other similar amounts)			12,891.	1		12,891.
	4	Income from investment of ta			•			
	5	Royalties	() Dool	(v) Demonal				
	6.0	Gross Rents	(i) Real	(II) Personal				
	6 a							
ŀ	0							
l			L	•				
	-	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory	3,222					
1	b	Less cost or other basis						
		and sales expenses	6,210					
	c	Gain or (loss)	<2,988	• >				
	C	Net gain or (loss)		•	<2,988.	>		<2,988.
e l	8 a	Gross income from fundraisin	_					
je		including \$						
æ		contributions reported on line	•					
Other Revenue	_	Part IV, line 18 Less: direct expenses	a k					
ŏ		Net income or (loss) from fund	_	` <u> </u>				
		Gross income from gaming a	_					
		Part IV, line 19	6	<u>, </u>				
	b	Less: direct expenses		,				
İ	c	Net income or (loss) from gan	ning activities	•				
	10 a	Gross sales of inventory, less	returns					
		and allowances	á					
	b	Less: cost of goods sold	t	.				
ļ		Net income or (loss) from sale		•				
}		Miscellaneous Revenu		Business Code		1		
}	11 a							+
	b							
	0							
	_	All other revenue Total, Add lines 11a-11d				 		+
	12	Total revenue See instructions.			935,602.	819,835.	0	9,903.
93200 02-04-	9	. Star to the Goo mondonoria			222,002	, , , , , , , , , , , , , , , , , , , ,		Form 990 (2009)

Form 990 (2009)

FOUNDATION

23-7438720 Page 10

Part IX | Statement of Functional Expenses

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

	All other organizations must comple	ete column (A) but are	not required to comple		
	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				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	742,832.	742,832.		•
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				
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	14,146.		14,146.	
8	Pension plan contributions (include section 401(k)	į		-	
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal			4 2 2 2	
С	Accounting	4,900.		4,900.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	- 444			
f	Investment management fees	7,414.		7,414.	
9	Other				<u></u>
12	Advertising and promotion	4 542		1 512	
13	Office expenses	1,713.		1,713.	
14	Information technology		- 		
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		· · · · · · · · ·	-	
21	Payments to affiliates	+		-	
22	Depreciation, depletion, and amortization			>	
23	Other expenses, Itemize expenses not covered				
24	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	BRANDING EXPENSE	39,540.		39,540.	
b	BANK CHARGES	1,550.		1,550.	
С	BOARD EXPENSE	486.		486.	
đ					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	812,581.	742,832.	69,749.	0.
26	Joint costs. Check here ▶ If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Form 990 (2009)

FOUNDATION

23-7438720 Page 11

Part	X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			1	·
-	2	Savings and temporary cash investments		1,506,876.	2	1,628,983.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, di	rectors, trustees, key			
ľ		employees, and highest compensated employee	es Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
ł		4958(f)(1)) and persons described in section 495	58(c)(3)(B) Complete			
		Part II of Schedule L			6	
g Q	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ϋ́	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b]	10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line		12		
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		252,279.	15	277,606
j	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	1,759,155.	16	1,906,589
	17	Accounts payable and accrued expenses		17		
	18	Grants payable		18	••	
	19	Deferred revenue			19	
] :	20	Tax-exempt bond liabilities			20	
ر ا	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
:	22	Payables to current and former officers, director				
Liabilities		highest compensated employees, and disqualifi	ed persons Complete Part II			
- E		of Schedule L	·		22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities Complete Part X of Schedule D	·	1,370,714.	25	1,513,967.
	26	Total liabilities. Add lines 17 through 25		1,370,714.	26	1,513,967
		Organizations that follow SFAS 117, check he	ere 🕨 🗓 and complete			
တ္ဆ		lines 27 through 29, and lines 33 and 34.				
20	27	Unrestricted net assets		268,781.	27	266,056.
ala	28	Temporarily restricted net assets		119,660.	28	126,566
B	29	Permanently restricted net assets			29	-
<u>.</u> 5		Organizations that do not follow SFAS 117, c	heck here 🕨 🔲 and			
ᡖ		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
1886	31	Paid in or capital surplus, or land, building, or ed			31	
¥	32	Retained earnings, endowment, accumulated in	• •		32	
ž	33	Total net assets or fund balances	•	388,441.	33	392,622.
	34	Total liabilities and net assets/fund balances		1,759,155.	34	1,906,589.

Form **990** (2009)

AMERICA'S JUNIOR MISS SCHOLARSHIP

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

23-7438720 Page 12 Form 990 (2009) FOUNDATION Part XI Financial Statements and Reporting No Yes Accounting method used to prepare the Form 990 Cash X Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Were the organization's financial statements audited by an independent accountant? 2b X c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X 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 d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both X Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit X Act and OMB Circular A-133? За

Form **990** (2009)

<u>3b</u>

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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

Open to Public Inspection

Name of the organization

AMERICA'S JUNIOR MISS SCHOLARSHIP FOUNDATION

Employer identification number 23-7438720

Pa	rt I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t \ See inst	tructions				
				because it is. (For lines									
	Cigaii				_		•	-					
1	=			s, or association of chur		nbea in se	ection 170	(D)(1)(A)(I)).				
2	님			'0(b)(1)(A)(ii). (Attach Sc									
3	=			tal service organization									
4	Ш	A medical res	search organization	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter th	e hospital'	s nam	e,
	_	city, and stat											
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t described	d in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II)									
6		A federal, sta	te, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(1	1)(A)(v).					
7	\mathbf{X}	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desci	ribed ii	n
			b)(1)(A)(vi). (Comple				_						
8		•		section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9				eives (1) more than 33			rom contri	butions, m	nembershi	n fees and	d aross rec	eints i	from
				nctions - subject to certa									
				axable income (less sect	-	-	-				•		
			509(a)(2). (Complete			,		204000 5	y and orgu	in Lation at	101 00110 0	0, 10,	•
10				perated exclusively to te	et for publ	ıc safety S	See sectio	n 500(a)/	1)				
11	\Box	_	-	perated exclusively for the	•	•			•	y out the n	urposos o	f one	~
• •		-		ations described in secti		•					•		J1
				organization and compl				c) See Sec	stion sost	aj(S). Onec	N IIIE DOX	lilat	
		a Type I	· · · · -	¬ ·		e III - Func		- arotad		<u> </u>	Type III - C	Wha -	
_				• •			•	•					_
е			•	at the organization is not		-	-	-					n
				han one or more publicly						9(a)(1) or se	ection 509	(a)(2)	
f		_		ten determination from t	tne IRS tha	atitisa iy	ре і, туре	ii, or Type	∋ III				
			rganization, check th		_								L
g		-		organization accepted ar			-		• •				
		• •	•	irectly controls, either al	lone or tog	ether with	persons c	described	ın (ıı) and (ııı) below,	r	Yes	No
		the gove	eming body of the si	upported organization?							11g(i)		
		(ii) A family	member of a persor	n described in (i) above?)						11g(ii)		
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	∍ ?					11g(iii)		
h		Provide the fo	ollowing information	about the supported or	ganization	(s)							
					,		₋						
(i)	Name	of supported	(ii) EIN	(iii) Type of		rganızatıon			(vi) ls		(vii) Am	ount o	f
	orga	inization	, ,	organization (described on lines 1-9		sted in your		ion in col.	organizati (i) organiz	ed in the	Sup	port	
-				above or IRC section	governing	document?	(i) of you	r support?	U.S	.7			
				(see instructions))	Yes	No	Yes	No	Yes	No			
							[
							 			 -			
							 	 	 	 			
			i e	1	1				•				

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 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 1 Gifts, grants, contributions, and membership fees received (Do not 125,983. 105,864. 658,383. 139.842. 79,426. 207,268. 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 79,426, 125,983, 105,864, 658,383, 207.268. 139,842. 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) 658,383. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (d) 2008 Calendar year (or fiscal year beginning in) (a) 2005 (c) 2007 (e) 2009 (f) Total **(b)** 2006 207,268. 139,842. 79,426. 125,983. 105,864. 658,383. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 40,298. 23,436. 12,891. 171,511. 41,815. 53,071. and income from similar sources 9 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 (Explain in Part IV) 829,894. 11 Total support. Add lines 7 through 10 3,338,667. 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, 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 79.33 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 76.84 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 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 $\triangleright |X|$ b 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 17a 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 b 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

Schedule A (Form 990 or 990-EZ) 2009

organization meets the "facts and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for	Organizations	Described in	Section 509(a)(2) (Complete only	ıf you checked the b	ox on line 9 of Part I.
Section A. Public Support		T		,, 		
Calendar 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 Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ızatıon'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						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons	Į.					
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						
c Add lines 7a and 7b				1		
8 Public support (Subtract line 7c from line 6)		-				
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	(4) 2000	(5) 2000	(0) 200.	(4) 2000	(0) 2000	(i) iota.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975	;					
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	,					
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)						
14 First five years. If the Form 990 is for	or the organization	's first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organ	ızatıon,
check this box and stop here		,		•	. ,, ,	▶□
Section C. Computation of Pub	lic Support Pe	ercentage				
15 Public support percentage for 2009			column (f))		15	9
16 Public support percentage from 200	•	•	· VII		16	9
Section D. Computation of Inve		**	·		110	······································
17 Investment income percentage for 2					17	9
18 Investment income percentage from		•	10, 00141111 (1))		18	
19a 33 1/3% support tests - 2009. If th			on line 14 and lin	e 15 is more than		
more than 33 1/3%, check this box	-				·	17 18 1100
	•			•		and .
b 33 1/3% support tests - 2008. If th	-			•		
line 18 is not more than 33 1/3%, ch			•		-	
20 Private foundation. If the organization	on did not check a	LUUX ON IINE 14, 15	a, or 190, check t		·	P
				Sc	hedule A (Form 9	90 or 990-EZ) 20

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.

2009
Open to Public Inspection

Name of the organization

AMERICA'S JUNIOR MISS SCHOLARSHIP

Employer identification number

Pai	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	ls or Accounts Complete if the
ı aı			is of Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
_	Takal sussib as ak and of con-	(a) Donor advised funds	(b) I unus 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 v	-	
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor ac		•
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpos	
Paı	mpermissible private benefit?		Yes No
			Part IV, line /
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p	· —	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic stru	• •	2c
d	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e	-	
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 17	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	-	
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describe	s the organization's accounting for
Dai	conservation easements rt III Organizations Maintaining Collections of	f Art. Historical Treasures, or (Other Similar Assets
ı aı	Complete if the organization answered "Yes" to Form	•	ottlei olilliai Assets.
	Complete if the organization answered Tes to Form	990, Fart IV, line o	
4.	If the experience elected, as normitted under CEAC 11C, no	* ** **	halamaa ahaatadka af ant bustamaal
ıa	If the organization elected, as permitted under SFAS 116, no	·	
	treasures, or other similar assets held for public exhibition, ec	·	ublic service, provide, in Part XIV, the text of
L	the footnote to its financial statements that describes these i		and about warks of out bustorial transcures
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	ce, provide the following amounts relating to
	these items (i) Pavanuas included in Form 990, Part VIII, line 1		▶ ¢
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
^	(ii) Assets included in Form 990, Part X	agurag ar athar amilar as at a fine	P 0
2	If the organization received or held works of art, historical treating following amounts required to be reported under SEAS 4.		iai gairi, provide
_	the following amounts required to be reported under SFAS 1:	to relating to these items	• •
a	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		► \$ ► \$
D	Assets included in Form 990, Part X	•	> \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. $^{932051}_{02\text{-}01\text{-}10}$

Schedule D (Form 990) 2009

AMERICA'S JUNIOR MISS SCHOLARSHIP

	dule D (Form 990) 2009 FOUNDAT					<u> 23-74387</u>	
Par	t III Organizations Maintaining C	collections of A	rt, Historical Tr	easures, or Oth	er Simila	r Assets (co	ntinued)
3	Using the organization's acquisition, accessi	on, and other record	is, check any of the	following that are a	significant u	se of its collect	tion items
	(check all that apply).						
а	Public exhibition	d	I Loan or exc	hange programs			
b	Scholarly research	e	Other				
С	Preservation for future generations				,		
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization's ex	empt purpo:	se in Part XIV.	
5	During the year, did the organization solicit o		•	=			
	to be sold to raise funds rather than to be ma					Yes	. □ No
Par	t IV Escrow and Custodial Arran				rm 990, Par		
	reported an amount on Form 990, Par		Ü		,	, ,	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for contribution	s or other assets no	t included		
	on Form 990, Part X?		•			Yes	□ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table				
	, ,		y		I I	Amo	unt
С	Beginning balance				1c	,	
	Additions during the year				1d		
	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on Fe	orm 990 Part X line	212			Yes	□ No
	If "Yes," explain the arrangement in Part XIV	om 555, r art X, iine				163	140
Par		f the organization an	swered "Yes" to Fo	rm 990 Part IV line	10		
	T T T T T T T T T T T T T T T T T T T	(a) Current year	(b) Prior year	(c) Two years back	1	earchack (a) F	our years back
1a	Beginning of year balance	109,660.	106,762.		i (u) Tillee ye	als back (e)	Jul years back
b	Contributions		100,702.	ļ			
0	Net investment earnings, gains, and losses	12,814.	4,113.	<u> </u>			
ن	Grants or scholarships	12,014.	4,113.		 		
d	·				 	-	
е	Other expenditures for facilities					ŀ	
	and programs	1 400	1 215				
T	Administrative expenses	1,408.	1,215.				
g	End of year balance	121,066.	109,660.		ļ		
2	Provide the estimated percentage of the year			•			
_	Board designated or quasi-endowment	100.00	_%				
b	Permanent endowment	%					
С		%					
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that are held a	nd administered for	the organiza	ation	
	by						Yes No
	(i) unrelated organizations					3a(
	(ii) related organizations					3a(ii) X
b	If "Yes" to 3a(II), are the related organizations	•				31	<u> </u>
4	Describe in Part XIV the intended uses of the						
Par	t VI Investments - Land, Building	s, and Equipm	ent. See Form 990	, Part X, line 10.			
	Description of investment	(a) Cost or o basis (investr			Accumulated epreciation	d (d) B	ook value
1a	Land				···········		
	Buildings					<u> </u>	
	Leasehold improvements				····		
	Equipment						
	Other						
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. column (B), line 1	10(c))		•	0.

Schedule D (Form 990) 2009

Schedule	D.	(Form	990)	2009
Scriedule	$\boldsymbol{\nu}$	(1 01111	コラいり	2005

Part VII Investments - Other Securities.	See Form 990. Part X. line	12		430720 Fage
(a) Description of security or category (including name of security)	(b) Book value	(c)	Method of valuation r end-of-year market	
inancial derivatives				
Closely-held equity interests				
Other				
	 			
		1		
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, Iır			
(a) Description of investment type	(b) Book value		Method of valuation	
		Cost o	r end-of-year market	value
· · · · · · · · · · · · · · · · · · ·	- 			
·				
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, Im				
	a) Description	· . · . · · · · · · · · · · · · · · · ·		(b) Book value
COMMUNITY FOUNDATION OF SOUT	H ALABAMA			276,935
INTEREST RECEIVABLE				671
				·
			+	
		······································		
				
			· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) must equal Form 990, Part X, col (B) lii			<u> </u>	277,606
Part X Other Liabilities. See Form 990, Part >	(, line 25		 	
1 (a) Description of liability		(b) Amount		
Federal income taxes		1 076		
ACCOUNTS PAYABLE SCHOLARSHIPS PAYABLE		1,976. 1,511,991.		
SCHOLARSHIPS PAIABLE		1,311,991.		
~				

uncertain tax positions under FIN 48. 932053 02-01-10

Schedule D (Form 990) 2009

AMERICA'S JUNIOR MISS SCHOLARSHIP

Schedule D (Form 990) 2009 FOUNDATION Part XIV Supplemental Information (continued)	23-7438720 Page 5
Part XIV Supplemental Information (continued)	
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
ADJUSTMENT TO CONVERT FROM ACCRUAL TO CASH: 766.	
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
ADJUSTMENT TO CONVERT FROM ACCRUAL TO CASH: 143344.	
. ,	
	· · · · · · · · · · · · · · · · · · ·
	na dia sa
	· <u>* - · · · · · · · · · · · · · · · · · · </u>

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990)

		•
OMB No 1545-0047	2009	Open to Public Inspection

Name of the organization AMERICA'S JUNIOR MISS SCHOLARSHIP FOUNDATION	JUNIOR M	ISS SCHOLAR	SHIP				Employer identification number 23-7438720
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the select	
criteria used to award the grants or assistance?	stance?						X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for monit	oring the use of grant	funds in the United	1 States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	4 Organizations in the	• United States. C	omplete if the orga	anization answered "Y	es" to 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 Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000 Check this	box if no one recipien	it received more th	an \$5,000 Use Pa	irt IV and Schedule I-1	(Form 990) if addition	al space is needed
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
				,			
	,						

rganizations
) and government organizations
(c)(3) and 6
r of section 501
I number of s
Enter total n

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations

Schedule I (Form 990) 2009

AMERICA'S JUNIOR MISS SCHOLARSHIP FOUNDATION

Page 2

23-7438720

Schedule I (Form 990) 2009 FOUNDATION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Use Part IV and Schedule I-1 (Form 990) if additional space is needed

t of (d) Amount of non- (e) Method of valuation (f) Description of non-cash assistance (book, FMV, appraisal, other)	832.00.			in Part I, line 2, and any other additional information GRANT FUNDS ARE PAID	AS	
cash grant	744 742,832,			tion required in Part I, line 2,	S.	SES SIIDDORFED BY RECEIDING
(b) Number of recipients				art to provide the informa	<u> </u>	l jo
(a) Type of grant or assistance	VARIOUS SCHOLARSHIPS			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information SCHEDIII, E. T. PART T. LINE 2: THE MAJORITY OF THE GRANT FINDS ARE PAID	EDUCATIONAL INST	TANOTHER TOTAL BOTTOMENTS

Schedule I (Form 990) 2009

SCHEDULE O

(Form 990)

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.

OMB No 1545-0047 Open to Public

Department of the Treasury Inspection Internal Revenue Service AMERICA'S JUNIOR MISS SCHOLARSHIP Name of the organization Employer identification number 23-7438720 FOUNDATION FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: NECESSARY TO ADMINISTER THE AWARDING OF APPROPRIATE EDUCATIONAL SCHOLARSHIPS BY AMERICA'S JUNIOR MISS PROGRAMS. FORM 990, PART VI, SECTION A, LINE 2: HARWELL E. COALE, JR. AND JOHN J. CROWLEY, JR. ARE PARTNERS IN THE SAME LAW FIRM. FORM 990, PART VI, SECTION B, LINE 11: PREPARING CPA WILL PROVIDE FORM 990 TO AND REVIEW FORM 990 WITH THE PRESIDENT OF THE BOARD PRIOR TO FILING. FORM 990, PART VI, SECTION C, LINE 19: NO DOCUMENTS MADE AVAILABLE

28

 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. Related Organizations and Unrelated Partnerships ► Attach to Form 990. AMERICA'S JUNIOR Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

2009 Open to Public Inspection

OMB No 1545-0047

Employer identification number

MISS SCHOLARSHIP

23-7438720

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Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

FOUNDATION

Name of the organization

Part

	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II	Identification of Related Tax-Exempt Organizations (Complete I	ions (Complete if the organization ans	f the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	t IV, line 34 because	e it had one or more re	elated tax-exempt

organizations during the tax year)

(e)	(q)	(0)	(p)	(e)	()
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling
of related organization		foreign country)	section	status (if section 501(c)(3))	entity
AMERICA'S JUNIOR MISS PROGRAM, INC.				:	
751 GOVERNMENT ST	OPERATIONS OF AMERICA'S				
MOBILE AL 36652	JUNIOR MISS PROGRAM	ALABAMA	501(C)(4)		
	,				

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

Schedule R (Form 990) 2009

AMERICA'S JUNIOR MISS SCHOLARSHIP FOUNDATION

Schedule R (Form 990) 2009 FOUNDATION

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

Page 2

23-7438720

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					-			T		
										
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						-:-				
Percentage ownership	share or end-of-year assets		y share of total p, income	Iype or entiry (C corp, S corp, or trust)	Direct controlling entity	Legal domicile Ulf (state or foreign country)	Primary activity		≧ c	Name, address, and EIN of related organization
(H)	(6)			(e)		l .				(a)
ore related	had one or mo	because it	art IV, line 34	to Form 990, P	answered "Yes"	ne organization a	Trust (Complete If the	poration or x year)	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	Part IV Identification of Related Orgonizations treated as a co
										,
	•									
•••••					····					
Jule partner? (365) Yes No	20 of Schedule K-1 (Form 1065)	ate allocations?	assets	ысоше		(related, unrelated, excluded from tax under sections 512-514)	entity	(state or foreign country)		of related organization
(j) Bl General or		' (h) Disproportion-	(g) Share of	tal		(e) Predominant in	(d) Direct controlling	(c) Legal domicile	(b) Primary activity	(a) Name, address, and EIN

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			>	Yes No	اء
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	elated organizations listed in Parts II-IV?				- 1
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a	×	- 1
b Gift, grant, or capital contribution to other organization(s)			9	×	1
c Gift, grant, or capital contribution from other organization(s)			5	×	ı
d Loans or loan quarantees to or for other organization(s)			P	×	
			9	×	lΙ
			;		1
f Sale of assets to other organization(s)			=	< :	1
g Purchase of assets from other organization(s)			1g	×	- 1
h Exchange of assets			두	×	I
i Lease of facilities, equipment, or other assets to other organization(s)			=	×	1
i Lease of facilities equinoment or other assets from other organization(s)			=	×	1
k Derformance of services or membership or fundraising solicitations for other organization(s)			*	×	ļ
Performance of services or membership or fundraising solicitations by			=	×	l
m Sharing of facilities, equipment, mailing lists, or other assets			th.	X	1
			ţ	X	
					1
o Reimbursement paid to other organization for expenses			10	×	
p Reimbursement paid by other organization for expenses			1 ₀	×	- 1
					١
_			10 +	××	- 1
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	this line, including covered relationships and tra	ansaction thresholds			1 1
1		(Q)	<u>(</u> 2)		l
Name of other organization(s)		Transaction type (a-r)	Amount involved	olved	
(1)					1
(2)					1
					1
(4)					
(5)					- 1
(9)					I
31		Schec	Schedule R (Form 990) 2009	90) 2009	ø

23-7438720

Page 4

AMERICA'S JUNIOR MISS SCHOLARSHIP FOUNDATION

Schedule R (Form 990) 2009 FOUNDATION

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations? Yes No	(e) Share of end-of- year assets	Disproportionate allocations?	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?
						·	
							_

Schedule R (Form 990) 2009