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**Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation****2009**Department of the Treasury
Internal Revenue Service

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

For calendar year 2009, or tax year beginning , 2009, and ending ,

G Check all that apply ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the
IRS label
Otherwise,
print
or type.
See Specific
Instructions.

L.V. THOMPSON FAMILY FOUNDATION, INC.
5015 E. HILLSBOROUGH AVE.
TAMPA, FL 33610

A Employer identification number

20-2015225

B Telephone number (see the instructions)

813-248-3456

C If exemption application is pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

H Check type of organization ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year
(from Part II, column (c), line 16)

\$ 3,623,864.

J Accounting method ☐ Cash ☒ Accrual
☐ Other (specify) _____

(Part I, column (d) must be on cash basis)

Part I Analysis of Revenue and

Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

SCANNED JUL 21 2010

REVENUE

1 Contributions, gifts, grants, etc., received (att sch)

2 Ck ☒ if the foundn is not req to att Sch B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5a Gross rents

b Net rental income or (loss)

6a Net gain/(loss) from sale of assets not on line 10

b Gross sales price for all assets on line 6a 828,473.

7 Capital gain net income (from Part IV, line 2)

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less Cost of goods sold

c Gross profit/(loss) (att sch)

11 Other income (attach schedule)

12 Total. Add lines 1 through 11

13 Compensation of officers, directors, trustees, etc

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach sch) SEE ST 1

c Other prof fees (attach sch) SEE ST 2

17 Interest

18 Taxes (attach schedule)(see instr) SEE STM 3

19 Depreciation (attach sch) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule)

24 Total operating and administrative expenses. Add lines 13 through 23

25 Contributions, gifts, grants paid STMT 4

26 Total expenses and disbursements. Add lines 24 and 25

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

64 17

Part II Balance Sheets		Beginning of year	End of year	
			(a) Book Value	(b) Book Value
ASSETS	1 Cash — non-interest-bearing			
	2 Savings and temporary cash investments	185,163.	312,797.	312,797.
	3 Accounts receivable			
	Less allowance for doubtful accounts			
	4 Pledges receivable			
	Less allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U S and state government obligations (attach schedule)	700,871.	200,373.	209,524.
	b Investments — corporate stock (attach schedule)	2,595,067.	2,882,110.	2,309,105.
	c Investments — corporate bonds (attach schedule)	251,463.	251,821.	263,176.
LIABILITIES	11 Investments — land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)	582,473.	500,000.	529,262.
	14 Land, buildings, and equipment basis			
	Less: accumulated depreciation (attach schedule)			
	15 Other assets (describe)			
	16 Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	4,315,037.	4,147,101.	3,623,864.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons	942.	942.	
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	942.	942.	
FUND ASSETS OR BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ☒			
	24 Unrestricted	4,314,095.	4,146,159.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ☐			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see the instructions)	4,314,095.	4,146,159.	
	31 Total liabilities and net assets/fund balances (see the instructions)	4,315,037.	4,147,101.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	4,314,095.
2	Enter amount from Part I, line 27a	2	-94,773.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	4,219,322.
5	Decreases not included in line 2 (itemize) <u>SEE STATEMENT 5</u>	5	73,163.
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	4,146,159.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a SEE STATEMENT 6				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	17,519.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8		3	34,363.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

N/A

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☐ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 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.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter 'N/A' on line 1. Date of ruling or determination letter _____ (attach copy of letter if necessary - see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b		1	2,345.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0.
3 Add lines 1 and 2		3	2,345.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	2,345.
6 Credits/Payments			
a 2009 estimated tax prmts and 2008 overpayment credited to 2009	6a	1,884.	
b Exempt foreign organizations – tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	400.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7	2,284.	
8 Enter any penalty for underpayment of estimated tax Check here ☒ if Form 2220 is attached	8	6.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	67.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be Credited to 2010 estimated tax	11		
	Refunded		

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>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</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e 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? <i>If 'Yes,' attach a detailed description of the activities</i>		X
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? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
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 remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) FL		
b 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? <i>If 'No,' attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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Form 990-PF (2009)

Part VII-A Statements Regarding Activities Continued

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X	
14	The books are in care of <u>LESLIE V. THOMPSON</u> Telephone no <u>813-248-3456</u> Located at <u>5015 E. HILLSBOROUGH AVE., TAMPA, FL</u> ZIP + 4 <u>33610</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <u>N/A</u> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u> <u>N/A</u>			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
1 a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) ☐ Yes ☒ No		
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here ☐	1 b	N/A
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1 c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? ☐ Yes ☒ No If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see the instructions)	2 b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3 b	N/A
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4 b	X

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Form 990-PF (2009)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to**(1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?☐ Yes ☒ No**(2)** Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?☐ Yes ☒ No**(3)** Provide a grant to an individual for travel, study, or other similar purposes?☐ Yes ☒ No**(4)** Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)☐ Yes ☒ No**(5)** Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?☐ Yes ☒ No**b** If any answer is 'Yes' to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?N/A ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b X

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 7		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services – (see instructions). If none, enter 'NONE'.

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0.

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Form 990-PF (2009)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	3,616,980.
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,616,980.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,616,980.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	54,255.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,562,725.
6	Minimum investment return. Enter 5% of line 5	6	178,136.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	178,136.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	2,345.
b	Income tax for 2009 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	2,345.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	175,791.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	175,791.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	175,791.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	212,000.
b	Program-related investments — total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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 Part XIII, line 4	4	212,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	212,000.

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 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				175,791.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			211,238.	
b Total for prior years: 20____, 20____, 20____		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 212,000.				
a Applied to 2008, but not more than line 2a			211,238.	
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 2009 distributable amount				762.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a 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 2008. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				175,029.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

- 1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

- b**
- Check box to indicate whether the foundation is a private operating foundation described in section
- ☐
- 4942(j)(3) or
- ☐
- 4942(j)(5)

- 2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

[illegible]

- 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 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(i)(3)(B)(iii)**

- (3) Largest amount of support from an exempt organization

- (4) Gross investment income**

Part XV **Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year – see instructions.)**

1 Information Regarding Foundation Managers:

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

LESLIE V. THOMPSON

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number of the person to whom applications should be addressed

SEE STATEMENT 8

- b** The form in which applications should be submitted and information and materials they should include

SEE STATEMENT FOR LINE 2A

- c Any submission deadlines:

SEE STATEMENT FOR LINE 2A

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE STATEMENT FOR LINE 2A

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Total				3a
b Approved for future payment				
Total				3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					105,973.
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					17,519.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)					123,492.
13 Total. Add line 12, columns (b), (d), and (e)				13	123,492.

(See worksheet in the instructions for line 13 to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

2009

FEDERAL STATEMENTS

PAGE 1

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02.25PM

STATEMENT 1
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREP FEES	\$ 2,127.	\$ 2,127.		
TOTAL	<u>\$ 2,127.</u>	<u>\$ 2,127.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

STATEMENT 2
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SERVICE CHARGES	\$ 50.	\$ 50.		
TOTAL	<u>\$ 50.</u>	<u>\$ 50.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

STATEMENT 3
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAXES	\$ 1,884.	\$ 1,884.		
FEDERAL TAXES PAID ON BEHALF OF FDN	1,956.	1,956.		
FOREIGN TAXES PAID ON INVESTMENT INCOME	218.	218.		
TOTAL	<u>\$ 4,058.</u>	<u>\$ 4,058.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

STATEMENT 4
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:	NURSING SCHOLARSHIP PROGR	
DONEE'S NAME:	ST. JOSEPH'S HOSPITAL	
DONEE'S ADDRESS:	4600 N. HABANA AVE.	
	TAMPA, FL 33614	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	501 (C) (3)	
AMOUNT GIVEN:		\$ 20,000.

CLASS OF ACTIVITY:	SCHOOL
DONEE'S NAME:	ST. JOSEPH'S INDIAN SCHOOL
DONEE'S ADDRESS:	P.O. BOX 100
	CHAMBERLAIN, SD 57325
RELATIONSHIP OF DONEE:	NONE

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02.25PM

**STATEMENT 4 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS**

ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
AMOUNT GIVEN: \$ 5,000.

CLASS OF ACTIVITY: CHILDREN'S HOME
DONEE'S NAME: FLORIDA UNITED METHODIST CHILD
DONEE'S ADDRESS: 51 MAIN STREET
ENTERPRISE, FL 32725

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
AMOUNT GIVEN: 10,000.

CLASS OF ACTIVITY: SCHOOL SUPPORT
DONEE'S NAME: HILLSBOROUGH EDUCATION FOUNDAT
DONEE'S ADDRESS: 2010 E. HILLSBOROUGH AVE.
TAMPA, FL 33610

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
AMOUNT GIVEN: 6,000.

CLASS OF ACTIVITY: CHILDREN'S CHARITY
DONEE'S NAME: GIVE KIDS THE WORLD
DONEE'S ADDRESS: 210 SOUTH BASS RD.
KISSIMMEE, FL 34746

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
AMOUNT GIVEN: 12,200.

CLASS OF ACTIVITY: RESEARCH AND CURE FOUNDAT
DONEE'S NAME: THE PEDIATRIC CANCER FOUNDATION
DONEE'S ADDRESS: 5550 WEST EXECUTIVE DRIVE, STE 300
TAMPA, FL 33609

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: CHILDREN WITH CLEFT
DONEE'S NAME: THE SMILE TRAIN
DONEE'S ADDRESS: 245 5TH AVE. STE. 2201
NEW YORK, NY 10016

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: HOSPITAL
DONEE'S NAME: TAMPA GENERAL HOSPITAL
DONEE'S ADDRESS: P.O. BOX 1289
TAMPA, FL 33601

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: THE LOWRY PARK ZOO
DONEE'S ADDRESS: 1101 WEST SLIGH AVE.
TAMPA, FL 33604

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02 25PM

**STATEMENT 4 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 10,000.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: PEPIN ACADEMY OF TAMPA
DONEE'S ADDRESS: 3916 E HILLSBOROUGH AVE
TAMPA, FL 33610

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: CHARITY FOR CHILDREN WITH
DONEE'S NAME: ROTARY CAMP OF FLORIDA
DONEE'S ADDRESS: 1915 CAMP FLORIDA ROAD
BRANDON, FL 33510

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: EDUCATIONAL CHARITY
DONEE'S NAME: MACDONALD TRAINING CENTER INC
DONEE'S ADDRESS: 5420 W CYPRESS ST
TAMPA, FL 33607

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: MEDICAL CHARITY FOR UNDER
DONEE'S NAME: TAMPA LIGHTHOUSE FOR THE BLIND
DONEE'S ADDRESS: 1106 W PLATT ST
TAMPA, FL 33606

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: CHARITY FOR UNDERPRIVELIG
DONEE'S NAME: MAYORS FEED THE HUNGRY PROGRAM
DONEE'S ADDRESS: P.O. BOX 1992
SARASOTA, FL 34230

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: COMMUNITY WELFARE
DONEE'S NAME: GUARDIAN AD LITEM
DONEE'S ADDRESS: 2071 RINGLING BOULEVARD
SARASOTA, FL 34237

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: COMMUNITY WELFARE
DONEE'S NAME: PROPELLER CLUB - PORT OF TAMPA, INC.
DONEE'S ADDRESS: 1101 CHANNELSIDE DR
TAMPA, FL 33602

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02 25PM

**STATEMENT 4 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 2,700.

CLASS OF ACTIVITY: EDUCATIONAL CHARITY
DONEE'S NAME: USF ATHLETICS
DONEE'S ADDRESS: 4202 E FOWLER AVE
TAMPA, FL 33620RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: COMMUNITY WELFARE
DONEE'S NAME: TAMPA BAY PERFORMING ARTS CENTER
DONEE'S ADDRESS: 1010 N W C MACINNES PL
TAMPA, FL 33602RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 200.

CLASS OF ACTIVITY: ANIMAL CHARITY
DONEE'S NAME: COASTAL CONSERVATION ASSOCIATION
DONEE'S ADDRESS: P.O. BOX 568886
ORLANDO, FL 32856RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 2,750.

CLASS OF ACTIVITY: PROVIDES PALLIATIVE CARE
DONEE'S NAME: LIFEPAATH HOSPICE
DONEE'S ADDRESS: 12973 TELECOM PARKWAY, STE 100
TEMPLE TERRACE, FL 33637RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: WILDLIFE CONSERVATION
DONEE'S NAME: THE FLORIDA AQUARIUM
DONEE'S ADDRESS: 701 CHANNELSIDE DRIVE
TAMPA, FL 33602RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: REHABILITATES YOUTH
DONEE'S NAME: AMI KIDS PINELLAS
DONEE'S ADDRESS: 3101 PASS A GRILLE WAY
ST PETE BEACH, FL 33706RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: PROVIDES PALLIATIVE CARE
DONEE'S NAME: HPH HOSPICE FOUNDATION
DONEE'S ADDRESS: 12107 MAJESTIC BOULEVARD
HUDSON, FL 34667RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02:25PM

**STATEMENT 4 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 5,000.

CLASS OF ACTIVITY: COMMUNITY WELFARE
DONEE'S NAME: GUARDIAN AD LITEM
DONEE'S ADDRESS: 14250 49TH STREET NORTH
CLEARWATER, FL 33762

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: FEEDS THE HUNGRY
DONEE'S NAME: AMERICA'S SECOND HARVEST OF TAMPA BAY
DONEE'S ADDRESS: 4702 TRANSPORT DR, BLDG 6
TAMPA, FL 33605

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: MEET NEEDS OF DEAF COMMUN
DONEE'S NAME: DEAF SERVICE BUREAU OF WEST CENTRAL FL
DONEE'S ADDRESS: 11441 OSCEOLA DRIVE
NEW PORT RICHEY, FL 34654

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: MARINE RESEARCH
DONEE'S NAME: MOTE MARINE LABORATORY AND AQUARIUM
DONEE'S ADDRESS: 1600 KEN THOMPSON PARKWAY
SARASOTA, FL 34236

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 3,000.

CLASS OF ACTIVITY: CARE AND SHELTER ANIMALS
DONEE'S NAME: HUMANE SOCIETY OF SARASOTA
DONEE'S ADDRESS: 2331 15TH STREET
SARASOTA, FL 34237

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: CARE AND SHELTER ANIMALS
DONEE'S NAME: HUMANE SOCIETY OF MANATEE
DONEE'S ADDRESS: 2515 14TH STREET WEST
BRADENTON, FL 34205

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: CARE AND SHELTER ANIMALS
DONEE'S NAME: BIG CAT RESCUE CORPORATION
DONEE'S ADDRESS: 12802 EASY STREET
TAMPA, FL 33625

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02:25PM

**STATEMENT 4 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 2,500.

CLASS OF ACTIVITY: CARE AND SHELTER ANIMALS
DONEE'S NAME: BIG CAT HABITAT & GOLF COAST SANCTUARY
DONEE'S ADDRESS: 7101 PALMER BOULEVARD
SARASOTA, FL 34240

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: EST GLOBAL VOLUNTEER
DONEE'S NAME: BEST BUDDIES FLORIDA
DONEE'S ADDRESS: 1516 EAST COLONIAL DR, STE 306
ORLANDO, FL 32803

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: INC INDEPEND FOR DISABLED
DONEE'S NAME: ON OUR OWN OF TAMPA BAY, INC.
DONEE'S ADDRESS: PO BOX 20434
TAMPA, FL 33662

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: PROMOTE FRIENDLY COMPETIT
DONEE'S NAME: ITALIAN AMERICAN GOLF ASSOCIATION
DONEE'S ADDRESS: 2246 UNION STREET
SAN DIEGO, CA 92101

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: NON PROFIT
AMOUNT GIVEN: 2,000.

CLASS OF ACTIVITY: COMMUNITY WELFARE
DONEE'S NAME: YMCA FOUNDATION
DONEE'S ADDRESS: ONE SOUTH SCHOOL AVENUE
SARASOTA, FL 34237

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)
AMOUNT GIVEN: 1,500.

CLASS OF ACTIVITY: CHRISTIAN ACADEMIC PROVID
DONEE'S NAME: SEFFNER CHRISTIAN ACADEMY
DONEE'S ADDRESS: 11605 EAST HIGHWAY 92
SEFFNER, FL 33584

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: NON PROFIT
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: PLACES SENIOR VOLUNTEERS
DONEE'S NAME: SENIORS IN SERVICE OF TAMPA BAY, INC.
DONEE'S ADDRESS: 1306 WEST SLIGH AVENUE
TAMPA, FL 33604

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501(C) (3)

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02:25PM

STATEMENT 4 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 5,000.

CLASS OF ACTIVITY: ATHLETIC SUPPORT FDN
 DONEE'S NAME: JEFF FRANK FAMILY FUND
 DONEE'S ADDRESS: BOX 7172

RELATIONSHIP OF DONEE: DAVIDSON, NC 28035
 ORGANIZATIONAL STATUS OF DONEE: NONE

AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: LEGACY GIVING MULT ORGS
 DONEE'S NAME: FIDELITY CHARITABLE GIFT FUND
 DONEE'S ADDRESS: P.O. BOX 770001

RELATIONSHIP OF DONEE: CINCINNATI, OH 45277
 ORGANIZATIONAL STATUS OF DONEE: NONE

AMOUNT GIVEN: 46,150.

TOTAL \$ 212,000.

STATEMENT 5
FORM 990-PF, PART III, LINE 5
OTHER DECREASES

OTHER TIMING DIFFERENCES

TOTAL \$ 73,163.

STATEMENT 6
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
1	700 CISCO SYSTEMS INC	PURCHASED	8/01/2006	6/09/2009
2	680 CISCO SYSTEMS INC	PURCHASED	8/01/2006	7/24/2009
3	300 CISCO SYSTEMS INC	PURCHASED	8/11/2006	9/30/2009
4	100000 CIT GROUP INC NEW	PURCHASED	1/04/2007	7/22/2009
5	450 CVS CAREMARK CORP	PURCHASED	7/28/2006	9/28/2009
6	500 EMC CORP MASS	PURCHASED	8/16/2006	6/09/2009
7	900 EMC CORP MASS	PURCHASED	8/16/2006	6/09/2009
8	1065 EMC CORP MASS	PURCHASED	8/16/2006	7/24/2009
9	350 EMC CORP MASS	PURCHASED	1/10/2007	9/25/2009
10	100000 FEDL FARM CREDIT BANK	PURCHASED	9/13/2006	5/15/2009
11	100000 FEDL HOME LOAN BANK	PURCHASED	8/22/2006	7/17/2009
12	100000 FEDL HOME LOAN BANK	PURCHASED	8/16/2006	9/11/2009
13	100000 FEDL HOME LOAN MTG CORP	PURCHASED	8/22/2006	5/21/2009
14	100000 FEDL HOME LOAN MTG CORP	PURCHASED	8/22/2006	5/15/2009
15	200 QUALCOMM INC	PURCHASED	8/04/2006	6/01/2009
16	510 QUALCOMM INC	PURCHASED	8/04/2006	6/01/2009
17	300 QUALCOMM INC	PURCHASED	8/21/2006	6/09/2009
18	420 CAMERON INTERNATIONAL	PURCHASED	11/25/2008	6/01/2009

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L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02 25PM

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
19	20000 CATERPILLAR FINL SVCS	PURCHASED	3/05/2009	10/09/2009
20	900 INGERSOLL RAND	PURCHASED	11/18/2008	6/09/2009
21	50 INGERSOLL RAND	PURCHASED	11/18/2008	6/09/2009
22	100 INGERSOLL RAND PLC	PURCHASED	11/18/2008	7/24/2009
23	850 INGERSOLL RAND PLC	PURCHASED	11/18/2008	7/24/2009
24	1280 INTEL CORP	PURCHASED	10/24/2008	6/09/2009
25	1285 INTEL CORP	PURCHASED	10/24/2008	7/24/2009
26	NET CAPITAL GAINS LPL FINANCIAL SVCS	PURCHASED	VARIOUS	VARIOUS

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
1	13,890.		12,348.	1,542.				\$ 1,542.
2	14,582.		11,995.	2,587.				2,587.
3	6,721.		5,888.	833.				833.
4	47,893.		100,493.	-52,600.				-52,600.
5	15,538.		14,723.	815.				815.
6	6,390.		5,519.	871.				871.
7	11,510.		9,934.	1,576.				1,576.
8	15,728.		11,755.	3,973.				3,973.
9	5,843.		5,100.	743.				743.
10	108,703.		99,606.	9,097.				9,097.
11	100,000.		100,986.	-986.				-986.
12	100,000.		100,453.	-453.				-453.
13	100,000.		100,632.	-632.				-632.
14	107,768.		100,892.	6,876.				6,876.
15	8,818.		7,181.	1,637.				1,637.
16	22,500.		18,312.	4,188.				4,188.
17	13,751.		11,278.	2,473.				2,473.
18	13,438.		8,529.	4,909.				4,909.
19	23,105.		19,591.	3,514.				3,514.
20	20,274.		13,529.	6,745.				6,745.
21	1,127.		752.	375.				375.
22	2,612.		1,503.	1,109.				1,109.
23	22,231.		12,778.	9,453.				9,453.
24	20,950.		18,552.	2,398.				2,398.
25	24,485.		18,625.	5,860.				5,860.
26	616.		0.	616.				616.
TOTAL								\$ 17,519.

STATEMENT 7
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
LESLIE V. THOMPSON 5015 E. HILLSBOROUGH AVE. TAMPA, FL 33610	PRESIDENT 0	\$ 0.	\$ 0.	\$ 0.

2009

FEDERAL STATEMENTS

PAGE 9

CLIENT LVT

L.V. THOMPSON FAMILY FOUNDATION, INC.

20-2015225

5/24/10

02 25PM

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
TAMI Y. THOMPSON 5015 E. HILLSBOROUGH AVE. TAMPA, FL 33610	SECRETARY 0	\$ 0.	\$ 0.	\$ 0.
MARILYN DUNCAN 4110 SILVERMOON DRIVE PLANT CITY, FL 33566	DIRECTOR 0	0.	0.	0.
THOMASENA BASHOR 4809 EHRLICH RD. STE. 203 TAMPA, FL 33624	DIRECTOR 0	0.	0.	0.
T. COREY NEIL 601 BAYSHORE BLVD. TAMPA, FL 33601	DIRECTOR 0	0.	0.	0.
DAVID AUSTIN 5015 E. HILLSBOROUGH AVE. TAMPA, FL 33610	DIRECTOR 0	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

STATEMENT 8
FORM 990-PF, PART XV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:
NAME: LESLIE V. THOMPSON
CARE OF:
STREET ADDRESS: 5015 E. HILLSBOROUGH AVE.
CITY, STATE, ZIP CODE: TAMPA, FL 33610
TELEPHONE: 813-248-3456
FORM AND CONTENT: NONE SPECIFIED
SUBMISSION DEADLINES: NONE
RESTRICTIONS ON AWARDS: 501(C)(3) ORGANIZATIONS ONLY

Publisher's Affidavit

LA GACETA

PUBLISHED WEEKLY

Tampa, Hillsborough County, Florida

State of Florida

County of Hillsborough, ss.

Before the undersigned authority personally appeared

Patrick Manteiga

who under oath says he is the Publisher of La Gaceta, a weekly newspaper published at Tampa, in Hillsborough County, Florida, that the attached copy of advertisement, being a

PUBLIC NOTICE

in the matter of

THE ANNUAL REPORT FOR THE PERIOD ENDED
DECEMBER 31, 2009 AND EXEMPT STATUS
APPLICATION MATERIALS OF THE L.V.
THOMPSON FAMILY FOUNDATION ARE NOW
AVAILABLE

PUBLIC NOTICE

The annual report for the period ended December 31, 2009 and exempt status application materials of the L.V. Thompson Family Foundation, Inc. are available at the address noted below for inspection during normal business hours, by any citizen who so requests within 180 days after publication of the notice of its availability.

**The L.V. Thompson Family
Foundation, Inc.**

4809 Ehrlich Rd. Ste. 203
Tampa, FL 33624

The Principal Manager is:
L.V. Thompson

Telephone: (813) 248-3456

5/7/10 1T

In the Circuit Court of the Thirteenth Judicial Circuit

was published in said newspaper in the issues of 5/7/2010

Affiant further says that the said La Gaceta is a newspaper published at Tampa, in said Hillsborough County, Florida, and that the said newspaper has heretofore been continuously published in said Hillsborough County, Florida, each week and has been entered as second class mailing matter at the post office in Tampa, in said Hillsborough County, Florida, for a period of one year next preceding the first publication of the attached copy of advertisement; and affiant further says that he has neither paid nor promised any person, firm, or corporation any discount, rebate, commission or refund for the purpose of securing this advertisement for publication in the said newspaper.

(SEAL)

personally known sworn to and subscribed before
me, this 7th day of MAY 2010, A.D.



GENE V. SIUDUT
Commission DD 652977
Expires March 20, 2011
Bonded Thru Troy Fen Insurance 800-386-7019

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545 1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.***Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	L.V. THOMPSON FAMILY FOUNDATION, INC.	20-2015225
	Number, street, and room or suite number. If a P.O. box, see instructions.	
	5015 E. HILLSBOROUGH AVE.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	TAMPA, FL 33610	

Check type of return to be filed (file a separate application for each return)

- | | | |
|---|--|------------------------------------|
| ☐ Form 990 | ☐ Form 990-T (corporation) | ☐ Form 4720 |
| ☐ Form 990-BL | ☐ Form 990-T (section 401(a) or 408(a) trust) | ☐ Form 5227 |
| ☐ Form 990-EZ | ☐ Form 990-T (trust other than above) | ☐ Form 6069 |
| ☒ Form 990-PF | ☐ Form 1041-A | ☐ Form 8870 |

- The books are in the care of ► LESLIE V. THOMPSON

Telephone No ► 813-248-3456 FAX No ► _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 20 10, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ☒ calendar year 20 09 or
 - ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$	2,345.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$	2,284.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$	61.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.**BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.**Form **8868** (Rev 4-2009)