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SEE STATEMENT 2 - REQUEST FOR ABATEMENT

Return of Private Foundation

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Nonexempt Charitable Trust **Treated as a Private Foundation**

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052 2008

En- :	alce	 	r honinninn		, and ending	7-1	
		dar year 2008, or tax yea	nitial return	Final return	Amended return	Address change	Name change
		None of foundation	muai retuili L	rındı iğtuili 🔛	VIUGIOGO IAINIII	A Employer Identification	
	the l	no				Ly ruihinkei ineuruirarini	
) (1)	abel. orwis	DR & MRS	. R. FASER T	RIPLETT FOUN	DATION	72-1361246	I
	erwis print	·	O box number if mail is not do		Room/suite	B Telephone number	
	type	1	ADISON PLAZA	•		601-321-76	22
	Spec			7 50111 1500	!	C If exemption application is p	
Insti	uctio	ns. MADISON, N				D 1. Foreign organizations	
<u> </u>	hack		X Section 501(c)(3) ex	vemnt nrivate foundation		Foreign organizations me check here and attach co	eting the 85% test,
7	_	ction 4947(a)(1) nonexem	· · · · · · · · · · · · · · · · · · ·	Other taxable private found	ation		
		rket value of all assets at 6			Accrual	E if private foundation sta under section 507(b)(1)	
		Part II, col. (c), line 16)	·	ther (specify)	Accidai	1	
("				mn (d) must be on cash	basis.)	F if the foundation is in a under section 507(b)(1)	
	rt I	Analysis of Revenue an	nd Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	4.3.1 .	(The total of amounts in colu necessarily equal the amoun	mns (b), (c), and (d) may not	expenses per books	income	income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grant	·	25,000.		N/A	,
	2	Check if the foundation					
	3	Interest on savings and tempor		250.	250.		STATEMENT 1
	4	Dividends and interest fro	om securities		·		
		Gross rents	, , , , , , , , , , , , , , , , , ,				
		Net rental Income or (loss)			***		
	_	Net gain or (loss) from sale of	secests not on line 10				
Revenue	b	Gross sales price for all assets on line 6a	assess not on time to				
	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain				0.		
æ							
	q	Income modifications					
	10a	Gross sales less returns and allowances					
		Less Cost of goods sold					
		Gross profit or (loss)	L				
	11	Other income					
	12	Total. Add lines 1 throug	ıh 11	25,250.	250.		
	13	Compensation of officers, dire		0.	0.		0.
	14	Other employee salaries a					
	15	Pension plans, employee	•				
es		Legal fees			·		
benses		Accounting fees		-			
EXP		Other professional fees			=OFN/ED		
Š		Interest			RECEIVED	0	
rati	18	Taxes		\ \r		S	
and Administrative	19	Depreciation and depletio	on	133	OCT 0 4 2010	80-9	
Ē	20	Occupancy		3083	00.	属	
Ad	21	Travel, conferences, and	meetings		- ODEAL LIT		
P L	22	Printing and publications	-		OGDEN, UT		
JĢ.	23	Other expenses					
atir		Total operating and adm	ninistrative				
Operating		expenses. Add lines 13 t		0.	0.		0.
0	25	Contributions, gifts, gran	its paid				
	26	Total expenses and disb	oursements.				
		Add lines 24 and 25		0.	0.		0.
	27	Subtract line 26 from line	e 12				
	a	Excess of revenue over expen	nses and disbursements	25,250.			
	b	Net investment income ((if negative, enter -0-)		250.		
	C	Adjusted net income (if n				N/A	
		LHA For Privacy Act a	and Paperwork Reduction	Act Notice, see the instruc	tions.		Form 990-PF (2008)

823501 01-02-09

07010930 781155 852825-PF

2008.06000 DR. & MRS. R. FASER TRIPLET 85282511

DR. & MRS. R. FASER TRIPLETT FOUNDATION

Par	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of ye	ar
Par	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	! Savings and temporary cash investments		25,250.	25,250.
3	Accounts receivable ►			
i	Less allowance for doubtful accounts			
4	Pledges receivable			
	Less allowance for doubtful accounts			
5				
e	Receivables due from officers, directors, trustees, and other			-
	disqualified persons			
7	Other notes and loans receivable			
	Less allowance for doubtful accounts ▶	1		
ع ا رب	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
¥ 1ſ	Da Investments - U.S. and state government obligations			
"	b Investments - corporate stock			
	c Investments - corporate bonds			
	Investments - land, buildings, and equipment basis			·····
' '		1		
,,	Less accumulated depreciation ! Investments - mortgage loans			
Ι.				
13				
'4	Land, buildings, and equipment basis	1		
	Less accumulated depreciation			
18	of Other assets (describe ►)			
		0.	25,250.	25,250.
\neg	Total assets (to be completed by all filers)	0.	23,230.	23,230.
	7 Accounts payable and accrued expenses			
18				
S 15				
Liabilities 51	, , , , , , , , , , , , , , , , , , , ,			
[편] 21		ļ		
- 22	2 Other liabilities (describe)			
23	3 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
ς,	and complete lines 24 through 26 and lines 30 and 31.	:		
S 24				
[25				
Assets or Fund Balance				
Š	Foundations that do not follow SFAS 117, check here			
L.	and complete lines 27 through 31.			
St 27		0.	0.	
g 28		0.	0.	
Ž 29	Retained earnings, accumulated income, endowment, or other funds	0.	25,250.	
30 S	Total net assets or fund balances	0.	25,250.	
		_		
31	Total liabilities and net assets/fund balances	0.	25,250.	
Par	4 III Analysis of Changes in Net Assets or Fund E	Balances		
1 To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		
	ust agree with end-of-year figure reported on prior year's return)		1	0.
	ter amount from Part I, line 27a		2	25,250.
	ner increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3	-	4	25,250.
	creases not included in line 2 (itemize)		5	0.
	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	25,250.

2 Total of line 1, column (d) 0. Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 3. 7 Add lines 5 and 6 7 0. Enter qualifying distributions from Part XII, line 4 8

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate

See the Part VI instructions 823521 01-02-09

	990-PF (2008) DR. & MRS. R. FASER TRIPLETT FOUNDATION 72-136 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4 ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			·····
	Date of ruling letter. (attach copy of ruling letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			5.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			5.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on Investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5.
6	Credits/Payments			
	2008 estimated tax payments and 2007 overpayment credited to 2008			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d 5			^
	Total credits and payments Add lines 6a through 6d			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 3 > 9		-	5.
				.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2009 estimated tax Refunded 10			
	rt VII-A Statements Regarding Activities			
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	T	Yes	No
	any political campaign?	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	10	Ì	Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ O • (2) On foundation managers ► \$ O •			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers ▶ \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	ļ	X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			v
_	remain in the governing instrument?	6	7	<u>X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
0-	If "Yes," complete Part II, col. (c), and Part XV			
82	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE			
	If the answer is "Ves" to line 7, has the foundation furnished a copy of Form 000-DE to the Attorney Congret (or designate)			
0	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
۵	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	on		
3	year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV	g		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	ļ .	X

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Form 990-PF (2008) DR. & MRS. R. FASER TRIP			72-13612	246	Page 6	
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be F	tequirea (contin	ued)			
 During the year did the foundation pay or incur any amount to Carry on propaganda, or otherwise attempt to influence legislation (section 	4945(e)\2		s X No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly,						
any voter registration drive?		s X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes	Ye	s X No				
(4) Provide a grant to an organization other than a charitable, etc., organization						
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
the prevention of cruelty to children or animals?		Ye	es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	37/3			
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	5b		
Organizations relying on a current notice regarding disaster assistance check h						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			🗀 🗤 .			
expenditure responsibility for the grant?		I/A YE	es L No			
If "Yes," attach the statement required by Regulations section 53 4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	• •		į			
a personal benefit contract?	Jay premiums on	□ v _e	s X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		,3 (22) 110	6b	X	
If you answered "Yes" to 6b, also file Form 8870.			F			
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction?	Y6	s X No			
b If yes, did the foundation receive any proceeds or have any net income attributa	able to the transaction?		N/A	7b		
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	/			
raiu Employees, and Contractors		<u> </u>				
List all officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	10	Expense	
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acc	count, other	
	to position	enter'-0-)	compensation	<u> </u>	llowances	
SEE STATEMENT 5		0.	ο.		0.	
				ļ		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		i		
	(b) Title, and average		(d) Contributions to employee benefit plans	(e	Expense	
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	1 400	count, other llowances	
NONE			00110001			
	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
				1		
			<u> </u>			
Total number of other employees paid over \$50,000		I	•	11	0	
			Form	990-	PF (2008)	

0.

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations mus	t complete this part. Foreign fou	ındatıons, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, e	tc , purposes		
а	Average monthly fair market value of securities	•	1a	0.
b	Average of monthly cash balances		1b	21,042.
C	Fair market value of all other assets		10	
d	Total (add lines 1a, b, and c)		1d	21,042.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	9	.	
2	Acquisition indebtedness applicable to line 1 assets		7 2	0.
3	Subtract line 2 from line 1d		3	21,042.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, se	e instructions)	4	316.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pa	irt V, line 4	5	20,726.
6	Minimum investment return. Enter 5% of line 5		6	1,036.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (foreign organizations check here and do not complete this part)	j)(5) private operating foundations a	nd certain	· · · · · · · · · · · · · · · · · · ·
1	Minimum investment return from Part X, line 6		1	1,036.
2a	Tax on investment income for 2008 from Part VI, line 5	5.		-
b	Income tax for 2008 (This does not include the tax from Part VI)]	
C	Add lines 2a and 2b		2c	5.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	1,031.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	1,031.
6	Deduction from distributable amount (see instructions)		6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XII	, line 1	7_	1,031.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	es		· · · · · · · · · · · · · · · · · · ·
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		1a	0.
b	Program-related investments - total from Part IX-B	-	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc , purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and F	Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ent		
	income Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	0.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when	calculating whether the foundation	qualifies for the	section

4940(e) reduction of tax in those years

Part XIII	Undistributed	Income	(see instructions)	
-----------	---------------	--------	--------------------	--

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI,		······································	-	
line 7				1,031.
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only			0.	
b Total for prior years				
		0.		
3 Excess distributions carryover, if any, to 2008.				
a From 2003				
b From 2004				
c From 2005				
d From 2006				
e From 2007				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2008 from				
Part XII, line 4 ► \$ 0 .			·	
a Applied to 2007, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2008 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	······································			
6 Enter the net total of each column as indicated below				
3 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		_		
amount - see instructions	······	0.		
e Undistributed income for 2007. Subtract line				
4a from line 2a Taxable amount - see instr	***************************************		0.	
f Undistributed income for 2008. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2009				1,031.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	•			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009.	•			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2004				
b Excess from 2005				
c Excess from 2006				
d Excess from 2007				
e Excess from 2008		<u> </u>		Form QQD_DE (2008)

	oundations (see in			<u> </u>	01240 Page II
Part XIV Private Operating F 1 a If the foundation has received a ruling of				N/A	
foundation, and the ruling is effective fo			' .		
•		•	Lun costion	4942(j)(3) or 49	942(j)(5)
b Check box to indicate whether the found2 a Enter the lesser of the adjusted net	Tax year	Ing tourioation described	Prior 3 years	1 4342([](3) 01] 43	42(1)(3)
income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
investment return from Part X for	(2) 2000	(2) 200.	(0, 2000	(0) -000	(0) : 0:2:
each year listed b 85% of line 2a				-	
				-	
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
<u> </u>	•				
exempt activities	· · · · · · · · · · · · · · · · · · ·				
e Qualifying distributions made directly for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
, ,					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter	·				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	j				
Part XV Supplementary Info			\prime if the foundation	n had \$5,000 or mo	ore in assets
at any time during t		instructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation where year (but only if they have contributed remains a second of the foundation where is a second of the foundation where it is a se			ntributions received by the	e foundation before the clos	se of any tax
, ,	note than \$5,000) (See :	5601011 307 (0)(2))			
NONE					
 b List any managers of the foundation who other entity) of which the foundation ha 			i (or an equally large porti	on of the ownership of a pa	artnership or
NONE	ou 1070 or grouter intere				
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarchin etc. [Programe:		
Check here X if the foundation of				not accent unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	·				· · · · · · · · · · · · · · · · · · ·
a The name, address, and telephone name	iour or the person to who	an applications should b	0 400100004		
b The form in which applications should t	oe submitted and informa	ation and materials they	should include		
c Any submission deadlines				<u> </u>	
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable field	s, kinds of institutions, or	other factors	
,	, ggpe	,	,		
922601 01 02 00					Form 000 DE (0000)

Grants and Contributions Paid During th	if recipient is an individual	- Jinoil		 -
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Paid during the year	or substantial contributor	recipient		··
Tad doining the you				
NONE				
5.750.2				
		!		
Total			▶ 3a	
Approved for future payment				
NONE				
Total			▶ 3b	

	Unrelated t	es pusiness income	Evaludad	by section 512, 513, or 514	
er gross amounts unless otherwise indicated	(a)	(b)	(c) Exclu-	(d)	(e) Related or exemp
Program service revenue	Business code	Amount	sion	Amount	function income
3	- 5555				
1					
)	1				
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash			1 1 1	250	
nvestments			14	250.	
Dividends and interest from securities					
Net rental income or (loss) from real estate Debt-financed property			-		
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
han inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
i	_				
)					
<u> </u>					
3 Subtotal Add columns (b), (d), and (e)	_).	250.	
Fotal. Add line 12, columns (b), (d), and (e)	<u> </u>		, • []	13	2
0.4 1. 1.44 mio 12, 00.41)				

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)	
	* · · · · · · · · · · · · · · · · · · ·	
200001		
823621 01-02-09	Form 990-PF	(2008)

			MRS. R	. FASER	TRIPLETT FOUN	NDATION	<u>72-1361246</u>	P	age 13
Pŧ	ert X	/II Information Re Exempt Organ		ransfers To	and Transactions ar	nd Relationships Wit			
1	Did th	e organization directly or indi	rectly engage in	any of the follow	ing with any other organization	described in section 501(c) o	f	Yes	No
		·			527, relating to political organiz	rations?			
а		fers from the reporting found	ation to a nonch	arıtable exempt o	rganization of				
	(1) (<u>1a(1)</u>		X
		ther assets					1a(2)		X
þ		transactions							
		ales of assets to a noncharita	. •				1b(1)		X
		urchases of assets from a no		npt organization			1b(2)		X
		lental of facilities, equipment,					1b(3)		X
		leimbursement arrangements	į				. 1b(4)		X
		oans or loan guarantees	mbamba ar fua	drajaja a aljajtot	1000	•	1b(5)		X
		Performance of services or me ng of facilities, equipment, ma		=			1b(6) 1c		$\frac{1}{X}$
C		• • • • •	•		mployees nedule Column (b) should alwa	ave chave the four market value		otc	<u> </u>
u		•		-	ved less than fair market value	-	-	σι 5 ,	
		on (d) the value of the goods,				in any transaction or snaring	arrangement, snow in		
(a) ı	ine no	(b) Amount involved			le exempt organization	(d) Description of transfers, t	ransactions, and sharing ar	rangem	ents
\-/-		(-)		N/A		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			<u> </u>						
						-			
			<u> </u>						
							 		
			 						
			I						
2a					ie or more tax-exempt organiza	ations described			-
		ction 501(c) of the Code (othe		01(c)(3)) or in se	ction 527?		Yes	LA	□ No
	It "Ye	s," complete the following sch (a) Name of org			(b) Type of organization	(e) Descripti	on of relationship		
		N/A	yamzation		(b) Type of Organization	(e) Descripti	on or relationship		
		II/ A							
								_	
_			•						
\top					companying schedules and statemen		je and belief, it is true, corre	ct,	
	and cor	pplete Declaration of preparer (oth	er than taxpayer or	fiduciary) is based o	n all information of which preparer h	as any knowledge			
		Moder 1. hyto 1	~		1,9/30/10	Directer		_	
ere	S	gnature of officer or trustee		7	Date	Title			
Sign Here	(5	Preparer's	11111	1. 1.1	Da	colf_	Preparer's identify	ying nui	mber
Sig	er's Zer's	signature /	111111	My / /		3/30/10 employed ►			
	Par e o a	Titili Stialie (or yours	ER, RAI	NE, KNI					
	Paid Preparer's Use Only	if self-employed). 1052	,		NY PARKWAY, SU	JITE 100			
\perp		address, and ZIP code RIDG	ELAND,	MS 3915	7	Phone no	(601)605	<u>-07</u>	22

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

Employer identification number Name of the organization DR. & MRS. R. FASER TRIPLETT FOUNDATION 72-1361246 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.) General Rule [X] For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II. 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

DR. & MRS. R. FASER TRIPLETT FOUNDATION

72-1361246

Part I	Contributors (see instructions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
1	DR. R. FASER TRIPLETT 210 WINGED FOOT CIRCLE JACKSON, MS 39216	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		 \$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)		

FORM 990-PF	INTEREST	ON SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE						AMOUNT		
CHARLES SCHWAB INSTITUTIONAL					250.			
TOTAL TO FOR	M 990-PF,	PART I, L	INE 3	, COLUMN A			25	50.

FORM 990-PF	INTERE	ST AND PENAL	LTIES		STAT	EMENT	3	
TAX DUE FROM FORM 99 LATE PAYMENT INTER SECTION 6651 LATE SECTION 6652 LATE	REST FILING PENA	LTY				1,2	5. 1. 5. 63.	
TOTAL AMOUNT DUE						1,2	74.	
FORM 990-PF LATE PAYMENT INTEREST						STATEMENT		
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTER	EST	
TAX DUE LATE FILING PENALTY DATE FILED	05/15/09 05/15/09 10/15/10	5. 5.	5. 10. 11.				1.	
TOTAL LATE PAYMENT II	NTEREST						1.	

	T VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
RODNEY F. TRIPLETT, JR. 124 ONE MADISON PLAZA, SUITE 1500 MADISON, MS 39110	DIRECTOR 0.00	0.	0.	0.
DIANE T. HOLLOWAY 101 OAKHURST TRAIL RIDGELAND, MS 39157	DIRECTOR 0.00	0.	0.	0.
SUZAN T. FULLER 3691 OLD CANTON ROAD JACKSON, MS 39216	DIRECTOR 0.00	0.	0.	0.
JACQUELINE T. WALKER 1516 ROBERTS DRIVE JACKSON, MS 39211	DIRECTOR 0.00	0.	0.	0.
LOU ANN T. WOIDTKE 3986 BERKLEY DRIVE JACKSON, MS 39211	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.