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Form **990**

Department of the Treasury Internal Revenue Service A For the 2012 calendar year, or tax year beginning JUN 1, 2012 and ending MAY 31, 2013

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 Open to Public

Inspection

Intern	al Revenu	e Service	The organization ma							Inspection			
A F	or the	2012 calend	dar year, or tax year begins	ning J	UN 1,	2012 an	d ending	MAY	31, 2013				
Вс	theck if pplicable	C Name o	f organization		<u> </u>			D	Employer identifica	ition number			
:	_Address _change	JUNI	OR LEAUGE OF 1	LAKE	CHARLE	S, INC.							
	Name change		Business As					\neg	72-6029070				
	Initial return		r and street (or P.O box if ma	ıl ıs not del	livered to stre	et address)	Room/su	ite E	Telephone number				
	Termin- ated	1	LAKESHORE DR			,				36-4025			
	Amende	_ 	wn, or post office, state, and		e		·	G	Gross receipts \$	287,511			
	Applica-	LAKE	CHARLES, LA	7060				H(a	H(a) Is this a group return				
	pending		and address of principal office	er:				7	for affiliates?	Yes X No			
			AS C ABOVE					_ H(I	H(b) Are all affiliates included? Yes No				
			X 501(c)(3) 501(c))	◀ (insert n)	o.) 4947(a)(1) or 5	27	If "No," attach a lis	st (see instructions)			
			JLLC.NET						c) Group exemption				
			X Corporation Trust	As	sociation	Other -	L Ye	ear of fo	rmation: 1946 M	State of legal domicile, ${f L}$			
Pa		Summary											
g	1 B	riefly describ	oe the organization's mission	n or most	significant	activities: ASSI	ESS &	PRO	VIDE SERVI	CE TO			
and	<u> </u>	INUMMO	TY, TRAIN MEMI	3ERS	FOR CO	MMUNITY S	SERVI	<u>CE</u>					
eru	2 C	heck this bo	ox 🕨 📖 if the organizat	ion discoi	ntinued its o	perations or disp	osed of m	ore tha	n 25% of its net ass	ets			
ેં			ting members of the govern						3				
Activities & Governance			dependent voting members	_	=)		4				
ies			of individuals employed in o			Part V, line 2a)			5				
Ĕ	ŀ		of volunteers (estimate if ne						6	4 000			
Ş	1		d business revenue from Pa						7a	4,900 -5,912			
_	b N	et unrelated	business taxable income fr	om Form	990-T, line	34		7b	<u></u>				
							F	_	Prior Year 80,026.	Current Year 82,393			
<u>e</u>	1		and grants (Part VIII, line 1)				}		0.	02,393			
Revenue		-	ice revenue (Part VIII, line 20		and 7d\		}		535.	410			
&			come (Part VIII, column (A),	}		173,635.	131,330						
			e (Part VIII, column (A), lines add lines 8 through 11 (m	-		254,196.	214,133						
			milar amounts paid (Part IX,						0.	0			
	i					1	-		0.	0			
g		Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							13,103.	14,127			
Expenses			fundraising fees (Part IX, col		(* 9,	′	0.	0					
be			ing expenses (Part IX, colur			0 = 1 / = 10	—o. ⊦						
ũ			es (Part IX, column (A), lines			J V _	- 		214,895.	224,298			
			es. Add lines 13-17 (must eq			A), line 25)	N		227,998.	238,425			
			expenses Subtract line 18			21 201A 1	Öl [26,198.	-24,292			
ces							8	Beginn	ing of Current Year	End of Year			
Net Assets or Fund Balances	20 To	otal assets (F	Part X, line 16)	Į	~~	- :\1 1 ! ?	' ⁼ [632,138.	645,652			
AAS ABB	21 To	otal liabilities	s (Part X, line 26)	L		CIN, UT			22,902.	29,150			
캺			fund balances Subtract lin	e 21 from	line 20				609,236.	616,502			
Pa	irt II	Signature	e Block										
Unde	er penaltı	es of perjury,	I declare that I have examined t	his return,	including ac	companying schedu	les and stat	ements,	and to the best of my k	nowledge and belief, it is			
	correct,		Declaration of preparer (other	than office	er) is based o	n all information of v	which prepa	rer has	any knowledge.	 -			
Sigr	, []		phanic Kaypra e of officer	Presi	dent.	2013-14			1 4/15/14 Date				
Her	e]		SIDENT										
M	[]	Type or p	print name and title										
	F	Print/Type prej			Preparer's s	ignature		Date	Check X				
 aid		NNE CO	LLETTE		HANK	Cltelle)		04/	13/14 self-employed	P00166717			
Prep	arer F	ırm's name	▶ ANNE COLLET		PÁ				Firm's EIN ▶				
Use	Only F	ırm's address	P.O. BOX 19										
رحا			LAKE CHARLES						Phone no. 33	7-304-0860			
			is return with the preparer s							X Yes No			
23200	01 12-10-	12 LHA F	For Paperwork Reduction	Act Notic	e, see the	separate instruc	tions.	_		Form 990 (201			

Form	1990 (2012) JUNIOR LEAUGE OF LAKE CHARLES, INC.	72-6029070	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check If Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission:	TON OF HOMEN	
	THE JUNIOR LEAGUE OF LAKE CHARLES, INC. IS AN ORGANIZATI		
	COMMITTED TO PROMOTING VOLUNTARISM, TO DEVELOPING THE POWOMEN, AND TO IMPROVING THE COMMUNITY THROUGH EFFECTIVE		
	LEADERSHIP OF TRAINED VOLUNTEERS. ITS PURPOSE IS EXCLUS		miai -
_		ANDCHA	RITABI
2	Did the organization undertake any significant program services during the year which were not listed on	Vas	X No
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	162	LAN INU
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Vas	X No
3	If "Yes," describe these changes on Schedule O.	163	140
4	Describe the organization's program service accomplishments for each of its three largest program services, as	maggired by evnenges	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	13, the total expenses, a	uiu
4a	(Code) (Expenses \$24 , 947 • including grants of \$) (Revenue		
40	COMMUNITY ASSISTANCE		
	COMMONITY	 	
			
			
			····
			
			
			
		 	
4b	(Code) (Expenses \$ 1,159 • including grants of \$) (Revenu	- P	
40	(Code) (Expenses \$ 1,139 • including grants of \$) (Revenue PROVISIONAL TRAINING & PROJECTS	e \$	
	THOUSE THE THE THOUSE THE THE THOUSE THE THE THE THE THE THE THE THE THE TH		
			
		 	
			
			
4c	(Code) (Expenses \$ 79,713 · including grants of \$) (Revenu		
70	(Code) (Expenses \$ /9,/13 • including grants of \$) (Revenu	e 3	
	COMMONITY INVOLVEMENT		
		 	
			
		· · · · · · · · · · · · · · · · · · ·	
			
A -J	Other pregram convece (Decembe in Schodide O.)		
4d	Other program services (Describe in Schedule O.)		
4-	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 105,819.)	
4e_	Total program service expenses ► 105,819.	O(90 (2012)
		roini 3 ?	• • (∠∪1∠)

Form 990 (2012) JUNIOR LEAUG Part IV Checklist of Required Schedules

	The officeriation required contractor			
			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	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		Х
	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 for which donors have the right to	_		х
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
8	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			7,7
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, 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, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
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	11b		X
С	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	11c		X
đ	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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			٠,
	Schedule D, Parts XI and XII	12a		X
þ	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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		-
b	,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes " complete Schedule F. Parts Land IV.	14b		x
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		 -
15	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			
10	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	17		х
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	<u></u>
19	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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		Form	990	(2012)

Form 990 (2012)

JUNIOR LEAUGE OF L
Part IV Checklist of Required Schedules (continued)

				
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			.,
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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_		Х
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? If "Yes," complete			Х
04-	Schedule J	23		A
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	ı İ		
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	ı İ		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		х
29	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
2 9 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	_25		
50	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?		-	
•	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?// "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_		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, 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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
^-	If "Yes," complete Schedule R, Part V, line 2	36	_	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		Х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		
38	Note. All Form 990 filers are required to complete Schedule O	38	х	
	Access to the control of the required to complete control of		990	(2012)
			1	·

Page 5

Form 990 (2012)

JUNIOR LEAUGE OF LAKE CHARLES, INC.

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			
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		
2a	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	, ,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			v
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	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	_		X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b		5b		Λ
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
oa	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 as charitable contributions?	6a		Х
h	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).			
	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		X
	if "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 required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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		_
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	-	
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	į Į		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	l T	- 1	
b	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
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 line 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			X							
Sec	tion A. Governing Body and Management										
	ton 71 do to 1111 good and the control of the contr		Yes	No							
12	Enter the number of voting members of the governing body at the end of the tax year 7										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
h	Enter the number of voting members included in line 1a, above, who are independent 1b 7										
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										
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х							
6	Did the organization have members or stockholders?	6	X								
	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
, a	more members of the governing body?	7a	х								
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
IJ	persons other than the governing body?	7b	х								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	70									
	The governing body?	8a	х								
	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0									
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	Ť									
-	tion Divides (This section Directors and matter about political interest by the matter interest by		Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		X							
	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	Х								
	Describe in Schedule O the process, if any, used by the organization to review this Form 990										
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b									
	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		Х							
14	Did 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?										
а	The organization's CEO, Executive Director, or top management official	15a		Х							
b	Other officers or key employees of the organization	15b		X							
	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		X							
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									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ► NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le								
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finar	ncial								
	statements available to the public during the tax year.										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ion: 🕨									
	JUNIOR LEAGUE OF LAKE CHARLES - 337-436-4025										
	1019 LAKESHORE DRIVE LAKE CHARLES LA 70601										

Form	990	(2012)	
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JUNIOR LEAUGE OF LAKE CHARLES, INC.

72-6029070

Page 7

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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 (A)	(B)	(C) Position						(D)	(E)	(F)
Name and Title	Average	(do	not c	heck	more	than	one	Reportable	Reportable	Estimated
	hours per week	offi	cer ar	ss pe	rson	is bot or/trus	n an itee)	compensation from	compensation from related	amount of other
	(list any	ctor	Π					the	organizations	compensation
	hours for	a dire				豆		organization	(W-2/1099-MISC)	from the
	related	stee o	aste			ESUBC		(W-2/1099-MISC)		organization
	organizations	Individual trustee or director	Institutional trustee		ploye	Highest compensated employee	l			and related
	below line)	dwd	sttrb	Officer	Key employee	mploy	orme.			organizations
(1) STEPHANIE KARPOVS	10.00	=	=	۴	~	王喜	<u></u>			
PRESIDENT		1		x				0.	0.	0.
(2) MICHELLE EDWARDS	10.00	┢				1				
PLANNING VICE PRESIDENT		1	l	Х	ĺ	l		0.	0.	0.
(3) JENNY GRIMBALL	10.00			Г						
COMMUNITY VICE PRESIDENT		1		Х	1			0.	0.	0.
(4) BECKY DUPRE	10.00									
COMMUNICATIONS VICE PRESID			<u> </u>	X				0.	0.	0.
(5) LAURIE CUNNINGHAM	10.00							-		
MEMBERSHIP VICE PRESIDENT				X				0.	0.	0.
(6) ASHLEY KERNS	10.00									
PINANCE VICE PRESIDENT		L		Х				0.	0.	0.
(7) HALEIGH LYONS	2.00				j				_	
NOMINATING		<u> </u>	L	X	<u>L</u>			0.	0.	0.
(8) ANN KNAPP	1.00	ļ						_	_	_
SUSTAINING ADVISOR		<u> </u>	<u> </u>	X		<u> </u>	$ldsymbol{ld}}}}}}$	0.	0.	0.
(9) HOLLY MOBLUBEN MEELWEE	5.00	1	ĺ	l	ĺ					
PLACEMENT		<u> </u>	<u> </u>	X	<u> </u>	_	\Box	0.	0.	0.
(10) MELANIE MCMULLEN	5.00		l	l					_	
ADVISORY PLANNING & BYLAWS		<u> </u>	<u> </u>	X		┝		0.	0.	0.
(11) EMILY ABSHIRE	5.00	ł	l					0		
STATEGY PLANNING		⊢ –	-	Х	\vdash			0.	0.	0.
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JUNIOR LEAUGE OF LAKE CHARLES, INC.

Par	T VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)			_	
(A) (B)					-	C)			(D)	(E)			(F)	
	Name and title	Average	(dc		Pos heck		i than	one	Reportable	Reportable		Estimated		
		hours per	box	, unle	ss pe	rson	is bot	th an	compensation	compensati		ar	mount	
		week (list any	_	T	T		1	T	from	from relate			other	
		hours for	Jrect						the organization	organizatior (W-2/1099-MI		ı	npensa rom th	
		related	o di	ste			Sate		(W-2/1099-MISC)	(** 27 1000 1111	00,		ganızat	-
		organizations	trust	E E)ee	ad un		'				d relat	
		below	Individual trustee or director	Institutional trustee	ļ Ķ	Key employee	Highest compensate employee	뺼				org	anızatı	ons
		line)	重	重	Officer	ē,	를	Ē				ļ		
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1b	Sub-total		Щ.	l			_	<u> </u>	0.		0.			0.
		I Section A							0.		0.			0.
	Total (add lines 1b and 1c)	, 000							0.		ō.			0.
2	Total number of individuals (including but r	ot limited to th	nose	liste	ed al	bove	e) wh	ho re	eceived more than \$100	,000 of reportab	ole	<u> </u>		
	compensation from the organization									<u> </u>				0
											,		Yes	No
3	Did the organization list any former officer,			e, ke	y er	nplo	yee	, or	highest compensated e	mployee on				
4	line 1a? If "Yes," complete Schedule J for s								h	.		_ 3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$15									the organization		4		х
5	Did any person listed on line 1a receive or a									dual for services	s			
	rendered to the organization? If "Yes," com											5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	•									npens	ation	from	
	the organization. Report compensation for	the calendar y	ear	endı	ng v	vith	or w	ithir	the organization's tax	year.				
	(A) Name and business	addross	NT/	INC				ł	(B) Description of s	enuces	ر		C) Insatio	
	Traine and business		14()IAI	<u>. </u>	-			Description of s	- VICES	$\vdash \vdash$	Ompe		
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	Total number of independent contractors (i	ncluding but s	not li	mite	d to	tho	ار مو	sted	I shove) who received a	ore than				
_	\$100,000 of compensation from the organi	-			- 10		0		. azoroj milo leccived li	ioio triair	1			

Form 990 (2012)

Part VIII

Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII Revenue excluded from tax under sections 512, 513, or 514 **(B)** (C) Related or Unrelated Total revenue business exempt function revenue revenue Gifts, Grants ilar Amounts 1 a Federated campaigns 1a 61,278. 1b **b** Membership dues 17,972. 1c c Fundraising events 1d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and 3,143 similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ 82,393 h Total. Add lines 1a-1f **Business Code** Program Service Revenue All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 410. 410 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 17,972. of including \$ contributions reported on line 1c) See a 164,120. Part IV, line 18 61,560. b Less: direct expenses 102,560. 102,560. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See 7,715. Part IV, line 19 7,133. b Less: direct expenses 582. 582. c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 15,259. and allowances 4,685. b Less: cost of goods sold 10,574 10,574. Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 12,714. 900099 12,714 OTHER REVENUE 511190 4,900. 4,900. **NEWSHEET** All other revenue 17,614. Total. Add lines 11a-11d 214,133. 12,714. 4,900. 114,126. Total revenue. See instructions.

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). Check if Schedule O contains a response to any question in this Part IX (**D**) Fundraising Do not include amounts reported on lines 6b, Management and Program service Total expenses 7b, 8b, 9b, and 10b of Part VIII expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 13,144. 13,144. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits <u>983.</u> 983. 10 Payroll taxes Fees for services (non-employees): a Management **b** Legal 5,082. 5,822. 740. c Accounting Lobbying e Professional fundraising services. See Part IV, line 17 investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 24,512. 300. 24,212. Advertising and promotion 12 5,027. 5,914. 887. Office expenses 13 8,646. 850. 7,796. Information technology 14 15 Royalties 15,370. 15,370.16 Occupancy 2,186. 2,186. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 23,044. 15,966. 7,078. 19 Conferences, conventions, and meetings 4,608. 4,608. 20 7,821. 18,248, 26,069. Payments to affiliates 21 7,221. 7,221. Depreciation, depletion, and amortization 22 6,199. 6,199. 23 Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 56,289. 62,599. 6,310. SUPPLIES 14,941. 14,941. MEMBERSHIP ENRICHMENT c MISCELLANEOUS 14,085. 9,457. 4,628. 3,082. 3,082. STORAGE All other expenses 105,819. 238,425. 132,606. 0. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here fit following SOP 98-2 (ASC 958-720)

72-6029070 Page 11 JUNIOR LEAUGE OF LAKE CHARLES, INC. Form 990 (2012) Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 464,412. 609,987. 1 Cash - non-interest-bearing 158,966. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 7,485. 10,514. 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete 5 Part II of Schedule L Loans and other 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 instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 318. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 157,837. 10a basis, Complete Part VI of Schedule D 0. 24,338. 133,499. 10b 10c b Less: accumulated depreciation 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 1,275. 495. 15 15 Other assets. See Part IV, line 11 632,138. 645,652. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 22,902. 29.150. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Liabilities Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 25 Schedule D

22,902. 29,150. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 600,208. 607,464. 27 Unrestricted net assets 27 9,028. 9,038. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

645,652. Form 990 (2012)

616,502.

32

33

609,236.

632,138.

32

33

34

-orm	990 (2012)	JUNIOR	LEAUGE	OF	LAKE	CHARLES,	INC.		72-602	29070	Pag	ge 12
Par	t XI Reconciliation	on of Net Ass	sets									_
	Check if Schedu	le O contains a r	esponse to an	y que	stion in thi	s Part XI					-	<u>ப</u>
1 2 3 4 5 6 7 8 9	Total revenue (must eq Total expenses (must eq Revenue less expense: Net assets or fund bala Net unrealized gains (lo Donated services and Investment expenses Prior period adjustmen Other changes in net a Net assets or fund bala	equal Part IX, col s. Subtract line 2 ances at beginnil osses) on investr use of facilities ts ssets or fund ba	umn (A), line 2 from line 1 ng of year (mu nents	5) st equ	chedule O)				1 2 3 4 5 6 7 8 9	238 -24 609	3,4 1,2 9,2	33. 25. 92. 36. 58.
	column (B))								10	616	5,5	02.
Par	t XII Financial Sta		-			- D-+ VII						\Box
	Check if Schedu	ie O contains a r	esponse to an	y que	stion in thi	s Part XII				1	Yes	No
1 2a	Accounting method us If the organization chai Were the organization! If "Yes." check a box b	nged its method s financial stater	of accounting nents compile	from d or re	a prior yea	an independent	accountant	?		2a	·	x
b	separate basis, consol Separate basis Were the organization'	idated basis, or l Conso s financial stater	both. Iidated basis nents audited	by an	Both co	onsolidated and sent accountant?	separate ba	SIS		2b		х
С	If "Yes," check a box be consolidated basis, or Separate basis If "Yes" to line 2a or 2b review, or compilation	both: Conso , does the orgar	lidated basis nization have a	comr	Both control	onsolidated and s assumes respons	separate bas	sis		2c		
	If the organization chain As a result of a federal Act and OMB Circular	award, was the A-133?	organization re	equire	d to under	go an audit or aud	dits as set fo	orth in the S	ingle Audit	3a		х
b	If "Yes," did the organi or audits, explain why i	_	•			-		ergo the requ	uired audit	3b		

Form **990** (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Employer identification number

		JUNIOR	LEAUGE OF LA	KE CH	ARLES	, INC	•		7	2-6029	070	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	.) See inst	tructions.		·		
he organ 1	A church, co A school des A hospital or	nvention of churche cribed in section 17 a cooperative hospi search organization	because it is. (For lines to some some some some some some some som	ches desc hedule E.) described	ribed in se in section	ection 170 170(b)(1)	(b)(1)(A)(i) (A)(iii).		i). Enter	the hospital	l's name,	
5	section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4).											
e												
- •	of supported anization	(ii) EIN	(described on lines 1-9	in col. (i) lis	organization sted in your document?	organizat	(i) of your support?		the on in col. ed in the ?	support		

Part II | 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	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	ınclude any "unusual grants.")					<u> </u>		
2	Tax revenues levied for the organ-	-						
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities					i i		
	furnished by a governmental unit to							
	the organization without charge						_	
4	Total. Add lines 1 through 3			_]			
5	The portion of total contributions							
	by each person (other than a						:	
	governmental unit or publicly				•			
	supported organization) included				}			
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4			1				
	ction B. Total Support		<u> </u>			•		
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
7	Amounts from line 4			1				
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.)			1				
11	Total support. Add lines 7 through 10	,						
12	Gross receipts from related activities,	etc (see instructi	ons)			12		
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)		
	organization, check this box and stop	here						
Sec	ction C. Computation of Publ	ic Support Pe	rcentage					
14	Public support percentage for 2012 (I	ine 6, column (f) d	ivided by line 11,	column (f))		14	%	
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	%	
16a	33 1/3% support test - 2012. If the c	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or i	more, check this be	ox and	
	stop here. The organization qualifies as a publicly supported organization							
t	b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qual		- · · ·					
17a	10% -facts-and-circumstances tes	t - 2012. If the org	janization did not	check a box on lin	e 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 organiza	ation qualifies as a	publicly supporte	d organization			
t	10% -facts-and-circumstances tes	t - 2011. If the org	janızatıon did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the	ne "facts-and-circi	ımstances" test, o	heck this box and	stop here. Explai	n in Part IV how the	e	
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publ	icly supported org	janization	▶ٰ	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box			
					Cab	adula A /Earm 00/	1 AF DOO E71 2012	

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, please complete Part II.)

Se	ction A. Public Support					· · · · · · · · · · · · · · · · · · ·		
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	78,083.	71,853.	77,321.	80,026.	82,393.	389,676.	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in							
	any activity that is related to the organization's tax-exempt purpose	208,298.	194,937.	220,617.	199,033.	171,835.	994,720.	
3	Gross receipts from activities that							
	are not an unrelated trade or bus- iness under section 513							
4	Tax revenues levied for the organ-							
	ization'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	286,381.	266,790.	297,938.	279,059.	254,228.	1,384,396.	
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons						0.	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.	
_	amount on line 13 for the year						0.	
	Add lines 7a and 7b						1,384,396.	
	Public support (Subtract line 7c from line 6)					l	1,304,330.	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
	Amounts from line 6	286,381.	266,790.	297,938.	279,059.	254,228.	1,384,396.	
-	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and income from similar sources	2,500.	1,585.	2,530.	535.	410.	7,560.	
b	Unrelated business taxable income	,						
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b	2,500.	1,585.	2,530.	535.	410.	7,560.	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is							
	regularly carried on	-5,343.	381.	-115.	-1,837.	-5,912.	<u>-12,826.</u>	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	7.	1,222.	1,837.	25,301.	15,259.	43,626.	
13	Total support. (Add lines 9, 10c, 11, and 12)	283,545.	269,978.	302,190.	303,058.	263,985.	1,422,756.	
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3) organız	ation,	
	check this box and stop here	· 0				<u> </u>	▶□_	
	ction C. Computation of Publ					<u> </u>	07 20	
	Public support percentage for 2012 (I	• • •	•	olumn (f))		15	97.30 % 98.79 %	
	Public support percentage from 2011					16	98.79 %	
	ction D. Computation of Inves			o 10 ookuma (6)		47	.53 %	
		come percentage from 2011 Schedule A, Part III, line 17 ort tests - 2012. 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 a	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	$\triangleright X$	
b	33 1/3% support tests - 2011. If the	_					ina 🛌 🦳	
20	line 18 is not more than 33 1/3%, che		-	*		-		
<u> 20</u>	Private foundation. If the organization	n did not check a	DOX OIL IIIIE 14, 198	a, or rap, check th	no DON AND SEE INS	in uctions	<u></u>	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Employer identification number Name of the organization JUNIOR LEAUGE OF LAKE CHARLES, INC. 72-6029070 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) 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 _ Yes 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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? _ Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 - (i) Revenues included in Form 990, Part Vill, line 1
 - (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- Assets included in Form 990, Part X

conservation easements

	Ψ		
, provid	e	 _	

		LEAUGE OF					Ciil		29070	
Pai	t III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	at are a si	gnificant	use of its	collection r	tems
	(check all that apply):									
а	Public exhibition	•			hange progr	ams				
b	Scholarly research	•	• []	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co							ose in Par	t XIII.	
5	During the year, did the organization solicit o					er sımılar	assets		7	
	to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	s or other as	ssets not	ıncluded		٦	
	on Form 990, Part X?							L_	」Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:						
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?					L	Yes	Щ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanati	on has been	provided in	Part XIII				<u> </u>
Par	t V Endowment Funds. Complete	f the organization ai	nswered	"Yes" to Fo	rm 990, Part	IV, line 1	0.			
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (d) Three y	ears back	(e) Four ye	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end balan	ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
	Permanent endowment	%								
	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%.								
За	Are there endowment funds not in the posse		zation the	at are held a	ind administe	ered for th	ne organi	zation		
	by:	-					-		Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required	on Sche	dule R?					3b	
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipm									
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Book v	alue
		basis (invest			(other)		reciation			
1a	Land									
	Buildings									
	Leasehold improvements									
d					676.			76.		0.
	Other			15	7,161.	1	132,8	23.		,338.
	l. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Par	t X, colui	mn (B), line :	10(c))			ightharpoons	24	,338.

Schedule D (Form 990) 2012

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 2. FIN 48 (ASC 740) Footnote. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

(11)

	dule D (Form 990) 2012 JUNIOR LEAUGE OF LAKE CHA			age 4
Par	t XI Reconciliation of Revenue per Audited Financial Stater	nents With Reve	nue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	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:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
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	
Par	t XII Reconciliation of Expenses per Audited Financial State	ments With Expo	enses per Return	
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:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
	t XIII Supplemental Information			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			Part ——
	<u> </u>			
			-	
	<u> </u>	- 		

Schedule D (Form 990) 2012

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open To Public Inspection

Name of the organization JUNIOR	LEAUGE OF LAKE CHA	RLE	s,	INC.		72-6029	ntification number 0 7 0
Part I Fundraising Activities required to complete this par	Complete if the organization answet.	ered "Y	'es" to	Form 990, Part IV, III	ne 17	7 Form 990-EZ	filers are not
Indicate whether the organization rais	e Solicitat f Solicitat g Special or oral agreement with any individual cart VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover tising ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contribe	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (o	Amount paid or retained by) fundraiser ed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			•	
- - 10							
· · · · · · · · · · · · · · · · · · ·							
							<u> </u>
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	outions	or has been notified	l it is	exempt from re	egistration
		-			_		
					•		
						· · · · · · · · · · · · · · · · · · ·	

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (b) Event #2 (a) Event #1 (d) Total events NONE HOLIDAY GOLF (add col. (a) through TOURNAMENT MARKET col. (c)) (total number) (event type) (event type) 16,990. 182,092. 165,102. Gross receipts 6,930 11,042 17,972. 2 Less: Contributions 164,120. 10,060. 154,060. 3 Gross income (line 1 minus line 2) 1,325. 1,325. 4 Cash prizes 3,424. 3,424. Noncash prizes 1,200. 26,073. 24,873. Rent/facility costs 1,898. 161. 2,059. 7 Food and beverages 2,150. 2,150. 8 Entertainment 26,529. 24,973. 1,556. Other direct expenses 61,560 10 Direct expense summary. Add lines 4 through 9 in column (d) 102,560. 11 Net income summary Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col (c)) 7,715. 7,715. Gross revenue 6,935. 6,935. 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs 198. 198. Other direct expenses Yes % Yes % Yes X No 6 Volunteer labor 7,133 7 Direct expense summary. Add lines 2 through 5 in column (d) 582. 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: LA X Yes a is the organization licensed to operate gaming activities in each of these states? ___ No **b** If "No," explain: Yes X No 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: _

Schedule G (Form 990 or 990-EZ) 2012 JUNIOR LEAUGE OF LAKE CHARLES, INC.

72-6029070 Page 2

<u>Sch</u>	edule G (Form 990 or 990 EZ) 2012 JUNIOR LEAUGE OF LAKE CHARLES, INC. /2-6	0029070	
	Does the organization operate gaming activities with nonmembers?	Yes	X No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
_	to administer charitable gaming?	Yes	X No
13	Indicate the percentage of gaming activity operated in:	1 1	
	a The organization's facility	13a	%
	o An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and resords.		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes Yes	X No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \$\bigs\\$		
c	If "Yes," enter name and address of the third party:		
	Name >		
	Address ►		
			· · · · · · · · · · · · · · · · · · ·
16	Gaming manager information.		
	Name	·	
	Gaming manager compensation > \$		
	Description of services provided		
		-	
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
•	retain the state gaming license?	Yes	X No
	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
L	organization's own exempt activities during the tax year \$		
Б	art IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v) and	l Part III
1 0	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information		
	intes 9, 90, 100, 100, 100, 100, and 170, as applicable. Also complete this part to provide any additional information	ir loce mana	0000137.
_			-
_			

SCHEDULE 0

(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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012
Open to Püblic Inspection

JUNIOR LEAUGE OF LAKE CHARLES, INC.	72-6029070								
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M									
EDUCATIONAL AND CHARITABLE.									
FORM 990, PART VI, SECTION A, LINE 6: THREE CLASSES OF MEMBERS:									
PROVISIONAL, ACTIVE AND SUSTAINING.									
FORM 990, PART VI, SECTION A, LINE 7A: ACTIVE MEMBERS VOT									
SLATE EACH YEAR.									
FORM 990, PART VI, SECTION A, LINE 7B: ALL EXECUTIVE DECI	SIONS ARE VOTED								
OR RATIFIED BY THE ACTIVE MEMBERSHIP.									
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 DISTRIBUT	ED TO EXECUTIVE								
COMMITTEE AND APPROVED AT MONTHLY MEETING.									
FORM 990, PART VI, SECTION C, LINE 19: ORGANIZATION HAS W	EBSITE AND								
PUBLISHES ANNUAL REPORT DISTRIBUTED TO THE COMMUNITY.									