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Return, of Organization Exempt From Income Tax

2010

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545 0047

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	<u>A</u>	For the 20	10 calen	ar year, or tax year beginnir					ng May			011	
	В	Check if applie	cable	C Name of organization JUNI	<u>O</u> R LEAGU	E OF SI	OUX CITY,	, IN	c.	D Employ	er Identificat	ion Number	
		Address	change	Doing Business As						42-0	95826	6	
•	Name change Number and street (or P O box if mail is not delivered to street addr)									E Telepho	ne number		
'	•	Initial ret	turn	316 WEST 7TH STRE	Т					(712	2) 255-	-0072	
1		Terminat	ted	City, town or country			State ZIP	code +	4	·			
		=		SIOUX CITY			IA 51	1103		G Gross re	eceints \$	172,980	1_
(n for affiliates		X No
i		T J Applicati	ion penunig	•		CTOUV C	TMV TAC:	1102	H(b) Are all			Yes	No
ł	_		1 -1 -1 -	RENDA HOLL-HORVE 316 W 7T					If 'No,	attach a list	(see instructi		
		Tax-exemp		X 501(c)(3) 501(c) () ◀ (inser	1 100) 1	1947(a)(1) or	527			_		
	<u>-</u>	Website							H(c) Group				
	K	Form of org			Association	Other >	L Year	of Forma	tion 1921	L ∤Mis	tate of legal	domicile IA	·
	Pa		ummai										
		1 Brief	fly descri	e the organization's mission	or most sign	iificant activ	ities <u>PROM</u>	OTE	COMMUN	<u>ITY IN</u>	NOTAEW	ENT	
	æ						-						
	Governance												
	Ē										- -		
	ò			If the organization is				of mo	rethan 25°	% of its ne	t assets		_
	প্ৰ			ng members of the governir							3		12
	Activities &			ependent voting members o							4		12
	ž	1		of individuals employed in ca	-	2010 (Part \	/, line 2a)				5		8
	Ç			of volunteers (estimate if ne		- (0) 1 1	^				6		73
	•	1		business revenue from Pai			2				7a 7b		0.
		D Net	unrelated	business taxable income fro	m Form 990-	1, line 34			<u>-</u>	•	_ / D		
		0 0		and annual (Doub VIII) lime 1h					P	rior Year 18,6	10	Current Y	
	ē	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g)										158	<u>,982.</u>
	Revenue		-	-	• •					149,3			000
	ě	1		ome (Part VIII, column (A),		•	11->			8,3		13	<u>,998.</u>
7		1		(Part VIII, column (A), lines						-6,2		170	
2012		 12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 								170,026. 9,044.			980.
4		1								9,0	44.	8	<u>,860.</u>
4		1		o or for members (Part IX, o		-							
-	ø	15 Sala	aries, oth	compensation, employee b	enefits (Part	IX, column	(A), lines 5-10)		91,9	96.	<u>85</u>	,160.
4 OCT	3e	16a Prof	essional	ındraising fees (Part IX, coli	عصلہ (A) nmn	11e)	-1) /E-D						
0	per	b Tota	l fundrai:	ng expenses (Part IX, colum	ın (D), line 25	$_{\scriptscriptstyle 5)}$ $RECt$	IVED	0.					
4	ŭ	17 Othe	or evnens	s (Part IX, column (A), lines	112.116 15	1.240			·	84,0	65	80	,114.
4 0		18 Tota	l avnone	s Add lines 13-17 (must equ	al Part Woo	า 241)	A 26012	ő		185,1			,134.
3				expenses Subtract line 18 f		DIGITIAN CONTRACT	116 20012	RS-080	 				-
5		19 Reve	enue less	expenses Subtract line to i	om line ii z			<u> </u>		-15,0			,154.
نہ	900	20 7-1	l acci	and V. June 16)		OGDI	EN, UT	ļ	Reginnin	g of Curren		End of Ye	
22 m	9 a a	1		Part X, line 16)	<u> </u>					<u>573,8</u>			,019.
22		i		(Part X, line 26)					 	4,8			<u>,596.</u>
en 4	24 24			und balances Subtract line	21 from line	20				569,0	45.	615	<u>,423.</u>
, C	Pa	artill ∫S	ignatu	Block		·							
B—	Unde	er penalties of	perjury, I d	lare that have examined this return	including accom	panying schedi	iles and statements	s, and to	the best of m	y knowledge	and belief, it	is true, correct	t, and
OCT		piete Deciarat	tion of prep	(other)than officer) is u sed off an	IIII III III III W	iich preparer na				8/	761	Innl	9
		l l		musa.	MA					01	<u> </u>	0010	
	Sig		Signati	of officer	<u> </u>	. /	\sim \sim		/ / Da				
	He	re	H1	acla tricson	- Juni	ion Lea	aque Pr	Dia	unt	20/2	-2013		
3			Туре о	rint name and title									
			Print/Type	eparer's name	repare/'s signatu	ire /	Da	te		Check	if PTIN	1	
SCANNED	Pa	id	ANN H	LL	IM	n4t	U 8	3-12	//	self-employe	ed		
J			Firm's nam		& Compar	ny, L.L	. P.			<u>`</u>			
		Only 1	Firm's addr			<u></u>				Firm's ElN	>		
			5 4441	Sioux City	200 320		A 51101			Phone no	(712)	252-430	29
	Mar	the IDS 4	liceries th		own above?				!	THORE RD		Yes [
	ivid	y uie irto a	いろしひろう (ご	return with the preparer sh) ^9V00b וואר	see instruc	10112)				IX.	, res	No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 03/25/11

Form 990 (2010)

Form	990 (2010) JUNIOR LEAGUE OF SIOUX CITY, INC.	42-0	958266	Page 2
Part	III , Statement of Program Service Accomplishments			_
	Check if Schedule O contains a response to any question in this Part III			
1	Briefly describe the organization's mission			
_	PROMOTE COMMUNITY INVOLVEMENT			
_				
_				
2	Did the organization undertake any significant program services during the year which were not liste	d on the prior		
ı	Form 990 or 990-EZ?	•		es X No
1	If 'Yes,' describe these new services on Schedule O			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services?		es X No
	If 'Yes,' describe these changes on Schedule O		لــا	
4	Describe the exempt purpose achievements for each of the organization's three largest program ser and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grant	vices by exper	nses Section	on 501(c)(3) s. the total
1	expenses, and revenue, if any, for each program service reported			-,
		.) (Revenue	\$	61,530.)
_	REWARD COMMUNITY GRANTS AND SCHOLARSHIPS FOR IMMEDIATE AND S	PECIFIC_		
_	NEEDS OF THE COMMUNITY THAT ARE COMPATIBLE WITH THE ORGANIZA	TIONS		
_	PURPOSE.			
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4b	(Code) (Expenses \$ including grants of \$	_) (Revenue	\$)
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4c	(Code) (Expenses \$ including grants of \$	_) (Revenue	\$)
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	Other program services (Describe in Schedule O)			
	(Expenses \$ including grants of \$) (Revenue Total program service expenses ► 118, 341.	e \$)
BAA	TEEA0102 10/06/10			orm 990 (2010

TEEA0102 10/06/10

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	1
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	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, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 Schedue 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		Х
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		Х
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		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			1
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	x	<u>. </u>
	b 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 16? If 'Yes,' complete Schedule D, Part VII	11 b	Х	
	c 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	11 c	х	
	d 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	11 d		x _
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	_	X
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	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 located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		<u>x</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or mσe hospitals must attach audited financial statements (see instructions)	20 b		

			Yes	No
21	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	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer Ines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		ļ
25 a	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	25a		<u>x</u> _
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		<u>x</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	l 	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		_x_
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	}		
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u> _
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		x
	An entity of which a current or former officer, director, trustee, α key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		_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		_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 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? 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)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its adivities 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	Х	
BAA		Form	1 990 ((2010)

<u> </u>	t V Statements Regarding Other IRS Filings and Tax Compliance	<u>, </u>		aye
rai	Check if Schedule O contains a response to any question in this Part V			_
	Check it Schedule O Contains a response to any question in this Part V		Yes	No
1:	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		165	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		,	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 8	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 8	*	. 1	
ŀ	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		`	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ŀ	of 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
ŀ	f 'Yes,' enter the name of the foreign country			ļ
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		,	4
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6 a		v
	of If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			X
	Organizations that may receive deductible contributions under section 170(c).	6 b		
′	Organizations that may receive deductible contributions under Section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		х
	of Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was equired to file Form 8282?	7 c		v
	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	7.0		X
		٠ ـ ا		\ \frac{1}{2}
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u>7f</u>		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year	8		,
9	Sponsoring organizations maintaining donor advised funds.		ì.,	
a	Did the organization make any taxable distributions under section 4966?	9a		
t	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	30	^1	
a	Initiation fees and capital contributions included on Pat VIII, line 12	1	`	જુ, ડિપ્હ
t	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		/ ***	2,
	Section 501(c)(12) organizations. Enter	٠. ٦	<u>}</u> , ^	·' >
	Gross income from members or shareholders	, ,	, 3	
ł	Gross income from other sources (Do not net amounts due or paid to other sources	`	1.15	\?`` ````
_	against amounts due or received from them)	,	λ, <u>,</u>	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
t	of Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			,
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health pans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
Ł	Enter the amount of reserves the organization is required to maintain by the states in	, ,		
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
t	of 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Parl	tVI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b be			or
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chain Schedule O. See instructions.	nges i	n	
	Check if Schedule O contains a response to any question in this Part VI			X
Sect	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a 1a	2		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12	2		•
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents	4		X
	since the prior Form 990 was filed?			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		_X_
6	Does the organization have members or stockholders?	_6	Χ	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	х	
	Each committee with authority to act on behalf of the governing body?	8b	X	
	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- 00		
	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		,—··	
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations ae consistent with those of the organization?	10b		
11 a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11 a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	İ		
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers of key employees of the organization	15b		<u>X</u>
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х
	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the	166		
	organization's exempt status with respect to such arrangements?	16b	<u> </u>	
	List the states with which a copy of this Form 990 is required to be filed >			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av			blic
	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, conflict of interest polici statements available to the public	y, and	financ	ıal
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	nization		
>	BRENDA NOLL 316 WEST 7TH STREET, SIOUX CITY, IA 51103 (712)_2	259-	<u> 1320</u>

Form 990 (2010)	JUNIOR	LEAGUE	OF	SIOUX	CITY.	INC.

BAA

42-0958266

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Form 990 (2010)

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a 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.
- 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, if any
 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

Check this box if neither the organization	nor any r	elated	org	anız	atio	n com	npen	sated any current office	er, director, or trustee	
(A)	(B)				-			(D)	(E)	(F)
Name and title	Average	Posi	tion (chec	all t	hat app	ly)	Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week (describe hours for related organiza- tions in Schedule O)	adividi el truscee or director	mshluboael trustee	Offi. 2	Key employee	High est coin-e-isated	Fusnei	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) MARY GREEN-WARNSTADT							-			
PRESIDENT	5.00			Х	Ι,			0.	0.	0.
(2) ANGIE SCHNEIDERMAN										
VICE-PRESIDENT	1.00			х				o./	0.	0.
(3) BRENDA NOLL-NORVELL						-				
VICE-PRESIDENT OF OPERATIONS	1.00			Х	į			0.	0.	0.
(4) GWYNETH GRAY		_								
SECRETARY	1.00			Х				0.	0.	0.
(5) ANGELA ERICSON										
VICE-PRESIDENT OF COMMUNITY	1.00			X				0.	0.	0.
(6) SUSAN FEY										
VICE-PRESIDENT OF MARKETING	1.00			X				0.	0.	0.
(7) MICHELLE BOSTINELOS	1			· '			\ 			
VICE PRESIDENT OF MEMBERSHIP	1.00			X				0.	0.	0.
(8) HELENA POTASH										
SUSTAINING DIRECTOR	1.00			X				0.	0.	0.
(9) LORI HERIGSTAD										
DISCOVERY SHOP	1.00			X				0.	0.]	0.
(10) KRISTIN BESWICK										
DIRECTOR	1.00	X						0.	0.	0.
(11) KRISTA WASSENAAR						'				
DIRECTOR	1.00	X						0.	0.	0.
(12) KARRIE HRUSKA										
DIRECTOR	1.00	X					ļ	0.	0.	0.
(13)							ļ			
<u>(14)</u>										
(15)										
(16)							_			
<u>(17)</u>										
	<u> </u>		!				<u> </u>	I		

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Part VII Section A. Officers, Directors, Trus	tees, k	(ey	Em	ıplo	ye	es,	and	d Highest Con	pensated Emp	loyees	(cont)
(A)	(B)			(0	-			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organi zations			Officer	. —	_		Reportable compensation from the organization (W 2/1099-MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	amount compe fron	nated of other nsation i the
		dual trustee ector	tional tr	7	Key employee	st comp	74			and i	ization elated zations
	Sch O)	stee	trustee		"	Highest compensated					
		ļ.,				<u> </u>					
										_	
_(19)											
(20)											
(21)											
_(22)											
_(24)					-						
(25)									<u></u>		
(26)											
(27)											
(28)					-						
(29)					-						
1 b Sub-total	<u> </u>	<u> </u>		<u> </u>	1			0.	0.		0.
c Total from continuation sheets to Part VII, Section A	4						•	0.	0.		
d Total (add lines 1b and 1c)	•						•	0.	0.		0.
Total number of individuals (including but not limited from the organization	to thos	e list	ed a	abov	/e) v	vho	reœ			e comper	
non the againzation											res No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste dividual	e, k	еу е	mpl	oye	e, or	hıg	hest compensated	l employee	3	х
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the	ortable	com	pen:	satio	on a	nd c	ther	compensation fro	om		
such individualDid any person listed on line 1a receive or acque co						•			duudual	4	<u> </u>
for services rendered to the organization? If 'Yes,' co	omplete	Sch	edul	le J	for s	such	per	son		5	<u> </u>
Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent c	ontr	acto	ors t	hat	received more tha	n \$100,000 of		
(A) Name and business addres	s							(B) Description () of services	(C) Compens	sation
Table on Section Dealers		_						2 230770171			
			_								
2 Total number of independent contractors (including t	out not I	ımıte	d to	the	se I	ısted	d ab	ove) who received	more than		
\$100,000 in compensation from the organization								·			

Pa	rt viii. Statement of Revenue				
•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in Ins 1a-1f h Total. Add lines 1a-1f	158,982.			
PROGRAM SERVICE REVENUE	Business Code 2a b c d e f All other program ærvice revenue g Total. Add lines 2a-2f				
;	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6a Gross Rents b Less rental expenses c Rental income or (loss)	9,334.	0.	0.	9,334.
	d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	4,664.	0.	0.	4,664.
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less. direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code 11 a b c d All other revenue				
_	e Total. Add lines 11a-11d 12 Total revenue. See instructions	172,980.	0.	0.	13,998.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 7b, 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	8,860.	8,860.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members 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	76,034.	53,761.	22,273.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	4,021.	2,808.	1,213.	0.
10	Payroll taxes	5,105.	1,589.	3,516.	0.
11	Fees for services (non-employees)				
a	ı Management				
t	Legal				
c	: Accounting	6,156.	3,985.	2,171.	0.
C	I Lobbying				
6	Professional fundraising services See Part IV, line 17				
	Investment management fees	3,103.	0.	3,103.	0.
	Other	<u> </u>			
12	Advertising and promotion	6,170.	693.	5,477.	0.
13	Office expenses	4,018.	204.	3,814.	0.
14	Information technology				
15	Royalties				
16	Occupancy	10,519.	6,982.	3,537.	0.
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings Interest	15,320.	15,320.	0.	0.
21	Payments to affiliates	9,791.	9,791.	0.	0.
22	Depreciation, depletion, and amortization	9,511.	6,658.	2,853.	0.
23	Insurance	2,018.	1,413.	605.	0.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				CAN TO THE TOTAL OF THE TOTAL O
a	TELEPHONE	858.	427.	431.	0.
	REPAIR & MAINTENANCE	6,837.	5,203.	1,634.	0.
	MEMBERSHIP COUNCIL	647.	647.	0.	0.
	ARRANGEMENTS	2,189.	0.	2,189.	0.
•	PUBLICATIONS	454.	0.	454.	0.
	All other expenses	2,523.	0.	2,523.	0.
_25	Total functional expenses. Add lines 1 through 24f	174,134.	118,341.	55,793.	0.
26 BAA	Joint costs. Check here ►				Form 990 (2010)

•			(A) Beginning of year		(B) End of year
T	1	Cash – non-interest-bearing		1	
l	2	Savings and temporary cash investments	39,591.	2	40,786
1	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	^
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
A	7	Notes and loans receivable, net		7	
A S S S S S S S S S S S S S S S S S S S	8	Inventories for sale or use	25,000.	8	25,000
T S	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or other bass Complete Part VI of Schedule D 10a 297, 434.			
- {	b	Less accumulated depreciation 10b 172,605.	134,340.	10 c	124,829
		Investments – publicly traded securities		11	
ļ		Investments – other securities See Part IV, line 11	98,040.	12	98,748
1	13	Investments – program-related See Part IV, line 11	276,891.	13	331,656
ļ	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	573,862.	16	621,019
\neg	17	Accounts payable and accrued expenses	4,817.	17	5,596
	18	Grants payable		18	
1	19	Deferred revenue		19	
ㅏ	20	Tax-exempt bond liabilities		20	
AB	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
 	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
E S	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated thrd parties		24	
- {	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	4,817.	26	5,596
ZE		Organizations that follow SFAS 117, check here > X and complete lines			
7		27 through 29 and lines 33 and 34.			
ASSETS	27	Unrestricted net assets	552,281.	27_	600,966
Ĕ	28	Temporarily restricted net assets	16,764.	28_	14,457
- 1	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ► and complete		,	
F		lines 30 through 34.		, ,	The state of the s
F 320	30	Capital stock or trust principal, or current funds		30_	
В	31	Paid-in or capital surplus, or land, building, or equipment fund		31_	
BALA	32	Retained earnings, endowment, accumulated income, or other funds		32	
ANCES	33	Total net assets or fund balances	569,045.	33	615,423
E	34	Total liabilities and net assets/fund balances	573,862.	34	621,019

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orm 990 (2010) _ JUNIOR LEAGUE OF_SIOUX CITY, INC.	42-0958266		_ Pa	ege 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XI				X
•				
1 Total revenue (must equal Part VIII, column (A), line 12)	1	1	72,9	980.
2 Total expenses (must equal Part IX, column (A), line 25)	2	1	74,1	34.
3 Revenue less expenses Subtract line 2 from line 1	3		<u>-1,1</u>	54.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5	69,0)45.
5 Other changes in net assets or fund balances (explain in Schedule O)	5		47,5	32.
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	6:	15,4	123.
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part XII				
			Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			i	i
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
b Were the organization's financial statements audited by an independent accountant?		2b	Х	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2c	х	
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 is separate basis, consolidated basis, or both	ssued on a			
X Separate basis Consolidated basis Both consolidated and separate basis		1		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ne Single	3a		_ X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the ror audits, explain why in Schedule O and describe any steps taken to undergo such audits	equied audit	3 b		
AA		Form	990 ((2010)

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.

OMB No 1545 0047 2010

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

Parl								142-0			_		
	<u>: I</u>	Reason for Publ	ic Charity Status	(All organizations	must com	plete	this part.)	See i	nstruct	ions	_		
he c	orga	nization is not a privat	e foundation because	eit is (For lines 1 throu	gh 11, check	only or	ne box)						
1	\Box	A church, convention	of churches or assoc	iation of churches descr	ibed in sect	on 170	(b)(1)(A)(i).						
2	П	A school described in	section 170(b)(1)(A)((ii). (Attach Schedule E)								
3	П	A hospital or a coope	rative hospital service	e organization described	in section	170(b)(1	χΑχiii).						
4	П	A medical research o	rganization operated	in conjunction with a ho	spital descri	bed in s	section 1700	ьх1хах	(iii) Ente	er the hospital's			
		name, city, and state	·	•			•		,	- · · ·			
5			ated for the benefit of	a college or university of	owned or op	erated	by a governi	mental u	nit desc	nbed in section	-		
6		A federal, state, or lo	cal government or go	vernmental unit describe	ed in sectio	170(b	χ1)(A)(v).						
7		An organization that in section 170(b)(1)(A	normally receives a si A)(vi). (Complete Pari	ubstantial part of its sup t II)	port from a	governi	mental unit o	or from t	he gene	ral public described			
8	닏	· ·		0(b)(1)(A)(vi). (Complete	-								
9	X	from activities related investment income a	d to its exempt functio	n more than 33-1/3% of a lins — subject to certain of staxable income (less so mplete Part III)	exceptions,	and (2)	no more that	an 33-1/3	3% of its	support from gross			
10		An organization organ	nized and operated ex	xclusively to test for pub	lic safety S	ee sect	ion 509(a)(4).					
11		more publicly support	ted organizations des	xclusively for the benefit cribed in section 509(a) on and complete lines 1	 or section 	n 509(a	functions of,)(2) See se	or carry ction 50	out the 9(a)(3).	purposes of one or Check the box that			
		a Type I	b Type II	c Type III	~		arated		d \square	Type III - Other			
е	e 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)												
f			œived a wntten deteri	mination from the IRS t	hat is a Type	і, Тур	e I or Type	II suppo	rting org	ganization,]		
g)6 has the omanization	on accepted any gift or	contribution	from a	ny of the fol	owina n	ersons?				
9		omoc nagast 17, 200	o, rias tilo organizatio	on accepted any give of	w/////////////////////////////////////		19 01 110 101	om g p	C130113	Yes No	-		
		(i) A person who d	firectly or indirectly co	ontrols, either alone or t	aether with	nerson	s described	ın (ıı) ar	nd (m)	Tes No	-		
		below, the gove	rning body of the sup	ported organization?	(i) A person who directly or indirectly controls, either alone or bgether with persons described in (ii) and (iii) below, the governing body of the supported organization?								
		(ii) A family member											
										11 g (i) 11 g (ii)	<u> </u>		
	(iii) A 35% controlled entity of a person described in (i) or (ii) above?									11 g (ii)	- -		
h		(iii) A 35% controlle	ed entity of a person d	ped in (i) above?					io (iii)	11 g (ii)	- -		
h		(iii) A 35% controlle	ed entity of a person d	ped in (i) above? described in (i) or (ii) abo		in the	Did you notify organization in column (1) of our support?	organiz colur organize	s the ation in nn (i) ed in the S ?	11 g (ii)	- - -		
h		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(s) (iv) Is the organization column (i) liste your governing document	in the	organization in column (i) of	organiz colur organize	s the ation in nn (i) ed in the	11 g (ii) 11 g (iii)			
h		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
h A)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
	-	(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A) B)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A) B)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A) B)	-	(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A) B) C)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A) B)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			
A) B) C)		(iii) A 35% controlled Provide the following (i) Name of supported	ed entity of a person of information about the	described in (i) or (ii) above supported organization (described on lines 19 above or iRC section	(S) (IV) Is the organization column (I) liste your govern document	in the	organization in column (i) of our support?	organiz colur organize U	s the ation in in (i) ad in the S ?	11 g (ii) 11 g (iii)			

Part It | 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to it or experded 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 tdal 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)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support		T				
	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
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	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ties, etc (see inst	ructions)			12	
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ 🗍
	tion C. Computation of Pu				_ 		
	Public support percentage for 20	• •	• • • • • • • • • • • • • • • • • • • •	e 11, column (f))		14	<u>%</u>
15	Public support percentage from 2	2W9 Schedule A,	Part II, line 14			15	%_
16 a	a 33-1/3% support test – 2010. If t and stop here. The organization				I the line 14 is 33-	1/3% or more, che	ck this box
ł	33-1/3% support test – 2009. If t and stop here. The organization	he organization d qualifies as a pub	id not check a box licly supported or	k on line 13 or 16a ganization	i, and line 15 is 33	3-1/3% or more, ch	eck this box ►
17	a 10%-facts-and-circumstances te or more, and if the organization in the organization meets the facts	neets the 'facts-a	nd-circumstances	test, check this b	ox and stop here.	Explain in Part IV	
	o 10%-facts-and-circumstances te or more, and if the organization r organization meets the 'facts-and	meets the 'facts-a i-circumstances'	nd-circumstances test The organiza	' test, check this b ation qualifies as a	ox and stop here. publicly supporte	Explain in Part IV d organization	how the
	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,			
BAA					Sc	nedule 🗛 (Form 99	90 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, pleas complete Part II.)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')	34,154.	26,780.	20,298.			81,232.
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	167,001.	173,783.	171,906.			512,690.
3	Gross receipts from advities that are not an unrelated trade or business under section 513	107,001.	1/3,/03.	171,500.			312,030.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or						
	facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	201,155.	200,563.	192,204.			593,922.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	: Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						593,922.
Sec	tion B. Total Support	r					
Calen	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6	201,155.	200,563.	192,204.			593, 922.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13,508.	13,264.	9,686.			36,458.
_	income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	13,508.	13,264.	9,686.			36,458.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)		928.				928.
13	Total support. (Add Ins 9, 10c, 11, and 12)						631,308.
	First five years. If the Form 990	s for the organizati	on's first, second	, third, fourth, or i	fifth tax year as a	section 501(c)(
	organization, check this box and tion C. Computation of Pul	stop here					•
	Public support percentage for 20			13 column (ft)		1!	5 94.08 %
16	Public support percentage from 2	•		13, coloilli (1))		10	
	tion D. Computation of Inv						2 1 24.14 B
17	Investment income percentage for				n (f))	17	7 5.77 %
18	Investment income percentage for			=	'' ('))	18	
	33-1/3% support tests — 2010. If is not more than 33-1/3%, check	the organization d	id not check the b	ox on line 14, and	d line 15 is more a publicly suppor	than 33-1/3%, a	and line 17
ŀ	33-1/3% support tests - 2009. If line 18 is not more than 33-1/3%	the organization d	id not check a box	on line 14 or line	e 19a, and line 16	s more than 3	33-1/3%, and
20	Private foundation. If the organiz	ration did not check	ca box on line 14	, 19a, or 19b, che	eck this box and s	ee instructions	<u>▶</u>

Schedule A	(Form 99	0 or 990	EZ) 2010	JUNIOR	LEAGU	E OF	SIOUX	CITY,	INC.	42-095	58266	Page 4
Part IV	Supple Part II,	mental line 17 istructio	Informa a or 17b	tion: Com ; and Part	plete this III, line	s part 12. Al	to prov so com	ide the plete th	explana is part f	tions required by or any additional	Part II, line information	10;
Other 1	Income	Part_	III,_L	ine 12	- -				·			
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SIOUXLAND FLOODING 2011

A community still in adjustment 7 months after Missouri River flood



DECEMBER 17, 2011 10 30 PM

It did not start with great fanfare. There was no rush of water, no tidal wave rolling from the north.

Rather, the Missouri River rose, first a little, then by feet and feet.

It would take months to fix the aftermath -the waterlogged sandbags, the pounds of
mildew-coated drywall, the psychological
scars of a summer lost to worries about
rescuing family photo albums and whether
the neighborhood would survive.

AUG 29 2012

These were the concerns of people profiled in our pages during the Missouri River flooding this spring and summer. Seven months later, we decided to revisit some of the victims to see how they've survived -- and what's next in the long path to bringing life back to normal.

RECEIVED

These are their stories.

LOSS AND RECOVERY

When looking for a home, Rita and Roy Dunlap had one main requirement: nothing next to water. If the house so much as had a sump pump, they weren't interested.

They've had enough water.

On June 10, they left their home near the Missouri River in Decatur, Neb., as floodwaters approached. When they could finally return in September, they found a house in which water had been up to 6 feet deep.

"You just plain wanted to sit down and cry. It was mold up to the ceilings, mud everywhere," Rita Dunlap said.

The house was a total loss and, since they didn't own the land on which their house stood, they chose to move. They used money they received from the Federal Emergency



In the meantime, they found shelter in a friend's house near Oakland, Neb. Rita said she, Roy and their disabled daughter who lives with them will move yet this fall or in the spring.

"The way it worked out, we did wind up with a home, but we would have kind of rather stayed here," she said.

-- Nick Hytrek

A VIEW ALTERED

Although the doors to Murdo's Aten Resort never closed as flood waters threatened the property two miles east of Gavins Point Dam, owner Don Edwards said that last summer was hardly business as normal.

"As soon as the flooding began, we'd be getting 20 to 30 phone calls asking if we're OK," he recalled. "Guess there was a rumor going around that we floated down the river."

When uncertainties about the Missouri increased, Edwards said he lost about 20 party bookings for wedding receptions at the rural Crofton, Neb., restaurant.

Edwards was able to recoup some of those losses with increased business generated by visitors wanting to see Gavins Point Dam's historically high releases of water.

With a gazebo, used for small parties, closed due to the threat of flooding and 20 semitrailer loads of concrete chunks dumped along the river banks to keep the Missouri from eating away at the shore, Edwards tried to run the business as he's done for the past 22 years.

"Our building was safe, our deck was safe and it still gave folks one heck of a view as the river goes by," he said. "Only now the river was closer than ever before."

Even though the lower deck needed to be cleaned and the river bank is now 4 feet shorter, Murdo's Aten Resort is once again the tranquil place Edwards always wanted it to be.

"There's a large cottonwood tree that shades our deck, which we were afraid would be swept up in the river's current," he said. "Well, the cottonwood survived and is still standing, and so are we."

-- Earl Horlyk

A MISSION WITH NO END

Even though the floodwaters are gone, the work continues for emergency responders. Their mission now is making sure it never happens again.

"We're working on the recovery process now and doing the damage assessment," said Woodbury County Disaster and Emergency Services Director Gary Brown.

Brown and dozens of other Sioux City and Woodbury County officials manned the Emergency Operations Center on the campus of Western Iowa Tech Community College from Memorial Day through August. Later this month, officials will meet with their counterparts in all six Iowa counties affected by the flooding.

"We will review what went well, what didn't and then make recommendations" to various federal and state agencies, he said. as well as making recommendations to local governments about including money in upcoming budgets for future flood-control measures.

Unlike last year, Brown said, "We're going to be watching the river much closer this winter than ever before. We will get bi-weekly reports from the (Army) Corps of Engineers."

-- Lynn Zerschling

BACK FROM THE BRINK

For weeks this summer, Bev's on the River straddled a fine line between survival and a watery grave in the Missouri River.

Jesse Miller, chief operating officer of Bev's parent company, Midwest Franchise Corp., said saving the Sioux City eatery and riverfront sister companies Jolly Rogers Bar & Grill, Hilton Garden Inn and MIr Tym Landing from the floodwaters was a race against the clock.

"We were slowly losing access," Miller recalled. "The roads were getting covered, so we knew our days were numbered."

The water eventually closed in, flowing across the parking lot and cutting off access to the businesses, which employed 150 people.

"Walking through the building was very eerie, and it was like a war zone or something," Miller said. "There was helicopters flying over and walls of dirt surrounding you."

Despite the dark days this summer, Bev's and the Hilton Garden Inn emerged relatively unscathed and reopened in September. All but the seasonal employees at Jolly Rogers and the marina have been hired back, Miller said.

Even so, Miller said the flood left a financial mark on the company.

Midwest Franchise spent about \$1 million in materials and labor to protect Bev's and the surrounding properties, Miller estimates, losing more than \$1 million in revenue from the restaurant being closed all summer.



"There was a big financial impact that we will not make up in a quick time period, but over time we hope to make up for it," Miller said.

-- Molly Montag

CONSTANT REMINDERS

Steve Luft rarely got a reprieve from summer 2011 Missouri River flooding worries.

Not only did he sandbag his 315 W. Third St. home in early June, when Luft was at work at Burke Engineering and driving around the metro area, he got almost constant reminders of the weeks of flooding.

"Everywhere you go in town, you see sandbags, you see people trying, you know. They are in the same situation you are, so it is constantly on your mind," he said.

"It was months. Most people will take a vacation in the summertime. You didn't want to go nowhere. I mean, it was like, 'Geez, if I leave, what am I gonna come home to?" Luft said.

Water rose well up on the sandbags near his walkout basement facing the river. Luft had frequent sleepless nights worrying about whether the sandbags would hold up, and ultimately his home came away unscathed.

"There was no ease -- not only until the river started going down, but it took it a while to go back out of my yard, down under the banks, before I ever really even felt comfortable." he said.

Luft spent \$800 on pumps, sand bags and then grass seed to replant once the river subsided. He's hopeful his sand/dirt backyard will bloom green in 2012.

"I actually survived pretty good," Luft said.

-- Bret Hayworth

WATCHING THE LEVEL

All summer, Linda and Joe Mildorfer lived a simple lifestyle.

Only the bare essentials -- bed, appliances and a few changes of clothes -- were left in their West Third Street home after they packed up the rest of their belongings to protect them from the approaching Missouri River.

A dike built down the middle of the street ended just before it reached their home.

Fortunately, the water never reached their home either, stopping at the dike about half a block away. That didn't ease the stress they and their neighbors felt all summer.

"It was an unhappy summer for a lot of us," Linda Mildorfer said.

The Mildorfers spent \$1,200 to rent a semitrailer in which to store their belongings. They didn't bother filing for flood assistance, Linda said, because their house never had water in it.

They moved their belongings back in and removed the sandbags from around their house in late August. Damage done by the river is visible a short distance away.

They'll be buying flood insurance in January.

And come spring, Linda said, they'll be paying much closer attention to the river.

"We'll be watching, listening and waiting."

-- Nick Hytrek

THE VIEW FROM ABOVE

While no good came out of this summer's Missouri River flooding for people living along its banks, the flood's long-term effects on the river itself will likely be both beneficial and harmful.

Tim Cowman, director of the Missouri River Institute at the University of South Dakota at Vermillion, said the flood was so powerful that it scoured a new channel for the free-flowing river between South Dakota and Nebraska.

"Flooding changes the energy of the river," Cowman said. It produced new backwaters and wetlands that nurture life on the low end of the food chain. The flooding scoured the channel deeper but also built up high new natural sandbars -- ideal nesting habitat for endangered bird species. The shallow water alongside the sandbars and new riverbank creates a good nesting habitat for fish. But the channels could also speed bank erosion.

"A blessing with a lot of uncertainty," is what Mark Dixon, USD assistant professor of biology, calls the 2011 flood. He predicts its impact on trees and plants will be mixed, too. Some native cottonwoods and many non-native tree species will die slowly, suffocated by floodwaters. But the wetlands created by the receding flood are ideal for germinating new cottonwoods and other native flora.

At the same time, Dixon expects the noxious invasive weed purple loosestrife, nearly eradicated, to colonize in new areas that will have to be found and the weed fought anew.

Time will tell how the river's own flood story turns out.

-- Michele Linck

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

·Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12 ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection Employer identification number

the organization answered 'Yes'	or Advised Funds or C to Form 990, Part IV,	Other Similar Fund line 6.	s or Account	s. Complet	e ıf
	(a) Donor advi	sed funds	(b) Funds	and other acc	ounts
Total number at end of year					
Aggregate value at end of year					
			r advised	Yes	☐ No
used only for charitable purposes and not for	the benefit of the donor or o	riting that grant f unds o donor advisor, or for an	an be y other	∏Yes	□No
		answered 'Yes' to	o Form 990 F		
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	•		an historically im	nortant land a	area
	our data to the data attenty	 	-	•	
=					
Complete lines 2a through 2d f the organizati	on held a qualified conserv	ation contribution in the	form of a conse	rvation easem	ent on the
			Held a	t the End of t	he Tax Year
Total number of conservation easements			2 a		
Total acreage restricted by conservation ease	ments		2 b		
Number of conservation easements on a certi	fied historic structure includ	led in (a)	2c		
	ın (c) acquired after 8/17/06	, and not on a historic	2 d		
	transferæd, released, extin	guished, or terminated	by the organizati	on during the	
·	onservation easement is loc	ated •			
Does the organization have a written policy re and enforcement of the conservation easement	garding the periodic monitonts it holds?	ring, inspection, handli	ng of violations,	Yes	∏ No
Staff and volunteer hours devoted to monitorii	ng, inspecting, and enforcin	g conservation easeme	nts during the ye	ear	
Amount of expenses incurred in monitoring, in \$	nspecting, and enforcing co	nservation easements o	luring the year		
Does each conservation easement reported o 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the	requirements of section	n	☐ Yes	☐ No
In Part XIV, describe how the organization repinclude, if applicable, the text of the footnote conservation easements.	oorts conservation easemer to the organization's financi	its in its revenue and exal statements that desc	opense statemen ribes the organiz	t, and balance ation's accour	sheet, and nting for
Organizations Maintaining Collection Complete if the organization and	ections of Art, Histori swered 'Yes' to Form S	cal Treasures, or (Other Similar	Assets.	
art, historical treasures, or other similar asset	s held for public exhibition.	education, or research	statement and but in furtherance of	palance sheet public service	works of e, provide,
of the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items	r SFAS 116 (ASC 958), to r eld for public exhibition, edu	eport in its revenue sta cation, or research in fi	tement and balar urtherance of pub	nce sheet worl blic service, pr	ks of art, ovide the
(i) Revenues included in Form 990, Part VIII,	, line 1			> \$_	
(ii) Assets included in Form 990, Part X				► \$	
If the organization received or held works of	irt, historical treasures, or c 116 (ASC 958) relating to t	ther similar assets for f nese items	ınancıal gaın, pro	ovide the follo	wing
Revenues included in Form 990, Part VIII, line	e 1			► \$	
Assets included in Form 990, Part X				► \$	
	the Organizations Maintaining Donce the organization answered 'Yes' Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and do funds are the organization's property, subject Did the organization inform all grantees, donoused only for charitable purposes and not for purpose conferring impermissible private ben Purpose(s) of conservation easements. Comp Preservation of land for public use (e.g., in protection of natural habitat preservation of open space Complete lines 2a through 2d if the organization at last day of the tax year a Total number of conservation easements on a certical acreage restricted by conservation ease in Number of conservation easements modified, tax year is a total acreage restricted by conservation easements on a certical acreage restricted by conservation easements on a certical number of conservation easements modified, tax year is a total acreage restricted by conservation easements on a certical number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements modified, tax year is a total number of conservation easements. Does the organization have a written policy read enforcement of the conservation easement reported on 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reinclude, if applicable, the text of the footnote to its final of the organization elected, as permitted under and interval	the organization answered 'Yes' to Form 990, Part IV, Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that it funds are the organization's property, subject to the organization's exclus Did the organization inform all grantees, donors, and donor advisors in witing that it funds are the organization's property, subject to the organization's exclus Did the organization inform all grantees, donors, and donor advisors in witing that it funds are the organization are the organization for the benefit? Propose conferring impermissible private benefit? Preservation Easements. Complete if the organization of purpose conferring impermissible private benefit? Preservation of land for public use (e.g., recreation or education) Preservation of open space Complete lines 2a through 2d f the organization held a qualified conserval last day of the tax year Total number of conservation easements Number of conservation easements included in (c) acquired after 8/17/06 structure listed in the National Register Number of conservation easements modified, transferred, released, extin tax year Number of conservation easements modified, transferred, released, extin tax year Number of conservation easements modified, transferred, released, extin tax year Number of the conservation easements in holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing to the organization have a written policy regarding the periodic monitor and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements in the properties of the formation of the organization of the organization of the organization and enforcement of the conservation easement include, if applicable, the text of the forhonte to the organization's financial fraesures, or other similar assets held for public exhib	the organizations Maintaining Donor Advised Funds or Other Similar Fund the organization answered "Yes" to Form 990, Part IV, Inne 6. Total number at end of year Aggregate contributions to (during yea) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds or used only for charitable purposes and not for the benefit of the donor or donor advisor, or for an purpose conterring impermissible private benefit? Purposes(s) of conservation easements. Complete if the organization answered "Yes" to Purposes(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Prosecution of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the last day of the tax year Total acreage restricted by conservation easements in located Total acreage restricted by conservation easements in located Total acreage restricted by conservation easements in located Total acreage restricted by conservation ease	the organizations Maintaining Donor Advised Funds or Other Similar Funds or Account the organization answered "Yes" to Form 990, Part IV, line 6. Total number at end of year Aggregate contributions to (during yea) Aggregate contributions to (during yea) Aggregate contributions to (during yea) Aggregate contributions from (during yea) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization from all grantees, donors, and donor advisors in writing that grant funds can be used only for charable purposes and not for the benefit of the donor or donor advisor or on any other purpose conferring impermissible private benefit? If I Conservation Easements. Complete if the organization answered "Yes" to Form 990, form 1990, for	the Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete the organization answered 'Yes' to Form 990, Part IV, line S. Total number at end of year Aggregate contributions to (during yea) Aggregate contributions to (during yea) Aggregate value at end of year Did the organization's property, subject to the organization's exclusive legal control?

Schedule D (Form 990) 2010 JUNIO				42-095		Page 2
Part III Organizations Mainta	ining Collection	s of Art, Histo	rical Treasures, or	Other Similar Ass	ets (contin	iued)
3 Using the organization's acquisition items (check all that apply)	on, accession, and	other records, chec	k any of the following th	nat are a significant use	of its collecti	on
a Public exhibition		d 🔲 Loan d	or exchange programs			
b Scholarly research		e 🗌 Other	·	· · · · · · · · · · · · · · · · · · ·		
c Preservation for future genera	ations					
4 Provide a description of the organ Part XIV			-		ın	
5 During the year, did the αganizal assets to be sold to raise funds ra					Yes	No
Part IV Escrow and Custodia	I Arrangements	Complete if o	irganization answei	red 'Yes' to Form 9	990, Part IV	/, line
9, or reported an amo	unt on Form 99	J, Part X, line A	21. 		 · · · · · · · · · · · · · · · · · ·	
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, σ o	ther intermediary fo	or contributions or other	assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and con	nplete the following	g able			
					Amount	
c Beginning balance				1c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1f		
2a Did the organization include an a	mount on Form 990	, Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV					
Part V Endowment Funds. Co	omplete if the oi	ganization ans	wered 'Yes' to Forr	m 990, Part IV, line	e 10	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ars back
1 a Beginning of year balance						
b Contributions					_l	
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for faolities and programs						
f Administrative expenses				*		
g End of year balance						,
2 Provide the estimated percentage	of the year end ba	lance held as				
a Board designated or quasi endow	-	8				
b Permanent endowment ►	8					
c Term endowment ▶	 •					
3a Are there endowment funds not in	n the possession of	the organization th	nat are held and adminis	stered for the		
organization by					Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related of	-				3b	
4 Describe in Part XIV the intended						
Part VI Land, Buildings, and					····	
Description of investment		ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book [,]	
1 a Land			25,000.			5,000.
b Buildings			212,588.	114,428.	98	8,160.
c Leasehold improvements						
d Equipment			59,846.	58,177.		1,669.
e Other						
Total. Add lines 1a through 1e (Column	n (d) must equal Fo	m 990, Part X, col	umn (B), line 10(c))	•	124	4,829.
ВАА				Scher	dule D (Form 9	

Part VII Investments—Other Securities. See Fe	orm 990, Part X, lı	ne 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
(1) Financial derivatives			<u> </u>
(2) Closely-held equity interests			
(3) Other			
(A) MONEY MARKET FUNDS	98,748.	FMV	
(B)			
<u>(c)</u>			
(D)	 .		
<u>(E)</u>			
(F)			
<u>(G)</u>			
(H)			
(1)	00.740		- 3- 1
Total (Column (b) must equal Form 990 Part X, column (B) line 12) Part, VIII Investments—Program Related. (See	98,748.		· · · · · · · · · · · · · · · · · · ·
	(b) Book value		
(a) Description of investment type		(c) Method of valuation Cost or end-of-year market	
(1) SIOUXLAND COMMUNITY FOUNDATION	331,656.	FMV	
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> (7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)	,		
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13)	331,656.		, ,
Part IX Other Assets. (See Form 990, Part X,			
(a) De	scription		(b) Book value
(1)			
(2)			
(3)			
(4)	· · · · · · · · · · · · · · · · · · ·		
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column(B)		<u> </u>	
Part X Other Liabilities. (See Form 990, Part			
(a) Description of liability	(b) Amount		· · · · · · · · · · · · · · · · · · ·
(1) Federal income taxes			,
(2)	· · · · · · · · · · · · · · · · ·		
(3)			• • • • • • • • • • • • • • • • • • • •
(4) (5)			•
(6)			` ,
(7)		<u> </u>	,
(8)			. 4
(9)			***
(10)			,
(11)			
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	>		
2 FIN 48 (ASC 740) Footpote In Part XIV provide the text	of the feetnate to the er	accuration's figurated statements that were	^

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2010 JUNIOR LEAGUE OF SIOUX CITY, INC.	42-0958266	Page 4
Part XI Reconciliation of Change in Net-Assets from Form 990 to Audited Financial Statements		
1 Total revenue (Form 990, Part VIII,column (A), line 12)		172,980.
2 Total expenses (Form 990, Part IX, column (A), line 25)		174,134.
3 Excess or (deficit) for the year Subtract line 2 from line 1		-1,154.
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net) Add lines 4 through 8		
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-1,154.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not an Form 990, Part VIII, line 12		
a Net unrealized gains on investments		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIV)	_	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investments expenses not included on Fαm 990, Part VIII, line 7b 4a	 	
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments 2b		
c Other losses 2c		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Rart XIV Supplemental Information	3	
	1)/ 1 15 1)h
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also company additional information	lete this part to pr	ovide
		
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Schedule **D** (Form 990) 2010

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Schedule D (Form 990) 2	010 JUNIOR LEAGUE ental Information (cor	E OF SIOUX	CITY,	INC.	42-0958266	Page 5
Fait XIV-[Suppleme	ental information (cor	itinueu)				
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Part III	Grants and Other Assistance to I Part III can be duplicated if addition	ndividuals in the	United States. Co	mplete if the organ	nization answered 'Yes
•	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non cash assistance	(e) Method of valuation (book, FMV, appraisal, other)
1					
2					
3					
4					
5					
6					
7 Part IV	Supplemental Information. Comp	late this part to r	arounda the informa	tion required in Do	st L line 2, and any of
ailiv	TSupplemental Information: Comp	nete this part to p	provide the informa	mon required in Pa	rt i, ilile z, and any of
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Schedule M (Form 990) 2010 JUNIOR LEAGUE OF SIOUX CITY, INC.	42-09582	66	Page 2
Part II Supplemental Information. Complete this part to provide the information required and 33 Also complete this part for any additional information.	by Part I, I	nes 30b,	32b,
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			- <b></b>
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#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

JUNIOR LEAGUE OF SIOUX CITY, INC.	Employer identification number 42-0958266
Pt XI UNREALIZED GAINS ON INVESTMENTS	
Pt VI-B, Line 11a 990 IS REVIEWED BY OFFICERS BEFORE MAILING	
Pt VI-C, Line 19 ALL DOCUMENTS ARE MADE AVAILABLE UPON REQUEST	
Pt_VI-A, Line 6 THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION	
Pt VI-A, Line 7a MEMBERS ELECT OFFICERS EACH YEAR	
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