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Form 990

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 benefit trust or private foundation)

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 05-01-2011 and ending 04-30-2012

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

ALABAMA JUNIOR MISS SCHOLARSHIP FOU

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

PO BOX 231180

Room/suite

City or town, state or country, and ZIP + 4

MONTGOMERY, AL 36123

D Employer identification number

63-0822497

E Telephone number

(334) 244-9066

G Gross receipts \$

362,058

F Name and address of principal officer

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (Insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

M State of legal domicile

Part I	Summary
Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO FUND COLLEGE SCHOLARSHIPS FOR PARTICIPANTS IN ALABAMA'S JUNIOR MISS PAGEANT
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets
	3 Number of voting members of the governing body (Part VI, line 1a) 12
	4 Number of independent voting members of the governing body (Part VI, line 1b) 12
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 0
	6 Total number of volunteers (estimate if necessary)
	7a Total unrelated business revenue from Part VIII, column (C), line 12 0
	7b Net unrelated business taxable income from Form 990-T, line 34
Revenue	8 Contributions and grants (Part VIII, line 1h)
	9 Program service revenue (Part VIII, line 2g) 0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 9,212
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 355,143
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 316,298
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0
	b Total fundraising expenses (Part IX, column (D), line 25) 0
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 722
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 317,020
Net Assets or Fund Balances	19 Revenue less expenses Subtract line 18 from line 12 38,123
	20 Total assets (Part X, line 16) 532,544
	21 Total liabilities (Part X, line 26) 0
	22 Net assets or fund balances Subtract line 21 from line 20 532,544

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

BARRY LEAVELL PRESIDENT

2013-03-10

Date

Paid Preparer's Use Only

Preparer's signature

JAMES E BLAKE CPA

Firm's name (or yours if self-employed), address, and ZIP + 4

ALDRIDGE BORDEN & COMPANY PC
74 COMMERCE STREET
MONTGOMERY, AL 36104

Date

2013-03-11

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

EIN

Phone no (334) 834-6640

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

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

TO FUND COLLEGE SCHOLARSHIPS FOR PARTICIPANTS IN ALABAMA'S JUNIOR MISS PAGEANT

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

YesNo

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?

YesNo

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 317,020 including grants of \$ 317,020) (Revenue \$)

TO FUND COLLEGE SCHOLARSHIPS FOR PARTICIPANTS IN ALABAMA'S JUNIOR MISS PAGEANT

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$ 317,020

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	1	Yes
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
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? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
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? <i>If "Yes," complete Schedule C, Part III.</i>	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	8	No
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? <i>If "Yes," complete Schedule D, Part IV.</i>	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	10	No
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		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	No
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? <i>If "Yes," complete Schedule D, Part VII.</i>	11b	No
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? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c	No
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? <i>If "Yes," complete Schedule D, Part IX.</i>	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	11e	No
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)? <i>If "Yes," complete Schedule D, Part X.</i>	11f	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	12a	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i>	14b	No
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 U S ? <i>If "Yes," complete Schedule F, Part II and IV.</i>	15	No
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 U S ? <i>If "Yes," complete Schedule F, Part III and IV.</i>	16	No
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? <i>If "Yes," complete Schedule G, Part I.</i>	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
24a	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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
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		
25a	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance					
Check if Schedule O contains a response to any question in this Part V ☐					
			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			No
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	0		
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-file (see instructions).	2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b			
4a	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 or securities account)?	4a			No
b	If "Yes," enter the name of the foreign country  _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	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?	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	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?	7a			No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	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.				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a			
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the aggregate amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . .	14b			

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	12		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	12
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	Yes
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	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	No
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	
13	Did the organization have a written whistleblower policy?	13	No
14	Did the organization have a written document retention and destruction policy?	14	No
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?		
a	The organization's CEO, Executive Director, or top management official	15a	No
b	Other officers or key employees of the organization	15b	No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	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	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. BETH KINGRY 8611 WYNFORD PLACE MONTGOMERY, AL 36117 (334) 277-6169

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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, or 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 related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATRINA BELT BOARD MEMBER		X						0	0	0
(2) KIMBERLY CYR BOARD MEMBER		X						0	0	0
(3) MICHAEL JONES BOARD MEMBER		X						0	0	0
(4) STARLA JONES BOARD MEMBER		X						0	0	0
(5) LAURA LEAVELL BOARD MEMBER		X						0	0	0
(6) KIM SKONEKI BOARD MEMBER		X						0	0	0
(7) SARAH STRICKLAND BOARD MEMBER		X						0	0	0
(8) SANDRA SUMMERLIN BOARD MEMBER		X						0	0	0
(9) BRUCE TRIFTSHAUSER BOARD MEMBER		X						0	0	0
(10) LISA JONES ASST TREASR/				X				0	0	0
(11) BETH KINGRY TREASURER				X				0	0	0
(12) BARRY LEAVELL PRESIDENT				X				0	0	0

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼			

2 Total number of individuals (including but not limited to those \$100,000 of reportable compensation from the organization) ▶

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►

Part 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	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	345,931			
	g	Noncash contributions included in lines 1a-1f \$ _____					
	h	Total. Add lines 1a-1f			345,931		
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		9,772		
4		Income from investment of tax-exempt bond proceeds . . .					
5		Royalties					
6a		Gross rents	(i) Real (ii) Personal				
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	6,355			
b		Less cost or other basis and sales expenses		6,915			
c		Gain or (loss)		-560			
d		Net gain or (loss)		-560	-560		
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b		Less direct expenses	b				
c		Net income or (loss) from fundraising events . . .					
9a		Gross income from gaming activities See Part IV, line 19	a				
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities . . .					
10a		Gross sales of inventory, less returns and allowances	a				
b		Less cost of goods sold	b				
c		Net income or (loss) from sales of inventory . . .					
	Miscellaneous Revenue		Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See Instructions			355,143	-560		9,772

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

Do not include amounts reported on lines 6b, 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 United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	316,298	316,298		
3	Grants and other assistance to governments, organizations, and individuals outside the United States 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				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
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	Insurance				
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)				
a	MISCELLANEOUS EXPENSES	615	615		
b	BANK SERVICE CHARGES	107	107		
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	317,020	317,020	0	0
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			48,810	1	117,822
	2	Savings and temporary cash investments			362,867	2	338,919
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	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			110,240	11	75,803
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	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)			521,917	16	532,544	
Liabilities	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	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	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			521,917	27	532,544
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			521,917	33	532,544
34	Total liabilities and net assets/fund balances			521,917	34	532,544	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	355,143
2	Total expenses (must equal Part IX, column (A), line 25)	2	317,020
3	Revenue less expenses Subtract line 2 from line 1	3	38,123
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	521,917
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-27,496
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	532,544

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 ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?		No
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 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 separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated 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 Act and OMB Circular A-133?		No
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		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public
Inspection

Name of the organization ALABAMA JUNIOR MISS SCHOLARSHIP FOU	Employer identification number 63-0822497
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

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

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	316,823	382,696	298,644	309,611	345,931	1,653,705
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	316,823	382,696	298,644	309,611	345,931	1,653,705
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)						385,658
6 Public Support. Subtract line 5 from line 4						1,268,047

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	316,823	382,696	298,644	309,611	345,931	1,653,705
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,208	14,642	14,724	11,159	9,772	61,505
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						1,715,210

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 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	73 930 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	73 840 %

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2010. If the organization did not check the 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—2011. 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—2010. 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 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 IIIPart III

Support Schedule for Organizations Described in IRC 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, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
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 the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
ALABAMA JUNIOR MISS SCHOLARSHIP FOU

Employer identification number
63-0822497

Part I

General Information on Grants and 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 criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United 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 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 ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3

Enter total number of other organizations listed in the line 1 table ▶

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 Schedule I-1 (Form 990) if additional space is needed.

(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)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS	325	316,298			

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES	SCHEDULE I, PAGE 1, PART I, LINE 2	EACH SCHOLARSHIP RECIPIENT SUBMITS REQUEST FOR FUNDS TO BE SENT TO THE COLLEGE OF HER CHOICE

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

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2011

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Name of the organization ALABAMA JUNIOR MISS SCHOLARSHIP FOU	Employer identification number 63-0822497
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Identifier	Return Reference	Explanation
RELATED PARTY INFORMATION AMONG OFFICERS	FORM 990, PAGE 6, PART VI, LINE 2	LISA JONES MICHAEL JONES BOARD MEMBER BOARD MEMBER MARRIED BARRY LEAVELL LAURA LEAVELL PRESIDENT BOARD MEMBER MARRIED
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	FORM 990 WILL BE REVIEWED BY THE FOUNDATION'S PRESIDENT AND TREASURER
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	A V A I L A B L E U P O N R E Q U E S T
OTHER CHANGES IN NET ASSETS EXPLANATION	FORM 990, PART XI, LINE 5	TO CHANGE METHOD OF ACCOUNTING FOR INVESTMENTS FROM FAIR MARKET VALUE TO COST ON THE BOOKS OF THE ORGANIZATION

ALABAMA JUNIOR MISS SCHOLARSHIP FOUNDATION, INC
EIN 63-0822498
4/30/2012
FORM 990 SCHEDULE I PART III
GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS IN THE UNITED STATES

SCHEDULE OF SCHOLARSHIPS GIVEN

RECIPIANT	ASSISTANCE GIVEN	AMOUNT OF CASH GRANT
BETH POE	TUITION-LIBSCOMB	700 00
SAVANNAH SPEARS	BOOKS-NORTHEAST AL CC	413 00
JULIE DOZIER	BOOKS-JUDSON COLLEGE	460 00
LINDSEY ALDRIDGE	BOOKS-AUBURN	500 00
KIRKLAND BACK	BOOKS-ALABAMA	372 94
KATIE MAULDIN	BOOKS-ALABAMA	99 82
NORMA BOYD	TUITION-SHELTON STATE & UA	3,796 00
PENSACOLA STATE COLLEGE	LAUREN COTTON	500 00
MISSISSIPPI STATE UNIVERSITY	AMANDA HOLLOWAY	300 00
UNIV OF NORTH ALABAMA	RACHEL GANDEY	655 00
TAYLOR VEAZEY	BOOKS-ALABAMA	266 72
RACHEL RIVERS	BOOKS-ALABAMA AND TUITION JEFF STATE	1,809 70
UNIVERSITY OF ALABAMA	MORGAN CRITTENDEN	1,095 00
ZARA SPIVEY	BOOKS-WALLACE CAMPUS, DOTHAN	523 05
ALABAMA SOUTHERN CC	TAYLOR CHANDLER	117 00
WALLACE CC, SELMA	MARY CARTER ENGLISH	1,006 00
BHAM SOUTHERN	VIRGINIA PRATT	2,700 00
TROY UNIVERSITY	MAGGIE WALSH	850 00
HALEIGH HOLLIFIELD	BOOKS-ALABAMA	405 00
TROY UNIVERSITY	NATALEE SPORT	850 00
WICHITA STATE UNIVERSITY	AMANDA DEPINTO	1,000 00
MARGARET WELSH	BOOKS-MSU, TUITION-WALLACE CC, DOTHAN	902 53
KAITLIN HOLLEY	BOOKS-LBW COMMUNITY COLLEGE	141 31
LAUREN HOLT	BOOKS-MISSISSIPPI STATE	926 88
MARY FRANCES MORRIS	BOOKS-AUBURN	105 25
SOUTHERN UNION CC	KEELEY PORTER	500 00
TROY UNIVERSITY	BRANDI SHARPE	300 00
TROY UNIVERSITY	SUSANNAH MERRILL	1,050 00
EMSLEY RAYE LAMBERT	TUITION-JEFFERSON DAVIS CC	700 00
AUBURN UNIVERSITY	LYNDSAY EWING	200 00
UNIVERSITY OF ALABAMA	MARIE TUCKER	650 00
SAMFORD UNIVERSITY	LAUREN SPEAKMAN	550 00
CHLOE PRITCHETT	BOOKS-UNIVERSITY OF WEST ALABAMA	163 70
KATIE ANDREWS	ENTERPRISE STATE CC-TUITION	540 00
TROY UNIVERSITY	ANNA BAY MCCORD	1,451 00
FAULKNER UNIVERSITY	OLIVIA HYPHE	600 00
PAGE TODD	BOOKS-UNIV OF AL	448 28
UNIVERSITY OF ALABAMA	SARAH BLISS BUSBY	1,250 00
UNIVERSITY OF ALABAMA	KELSEY DUNN	550 00
TROY UNIVERSITY	SHELBY STEPHENS	1,700 00
BIRMINGHAM SOUTHERN	HALEY INGRUM	1,000 00
AUBURN	ASHLEY WILLIS	2,200 00
AUBURN	MARY K SCARBROUGH	2,000 00

AUBURN	SARAH HIRSCHFIELD	750 00
AUBURN	SLOANE BELL	900 00
AUBURN	KATHRYN HAYWOOD	700 00
ALABAMA	LAUREN RABREN	2,250 00
ALABAMA	JASMINE REESE	1,600 00
ALABAMA	ALISON GRIFFITT	2,250 00
ALABAMA	AMY SHACKELFORD	2,600 00
ALABAMA	REGINA MILLER	1,200 00
ALABAMA	MARY K LAKE	1,800 00
ALABAMA	ANN WALTON KNOX NICHOLS	1,800 00
MISSISSIPPI STATE UNIVERSITY	KAITLIN PARKER	1,225 00
ALABAMA SOUTHERN CC	TAYLOR DIANE BROOKS	750 00
TROY UNIVERSITY	DALLAS JORDAN	2,330 00
SOUTH ALABAMA	LINDSEY BROWN	600 00
WALLACE STATE CC	ERICA NIX	1,475 00
UAB	HADLEY SINQUEFIELD	200 00
ZARA SPIVEY	BOOKS-TROY UNIVERSITY	668 06
RHODES COLLEGE	TARYN BURGESS	3,050 00
UAB	JADA CURTIS	600 00
SAMFORD	LAUREN HUNT	5,100 00
BRUCE TRIFTSHAUSER	SPIRIT SPONSOR MAILING	410 32
AUBURN	SYDNEY WAID	4,349 00
TUSKEGEE UNIVERSITY	DESTINY CALDWELL	4,700 00
ALABAMA	KATHRYN MILLS	1,900 00
LAUREN HARRIS	TUITION REIMB -AUBURN	800 00
AUBURN	CAROLINE WOODS	650 00
AUBURN	SAMANTHA SPEED	1,000 00
AUBURN	JORDAN KEELEY	2,875 00
ALABAMA	LAURA FREEMAN	650 00
ALABAMA	ALISON GRIFFITT	500 00
ALABAMA	CAROLINE LAIRD	800 00
ALABAMA	DANIELLE DUBOSE	4,300 00
UAB	ALLIE HAYNES	250 00
MISSISSIPPI STATE UNIVERSITY	CALLIE PAXTON	2,000 00
UNA	RACHEL GANDY	700 00
AUBURN	ANNE BLAKE LANGFORD	1,000 00
AUBURN	KADIE PAYNE	700 00
AUBURN	HAYLEY SHOOK	2,200 00
AUBURN	BEATRICE ONADEKO	1,550 00
AUBURN	DARBY HARRIS	450 00
AUBURN	SARAH MARSHALL	3,500 00
AUBURN	MARY OWEN HARTZOG	2,250 00
JUDSON COLLEGE	CALANDRIA JOHNSON	400 00
SHELTON STATE CC	KIMBERLY MAYO	1,500 00
POINT PARK UNIV	JORDAN HAMNER	4,661 25
TROY	OLIVIA MCCALL	1,200 00
ALABAMA	KELSEY VICE	3,200 00
ALABAMA	EMILY MEINEKE	2,150 00
ALABAMA	ALLISON MONTGOMERY	1,000 00
ALABAMA	ANNA-MICHAEL OAKLEY	3,050 00
ALABAMA	PEYTON FIELDS	1,200 00
ALABAMA	HANNAH GLENN	1,700 00
AUBURN	PRESLEY HAWKINS	1,800 00
AUBURN	CAITLYN MCKINLEY	2,500 00
AUBURN	EMILY JANE JORDAN	2,306 67

AUBURN	SARA CARLTON	400 00
ALABAMA	JANE ANNE ELLIOTT	750 00
TROY	AMANDA FORD	2,600 00
TROY	MACKENZIE BLACKMON	150 00
TROY	JENNIFER WATSON	3,850 00
RHODES COLLEGE	MERRILL THAGARD	150 00
SAMFORD UNIVERSITY	LAURA LEIGH HOLLAWAY	2,750 00
MISS UNIV FOR WOMEN	NATALIE BOWMAN	1,300 00
USA	STERLING STROM	500 00
JUDSON COLLEGE	JULIE DOZIER	3,265 00
NW SHOALS CC	NATALIE BROOKS	200 00
JONES COUNTY JUNIOR COLLEGE	HEATHER RIVERS	3,750 00
MONTEVALLO	HANNAH MARTIN	750 31
BRIANA KINSEY	BOOKS-ALABAMA	950 92
WASHINGTON UNIV IN ST LOUIS	TIFFANY EWING	1,800 00
TROY	PRESLEY RESTREPO	1,300 00
TROY	ALLIE LINCOLN	750 00
MSU	ABBY ELIZABETH MCMILLAN	500 00
CORNELL UNIVERSITY	LISA LIU	100 00
UNA	MADASON MCCURDY	1,000 00
UNIV OF MOBILE	SALLYANNA SILVERIA	2,250 00
ALABAMA	DANIELLE DUBOSE	361 00
AUBURN	CARLY GARNETT	1,150 00
AUBURN	ALEXANDREA GREEN	600 00
AUBURN	ANNA HOWELL	1,950 00
JEFERSON DAVIS CC	ASIA SULLIVAN	1,138 00
DANIELLE DUBOSE	BOOKS-ALABAMA	477 04
LSU	NATALIE PICKETT	1,750 00
TUSKEGEE UNIV	KELSI SMITH	2,000 00
ALABAMA	KATHRYN TURGEON	350 00
UNA	ELISE ADKINS	565 00
GLENN DRAPER	TUITION-SANDY DRAPER-WALLACE CC	654 00
KATHRYN NOVAK	BOOKS-ALABAMA	250 00
MEG MCGUFFIN	BOOKS-AUBURN	370 67
SAMFORD UNIVERSITY	ANNA MARGARET JONES	3,950 00
SOUTHERN METHODIST UNIV	ALISON BRADFORD GORRIE	1,450 00
MARY KATHERINE SCARBROUGH	BOOKS-AUBURN	300 00
TROY	ALLYSON LAGIVNE	1,100 00
UNIV OF S ALABAMA	KENDALL GARRETT	761 00
MONTEVALLO	GABRIELLE PRINGLE	700 00
SUMMER MYRICK	BOOKS-AUBURN	1,150 00
AUBURN	JESSIE CATHERINE HARRISON	250 00
UAB	RAVEN PEGGINS	246 00
ALABAMA	KAITLYN ROBINSON	1,100 00
RICHARD STEINBERG	BOOKS-KELLY STEINBERG-UAH	1,250 00
KENDALL GARRETT	BOOKS-USA	553 45
OLIVIA KIRK	BOOKS-SOUTHERN UNION CC	300 00
HALEIGH HOLLIFIELD	BOOKS-ALABAMA	607 53
ANNA DAVENPORT	BOOKS-JUDSON	538 33
ALABAMA	EVA ELIZABETH BARKLEY	3,600 00
UAB MEDICAL SCHOOL	ASHLYN SEELEY	1,126 00
JEFF STATE CC	GABRIEL MINER	378 00
ZAHRA QURESHI	BOOKS-TROY	323 56
JEFF STATE CC	ASHLEY BROOKE CLARK	828 00
UNIV OF MISSISSIPPI	MORGAN LEIGH DYKES	1,750 00

ALABAMA	MALLORY HERRING	1,250 00
MEREDITH ALVAREZ	BOOKS-AUBURN	300 64
TAYLOR FOSSETT	BOOKS-SNEAD ST CC	100 00
ELIZA JANE TRAWICK	BOOKS-TROY	200 00
MORGAN CRITTENDEN	BOOKS-ALABAMA	343 84
JEFF STATE CC	ELLEN EARL	378 00
JEFF STATE CC	LEIGH ANNA SHAVERS	828 00
JEFF STATE CC	EMMA CAITLIN PITTS	828 00
BIRMINGHAM SOUTHERN	HALEY INGRUM	750 00
ALEXIS BLACKMON	BOOKS-UAB	333 53
TROY	MACKENZIE BLACKMON	500 00
ALABAMA	REBEKAH ROSS	500 00
KIRBY ELIZABETH WEBB	BOOKS-AUBURN	453 26
KATIE ANDREWS	BOOKS-ALABAMA	137 39
TAYLOR VEAZEY	BOOKS-ALABAMA	147 55
WHITNEY LOTT	BOOKS-ALABAMA	192 70
ALEXANDRA BLAIR RENFROE	BOOKS-AUBURN	771 92
DENVER LYNN HUNT	BOOKS-ALABAMA	423 08
ELISE ADKINS	BOOKS-UNA	295 40
AUBURN	EMILY BETHEA	1,200 00
OLIVIA GARRETT	BOOKS-USA	348 66
MARY FRANCES MORRIS	BOOKS-AUBURN	352 34
KRISTEN MOSLEY	BOOKS-VANDERBILT	265 24
HUNTINGDON COLLEGE	MARGARET WESLEY SMITHART	1,000 00
ALABAMA	VICTORIA GRACE NEATHAMMER	300 00
AUBURN	KATHLEEN COPELAND O'HARA	700 00
AUBURN	KATHRYN KYNDALL HAYWOOD	1,050 00
KELLY NEUGENT	BOOKS-USA	550 00
ELIZABETH BACK	BOOKS-ALABAMA	166 07
RACHEL CHILDERS	BOOKS-ALABAMA	500 00
CYNTHIA SIMPSON	BOOKS-ALABAMA	245 68
CATHERINE HUMPHREY	BOOKS-ALABAMA	304 55
ASHLEIGH WARD	BOOKS-ALABAMA	476 18
MARY MARGARET WELSH	BOOKS-MISSISSIPPI STATE	1,165 09
HANNAH RAE WILSON	BOOKS-AUBURN	375 22
AMANDA CURVIN	BOOKS-AUBURN	390 56
JEFFERSON STATE CC	HANNAH BELL	378 00
JEFFERSON STATE CC	KAYTLYN JACKSON	200 00
MARY KATHERINE GRAY	BOOKS-ALABAMA	493 25
KACI KAY CABLE	BOOKS-UNA	279 66
SAMANTHA HAMMOND	BOOKS-UNA	250 00
STEPHANIE MARVIN	BOOKS-TROY	250 00
MELANIE TOLBERT	BOOKS-TUSKEGEE	442 26
MARY MORGAN PHILLIPS	BOOKS-ALABAMA	500 00
OLIVIA GARRETT	BOOKS-USA	50 70
ELLEN EARL	BOOKS-JEFF STATE CC	107 60
ANNA GRACE SCHMIDTKE	BOOKS-AUBURN	641 40
ANNA GRACE MASTERSON	BOOKS-UNA	440 08
UNIV OF MISSOURI	LAURA EVANS	4,200 00
ALABAMA	LESLIE PEREZ-MEZA	200 00
UNIVERSITY OF MOBILE	BROOKE SANDERS	1,000 00
RACHEL CASON	BOOKS-SAMFORD	100 00
CAITLYN LUTTRELL	BOOKS-USA	779 16
TROY UNIVERSITY	ALLIE LINCOLN	750 00
JOANNA NEWSOM	BOOKS-ALABAMA	428 55

KERRI M ADAIR	BOOKS-JEFF STATE CC	150 00
JESSICA L NEWCOMBE	BOOKS-FAULKNER	117 56
TAYLOR M KING	TUITION-AUBURN	2,300 00
MALEEA MASSENGALE	BOOKS-ALABAMA	700 00
LURLEEN B WALLACE CC	MEGAN ROGERS	1,250 00
ALABAMA	NOVA RAE MOSS	300 00
RACHAEL SHERRER	BOOKS-ALABAMA	850 64
MELINA HETTIARATCHI	BOOKS-MERCER UNIV	200 00
SYDNEY SCHULTZ	BOOKS-AUBURN	627 47
SAMFORD UNIV	HANNAH MARIE CLARDY	600 00
ALABAMA STATE UNIV	JULIANNA SANDERS	2,300 00
MEGAN PUGH	TUTION-ALABAMA	1,250 00
PATRICIA MAXHAM	BOOKS-AUBURN	351 72
MARY KATHERINE PARKER	BOOKS-SAMFORD	250 00
ADREANNA SMITH	BOOKS-UNIV OF MOBILE	494 12
LESLIE LANGFORD	BOOKS-AUBURN	469 01
REBECCA DURON	BOOKS-AUBURN	287 30
KRISTEN DUNN	BOOKS-UNA	963 88
HUNTER BROOKS HAYNES	BOOKS-AUBURN	150 00
MARY CARTER ENGLISH	BOOKS-AUBURN	304 95
TAYLOR VEAZEY	BOOKS-ALABAMA	194 35
JEFF STATE COMM COLLEGE	KAITLIN BENOS	756 00
AUBURN	SYDNEY WAID	2,221 00
AUBURN	CAROLINE RECTOR	1,100 00
AUBURN	MARY KATHERINE SCARBROUGH	2,000 00
ALABAMA	MARGARET R JONES	1,500 00
AUBURN	BECCA BARGANIER	1,950 00
AUBURN	JORDAN KEELEY	2,302 65
JEFF STATE COMM COLLEGE	CALLIE BARGANIER	756 00
FAULKNER UNIVERSITY	ALYSSA BOYD	600 00
MARY FRANCES STEAGALL	BOOKS-AUBURN	335 56
ALABAMA	COURTNEY CAMPBELL	1,500 00
ALABAMA	MIRANDA WARD	4,900 00
AUBURN	HARLEY GLASS	3,300 00
KELSEY TEMPLETON	BOOKS-UAB	500 00
WENDY PITTMAN	BOOKS-AUBURN	696 16
LAURA SPEARS	BOOKS-SAVANNAH COLLEGE OF ART	176 98
KIRBY WEBB	BOOKS-AUBURN	196 74
ALAINA ARNOLD	BOOKS-TROY	176 45
JEFF DAVIS COMM COLLEGE	ASIA SULLIVAN	862 00
ALABAMA	ALLISON FARRIS	2,500 00
ALABAMA	CAROLINE LAIRD	200 00
PENSACOLA STATE COLLEGE	HANNAH JOHNSON	537 65
SHEA SUMMERLIN	TUITION REIMB -SAMFORD	500 00
AUM	JANICA TEMPERO	500 00
ALABAMA	MARY BETH HARRISON	5,000 00
TROY UNIVERSITY DOTHAN	KRISTEN MILES ROLLINS	425 00
KRISTA ELAM	TUITION REIMB -UNIV WEST ALABAMA	1,600 00
ALABAMA	DANIELLE DUBOSE	4,584 00
LESLIE LANGFORD	BOOKS-AUBURN	288 69
UNIV OF S ALABAMA	REBEKAH KENDRICK	1,250 00
KRISTEN MOSLEY	BOOKS-VANDERBILT	36 26
JEFF STATE CC	EMMA-CAITLIN PITTS	272 00
ALABAMA	RACHEL E MIDKIFF	250 00
JEFF STATE CC	ELLEN EARL	378 00

JEFF STATE CC	GABRIEL MINER	378 00
HANNAH JOHNSON	BOOKS-PENSACOLA STATE COLLEGE	448 58
KATIE ANDREWS	BOOKS-ALABAMA	485 65
KATIE MAULDIN	BOOKS-UNIV N ALABAMA	143 22
LAUREN HOLT	BOOKS-MISS ST UNIV	777 50
BRIANA KINSEY	BOOKS-ALABAMA	459 77
HANNAH WILSON	BOOKS-AUBURN	294 00
ALABAMA	MARY KATHERINE LAKE	1,800 00
JEFF STATE CC	LEIGH ANNA SHAVERS	172 00
MONTEVALLO	LEILANI HAYES	200 00
JEFF STATE CC	BROOKE CLARK	414 00
TROY	REBECCA NICOLE WELLS	3,439 00
LBW COMM COLLEGE	HANNAH ELISE STEWART	100 00
AUBURN	CATHERINE P PARISEAU	428 79
MELANIE GRAY	BOOKS-WALLACE COMM COLLEGE	200 00
ANNA GRACE MASTERSON	BOOKS-UNA	259 14
MARY FRANCES MORRIS	BOOKS-AUBURN	149 87
ZARA KAITLIN SPIVEY	BOOKS-TROY	692 10
ALEXIS BLACKMON	BOOKS-UAB	366 47
MARY CARTER ENGLISH	BOOKS-AUBURN	203 12
OLIVIA GARRETT AKINS	BOOKS-USA	468 13
CATHERINE PARISEAU	BOOKS-AUBURN	271 21
ANNA GRACE SCHMIDTKE	BOOKS-AUBURN	207 16
REBECCA ELLIOTT	BOOKS-ALABAMA	63 40
SARAH NIELSEN	BOOKS-ALABAMA	407 47
TROY	JAMISON WILSON	1,100 00
USA	KENDALL GARRETT	1,028 00
UNA	RACHEL GANDY	227 00
MEREDITH ALVAREZ	BOOKS-AUBURN	215 52
ASHLEIGH WARD	BOOKS-ALABAMA	154 40
PATTY MAXHAM	BOOKS-AUBURN	508 63
SONDRA ELISE ADKINS	BOOKS-UNA	311 80
ZAHRA QURESHI	BOOKS-TROY	211 54
HANNAH JOHNSON	BOOKS-PENSACOLA ST COLLEGE	448 58
JEFF STATE CC	KAITLIN BENOS	756 00
MARY KATHERINE GRAY	BOOKS-ALABAMA	584 68
KRISTEN NICOLE DUNN	BOOKS-UNA	386 12
MARY CARTER ENGLISH	BOOKS-AUBURN	107 54
ELIZABETH ROTH	BOOKS-AUBURN	300 00
DENVER LYNN HUNT	BOOKS- ALABAMA	525 19
LAUREN KLEPAC	BOOKS-AUBURN	626 31
MARGARET WELSH	BOOKS-MSU	453 91
MARING EBERLEIN	BOOKS-GOUCHER COLLEGE	250 00
SAMFORD UNIVERSITY	CAROLINE FOWLER	2,000 00
KATIE MAULDIN	BOOKS-UNA	208 36
ALEXANDRA RENFROE	BOOKS-AUBURN	145 41
ELIZABETH BACK	BOOKS-ALABAMA	733 92
ADREANNA SMITH	FEES-UNIV OF MOBILE	125 00
CHLOE PRITCHETT	BOOKS-UNIV OF W ALABAMA	149 37
HANNAH PEARCY	BOOKS-UAB	233 16
BIRMINGHAM SOUTHERN	ELIZABETH PETTEY	2,000 00
TAYLOR VEAZEY	BOOKS-ALABAMA	47 34
HALEIGH HOLLIFIELD	BOOKS-ALABAMA	246 27
NORMA BOYD	BOOKS-ALABAMA	302 60
MAGGIE MCDANIEL	BOOKS-ALABAMA	1,089 39

MONTEVALLO	AMANDA LOCARNO	200 00
JULIE DOZIER	BOOKS-JUDSON	75 06
MARLIE WILKES	BOOKS-AUBURN	497 53
ZARA SPIVEY	BOOKS/FEES-TROY	478 00
UNIV OF SOUTH ALABAMA	BROOKLYN ROWLAND	750 00
BHAM SOUTHERN COLLEGE	LAURA CARBAJAL	250 00
AUBURN	WHITLEY KELLEY	<u>2,525 00</u>
Total		<u><u>316,298 20</u></u>