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

OMB No 1545-0052 2009

ternal Revenue	Service Note: The foundation	may be	e able to use a copy of the				
	r year 2009, or tax year beginnin	g			and ending		, 20
Check all	that apply Initial return		Initial return o	•	iblic charity	, L	Final return
	Amended retu	ırn	Addres	s change		Name change	
	Name of foundation					A Employer identifi	cation number
Use the IRS							
label	WALKER FOUNDATION					23-	7279902~
Otherwise,	Number and street (or P O box num	ber if n	nail is not delivered to street a	iddress)	Room/suite	B Telephone number (see ;	page 10 of the instructions)
print							
or type. See Specific	MIRROR LAKE PLAZA, 2	829	LAKELAND DRIVE		1600	(60	1) 939-3003
Instructions	City or town state and ZID ands					C If exemption applicat pending, check here	ion is
						D 1 Foreign organizati	
	JACKSON, MS 39232					2. Foreign organizati	
Check type	pe of organization X Section	501(0	(3) exempt private for	ındatıon		85% test, check h computation	
Section	14047(3)(1) nonexempt charitable true	≈t	Other taxable priv	zate foundati	on	E if private foundation	etanic was terminated ——
Fair mark	et value of all assets at end	Αςςοι	unting method [.] 🔀 Ca	ash Acc	rual	under section 507(b)	
of year (f	rom Part II, col (c), line	01	ther (specify)			_ F If the foundation is in	a 60-month termination
16) ▶ \$	9,633,332. (F	Part I,	column (d) must be on	cash basis)		under section 507(b)	(1)(B), check here
Part I Ana	alysis of Revenue and Expenses	(The	(a) Revenue and	(h) Nint	otmont	(a) Advicted ask	(d) Disbursements
	l of amounts in columns (b), (c), and (o not necessarily equal the amounts in		expenses per	(b) Net inve		(c) Adjusted net income	for charitable purposes
	imn (a) (see page 11 of the instruction		books				(cash basis only)
1 Contrib	outions, gifts, grants etc., received (attach schedul		250,000.				
2 Check	if the foundation is not require attach Sch B.	d to					
1 : 1000	et on בית יחוד staden out of the porary cash investme	ents	80,578.	8	30.578.		ATCH 2
	lends and interest from securities		57,139.		57,139.		ATCH 3
5 a Gros	s rents						
b Netre	ental income or (loss)						
6a Netg	ain or (loss) from sale of assets not on line	10	-132,603.				
	s sales price for all 350,0	000.					
. I	tal gain net income (from Part IV, line	2) .					
8 Nets	short-term capital gain						
9 Incor	me medifications = CEIV/FD.						
10 a Gross	me medifications ECEIVED. s sales less return ECEIVED.	101					
b Less	Cost of goods sold	181					
c Gros	s profit of (lose) (attach) schedule)	J.S.					
11 Othe	r income (attach schedule)	TE	125,722.	10	02,625.		ATCH 4
	I. Add ines 1 through 11		380,836.	24	10,342.		
13 Comp	pensation of officers, directors, trustees, etc.		68,250.				
	er employee salanes and wages						
	sion plans, employee benefits						
[] 16 a Lega	al fees (attach schedule) ATCH .5		793.		0.	0 .	. 0
b Acco	ounting fees (attach schedule) ATCH	.6	5,900.		0.	0.	. 0
c Othe	er professional fees (attach schedule)		49,940.		5,840.		
17 Inter	est . ATTACHMENT. 8		60,697.		60,697.		
b According to the control of the co	s (attach schedule) (see page 14 of the instruct	ions)* *	6,548.		4,140.		
19 Dep	reciation (attach schedule) and deplet	on .	171.		171.		
20 Occi	upancy		8,344.		8,344.		
21 Trav	el, conferences, and meetings						
22 Print	ting and publications		120.		120.		
23 Othe	er expenses (attach schedule) ATCH	10	89,310.		75,547.		
= 1	i operating and administrative exper						
Add	lines 13 through 23		290,073.	15	54,859.	0	. 0
) 1	tributions, gifts, grants paid		418,000.				418,000
	expenses and disbursements. Add lines 24 a		708,073.	15	54,859.	0	. 418,000
	tract line 26 from line 12						
a Exces	ss of revenue over expenses and disbursemen	ts	-327,237.			·	
1	investment income (if negative, ente				85,483.		
1	isted net Income (if negative enter-					-0-	

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ATCH 9

9	ant II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
_		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	1	Cash - non-interest-bearing	245,729.	218,186.	218,186.
١	2	Savings and temporary cash investments			
İ	3	Accounts receivable ▶ 9,425.			
		Less allowance for doubtful accounts	5,537.	9,425.	9,425.
ı	4	Pledges receivable			
		Pledges receivable ▶			
	5	Grants receivable			
۱	6	Receivables due from officers, directors, trustees, and other			
	Ť	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
ļ	•	Less allowance for doubtful accounts			
	8				
ets		Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		· 	
٩		Investments - U S and state government obligations (attach schedule)			
Ì		Investments - corporate stock (attach schedule)			
	11	Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis			······································
		and equipment basis Less accumulated depreciation (attach schedule)			
- {	12	Investments - mortgage loans	0 556 710	0.054.730	0 000 000
	13 14	Investments - other (attach schedule) ATCH 11	8,556,713.	8,254,732.	9,223,086.
ļ	1-4	Land, buildings, and equipment basis		- 40-	
		(attach schedule)	4,906.	5,635.	
	15	Other assets (describe ATCH 12)	177,000.	177,000.	177,000.
	16	Total assets (to be completed by all filers - see the			
\Box		instructions Also, see page 1, item I)		8,664,978.	9,633,332.
	17	Accounts payable and accrued expenses	0.	0.	
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab	21	Mortgages and other notes payable (attach schedule)			
J	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
ala	26	Permanently restricted			
8		Foundations that do not follow SFAS 117,		·	
E		check here and complete lines 27 through 31.			
F	27	Capital stock, trust principal, or current funds	ł	Ì	
		Paid-in or capital surplus, or land, bldg, and equipment fund			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	8,989,885.	8,664,978.	
As	30	Total net assets or fund balances (see page 17 of the	7,000,000	7,733,733	
let	30	, , ,	8,989,885.	8,664,978.	
_	31	Instructions) Total liabilities and net assets/fund balances (see page 17	3730370001	3,001,3101	
	•	, , ,	8,989,885.	8,664,978.	
1	art I	of the instructions)	Ralances	0,004,570.1	
		I net assets or fund balances at beginning of year - Part II, co		ree with	
1				1 1	8,989,885.
_					-327,237.
2	Ente	er amount from Part I, line 27a er increases not included in line 2 (itemize) ATTACH	MONTH 10		
3	Othe	er increases not included in line 2 (itemize) ATTACH	MENT 13	3	2,945.
		lines 1, 2, and 3			8,665,593.
		reases not included in line 2 (itemize)		5	615
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line	e 5) - Part II, column (b), lir	ne 30 6	8,664,978.
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	and Losses for Tax on Inv	· · · · · · · · · · · · · · · · · · ·	(b) How acquired	(c) Date acquired	(d) Date sold
` '	ry bnck warehouse, or common stock, 200 s		P-Purchase D-Donation	(mo , day, yr)	(mo , day, yr)
a SEE PART IV SC	HEDULE			_	
b		<u> </u>	<u> </u>		
c			 		
<u>d</u>				 	<u> </u>
<u>e</u>		T (a) Cook or other house	 	1	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>			 		
b			 		
<u>c</u>				· · · · · · · · · · · · · · · · · · ·	
<u>d</u>					
Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69		Carpo (Cal. (b) a	olo minus
(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	:han -0-) or
(1) 1 11 7 45 61 126 1165	as of 12/31/69	over col (j), if any	<u> </u>	Losses (from co	(n))
<u>а</u> b			 		
C			 		
d					
e					
		f gain, also enter in Part I, line 7			
Capital gain net income	or (net capital loss)	f (loss), enter -0- in Part I, line 7	2		132,603.
	ain or (loss) as defined in sections 122				
=	rt I, line 8, column (c) (see pages 13 an		.		
	t I, line 8		3		
	Under Section 4940(e) for Reduction stic private foundations subject to the s				
	for the section 4942 tax on the distributes not qualify under section 4940(e)		period?	🗆] Yes ☒ No
	amount in each column for each year, s		e making	any entries	
(a)	(b)	(c)	Τ	(d)	
Base period years Calendar year (or tax year beginning		Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2008	472,200.	9,784,548.			0.048260
2007	641,246.	10,456,370.			0.061326
2006	616,241.	9,518,355.			0.064742
2005	592,645.	9,195,358.	<u> </u>		0.064450
2004	662,978.	9,241,545.	1		0.071739
					0 010515
2 Total of line 1, column		, , . , . , . ,	2		0.310517
•	atio for the 5-year base period - divide the				0.060100
number of years the fo	oundation has been in existence if less	than 5 years	3		0.062103
		B		0	055 500
4 Enter the net value of	noncharitable-use assets for 2009 from	n Paπ X, line 5	4		055,520.
5 Multiply line 4 by line 1	3		5		562,375.
5 Multiply line 4 by line 3	,		-		302,373.
6 Enter 1% of net invest	ment income (1% of Part I, line 27b)		6		855.
6 Enter 1% of net invest	ment income (1 % of Fait I, life 2/D)		-	<u></u>	
7 Add lines 5 and 6			7		563,230.
. Add illies 5 and 6				<u>-</u>	
	outions from Part XII, line 4	a Dad William Ab and a constant	8	40/ :	418,000.
If line 8 is equal to or Part VI instructions or	or greater than line 7, check the box	in Paπ VI, line 1b, and complete	tnat part	using a 1% ta	ix rate See the

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructi	ons)	
,1а	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 ruling letter if necessary - see instructions)		1,7	10
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check		<u> </u>	10.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% J 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-) 2			
3	Add lines 1 and 2		1,7	
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		1,7	10.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations-tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 2,000.			
d	Backup withholding erroneously withheld		2 1	1 2
7	Total credits and payments Add lines 6a through 6d		2,1	$\frac{13.}{48.}$
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			40.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			355.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be Credited to 2010 estimated tax 355. Refunded 11	-		,,,,,
	t VII-A Statements Regarding Activities			
1a			Yes	No
,,,	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the 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?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation managers (3) Section 4955 (4) Secti			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
ð	on foundation managers > \$			
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	ŀ		١.,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	V	Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	
b		4b	X	Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		^
_	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 amonds the governing instrument, so that no mandatory directions, that			
	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?	6	Х	
7	conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
Ju	materiations) MS.		1	
h	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?lf "No," attach explanation	8ь	х	L
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 on page			
	27)? If "Yes,"complete Part XIV	9	ļ	Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1

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names and addresses .

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	rt VII-A Statements Regarding Activities (continued)			<u>-3</u>
—,	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
•••		11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	Website address ► N/A The books are in care of ► BELINDA STYRES Telephone no ► 601-939	-300	3	
•	Located at ▶2829 LAKELAND DRIVE JACKSON, MS ZIP+4 ▶ 39232			
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here · · · · · · · · · · · · · · · · · ·	-	, ▶	
	and enter the amount of tax-exempt interest received or accrued during the year		-	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		i	
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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 X 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 X No			
b	•	,		
;	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			х
	were not corrected before the first day of the tax year beginning in 2009?	1c		<u> </u>
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				i
	de, Fait Alli) for tax year(s) beginning before 2009.			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2b		
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	120		
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<u> </u>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business X Yes No			
	enterprise at any time during the years			
ŀ	of 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	3b		x
	foundation had excess business holdings in 2009)	4a		X
4:		74		
١	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?	4b		X

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	90-PF (2009) VII-B Statements Regarding Activities for	Which Form 472	20 May Be Requir	red (continued)		Page 6
5a	During the year did the foundation pay or incur any amount (1) Carry on propaganda, or otherwise attempt to influence (2) Influence the outcome of any specific public election (se	legislation (section 45 per section 4955), or to the section 4955), or to the section 4955, or to the section of the section o	described in actions) educational under the exceptions e (see page 22 of the de	Yes X No Mescribed in Instructions)?	5b	
68	because it maintained expenditure responsibility for the grail if "Yes," attach the statement required by Regulations section. Did the foundation, during the year, receive any furias, direction a personal benefit contract?	on 53 4945-5(d) otty or indirectly, to pay		Yes X No		
7 a b	Did the foundation, during the year, pay premiums, directly of "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a party of the foundation receive any proceeds or have any or time to the foundation About Officers, Directors	or indirectly, on a pers to a prohibited tax she net income attributab	sonal benefit contract? elter transaction?	Yes X No	7b	X
	and Contractors ist all officers, directors, trustees, foundation man		mpensation (see pa			
	(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 other allow	
AT'	FACHMENT 15		68,250.	0.		
	Compensation of five highest-paid employees (othe f none, enter "NONE."	er than those includ	ded on line 1 - see p	age 23 of the instruc	ctions).	
	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 other allow	
	NONE					
						
Tota	number of other employees paid over \$50,000 .				Þ)-PF (2009)

Part VIII	and Contractors (continued)	ily Paid Employe	es,
3 Five high	nest-paid independent contractors for professional services (see page 23 of the instruc	tions). If none, ente	er "NONE."
			c) Compensation
NONE			
Total numb	er of others receiving over \$50,000 for professional services		▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the nuons and other beneficianes served, conferences convened, research papers produced, etc.	mber	Expenses
1_N/A_			
2			
3			
4			
	Summary of Program-Related Investments (see page 23 of the instructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 NONE			
2			
All other pro	gram-related investments. See page 24 of the instructions		
3 _NONE			
Total Add	lines 1 through 3		

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	n foundatio	ins,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	8,771,677.
b	Average of monthly cash balances	1b	231,960.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	189,784.
d	Total (add lines 1a, b, and c)	1d	9,193,421.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	9,193,421.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	137,901.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,055,520.
6	Minimum investment return. Enter 5% of line 5	6	452,776.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ► and do not complete this page 1.5.	operating irt)	
1	Minimum investment return from Part X, line 6	1	452,776.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 1,710.		
	a t.		
С	Add lines 2a and 2b	2c	1,710.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	451,066.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	451,066.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	451,066.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	418,000.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	418,000.
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 page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	418,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years.	ner the foun	dation

Form **990-PF** (2009)

	t XIII Undistributed Income (see page 26	(a)	(b)	(c)	(d)
	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009 451,066.
	line 7				431,000.
	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
	Total for pnor years 20 07, 20 06, 20 05				
	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005				
С	From 2006				
	From 2007				
e	From 2008				
f	Total of lines 3a through e	658,443.			
1	Qualifying distributions for 2009 from Part XII,	••			
	line 4 ▶ \$ 418,000.				
а	Applied to 2008, but not more than line 2a				
D	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				418,000.
	Applied to 2009 distributable amount	0.			110,000.
	Remaining amount distributed out of corpus	33,066.			33,066.
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same	33,000.			33,000.
	amount must be shown in column (a), the same		•		
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	625,377.			
b	Prior years' undistributed income Subtract				
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				
d	Subtract line 6c from line 6b Taxable				
_	amount - see page 27 of the instructions	<u>.</u>			
e	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
•	4d and 5 from line 1 This amount must be				_
	distributed in 2010				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	175,057.			
9	Excess distributions carryover to 2010.				
-	Subtract lines 7 and 8 from line 6a	450,320.			
10	Analysis of line 9				
	Excess from 2005				
b	Excess from 2006				
c	156 000				
u	Excess from 2008 Excess from 2009				1

Pa	rt XIV Private Oper	rating Foundations	see page 27 of the	instructions and Par	VII-A guestion 9)	NOT APPLICABLE
1 a	If the foundation has	_		i it is a private opera	- <u>- </u>	
	foundation, and the ruling				. •	(0) 1 (0) (0) (5)
Ъ	Check box to indicate whe	ther the foundation is a pr	ivate operating foundatio		4942(j)	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	 	(e) Total
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(-, · · · · · · · · · · · · · · · · · · ·
	For the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
С	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					
е	Qualifying distributions made		<u> </u>			
	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	İ				
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying		<u></u> .			
	under section					
_	4942(j)(3)(B)(i)	<u> </u>			-	
Þ	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed	ļ <u>.</u>				
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income					1
	(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)				· <u>-</u>	
	port from an exempt					
	organization (4) Gross investment income		· · ·			
Pa		ary Information (C	omplete this part	only if the found	ation had \$5,000	or more in assets
	at any time	during the year - se	e page 28 of the in	structions.)		
1	Information Regarding					
а	List any managers of	the foundation who h	nave contributed mor	e than 2% of the tota	contributions receiv	ed by the foundation
	before the close of any	y tax year (but only if th	ney have contributed	more than \$5,000) (S	ee section 507(d)(2).)	
	NONE					
_	List any managers of	the foundation who	own 10% or more o	f the stock of a corne	oration (or an equally	large portion of the
U	ownership of a partner					go portion of the
	p or a parator					
	NONE					
2	Information Regarding	a Contribution, Grant.	Gift, Loan, Scholarsh	ip, etc., Programs:		-
_		=		to preselected charm	table organizations s	and does not accept
	unsolicited requests	for funds if the foun	dation makes diffs	grants, etc (see page	28 of the instruction	ing does not accept
	organizations under o					,
<u> </u>	The name, address, ar	 			addressed:	
а		•	i the person to whom a	applications should be a	luulesseu	
	ATTACHMI		muttad and information	and motorials they shall	uld include	
þ	The form in which app	lications should be sub-	mited and information	and materials they sho	aid include.	
	DECUSOR SO	ם כסאאות אחתי לכי	TON TO AMBACUE	2D		
_		R GRANT APPLICA	TION IS ATTACHE	טי.		
С	Any submission deadli	ines:				
	NONE					
4	Any restrictions or I	limitations on awards	such as by geogr	aphical areas charita	ble fields, kinds of	institutions, or other
J	factors.		, 25 2, 50091		:	, _, _,
	NONE					

3 Grants and Contributions Paid Durin	ng the Year or Appi	roved for F	uture 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)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 17				
		1		
		}		
			İ	
Total			▶ 3a	418,000.
b Approved for future payment		T		
				1
	İ			
			t:	
Total	<u> </u>		> 3b	

	lysis of Income-Produ less otherwise indicated		ited business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Drogrom essues		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
Program service rev	enue					the instructions)
a						<u> </u>
						·
c				 		
d			<u> </u>	 - -		
<u> </u>						
						_
_	s from government agencies					
	nd assessments		<u> </u>	14	80,578.	
_	I temporary cash investments			14	57,139.	
	est from securities	·		17	37,133.	
	(loss) from real estate		· 	-		
a Debt-financed p						
Not debt-finance				- 	- -	
	oss) from personal property .			1.4	102 625	
	come	 -		14	102,625.	
•	es of assets other than inventory			14	-132,603.	
	from special events	ļ		 		
• • •) from sales of inventory	J				
Other revenue a _						00.00
OTHER REVE	ENUE			- -		23,09
;		ļ				
i						
+	 _					
' — _	0 1 7 10 - 17 1	Į.				22 00
	ins (b), (d), and (e)	L			107,739.	
Subtotal Add colum	columns (b), (d), and (e)					
Subtotal Add colum Total. Add line 12, c e worksheet in line 1 irt XVI-B Reli		venfy calcula	tions)	xempt Pur		130,83
Subtotal Add column Total. Add line 12, color worksheet in line 1 rt XVI-B Relime No. Explain the according to the subtraction of the subtraction	columns (b), (d), and (e)	venfy calcula to the Ac	complishment of E	xempt Purped in column	ooses (e) of Part XVI-A con	130,83
Subtotal Add column Fotal. Add line 12, consideration worksheet in line 1 rt XVI-B Relate No. Explain the accordance with the accordance of the subtraction of the su	columns (b), (d), and (e)	venfy calcula to the Ac	complishment of E	xempt Purped in column	ooses (e) of Part XVI-A con	130,83
Subtotal Add column Fotal. Add line 12, consideration worksheet in line 1 rt XVI-B Relate No. Explain the accordance with the accordance of the subtraction of the su	columns (b), (d), and (e)	venfy calcula to the Ac	complishment of E	xempt Purped in column	ooses (e) of Part XVI-A con	130,83
otal. Add line 12, c worksheet in line 1 t XVI-B Related No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	complishment of E	xempt Purped in column	ooses (e) of Part XVI-A con	130,83
Subtotal Add columnostal. Add line 12, columnostal worksheet in line 1 t XVI-B Related No. Explain the accordance with the second statement of the sec	columns (b), (d), and (e)	venfy calcula to the Ac	complishment of E	xempt Purped in column	ooses (e) of Part XVI-A con	130,83
otal. Add line 12, c worksheet in line 1 t XVI-B Related No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	complishment of E	xempt Purped in column	ooses (e) of Part XVI-A con	130,83
otal. Add line 12, c worksheet in line 1 t XVI-B Reli e No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	complishment of E	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
worksheet in line 1 t XVI-B Relia No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
worksheet in line 1 t XVI-B Relia No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
worksheet in line 1 t XVI-B Relia No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
otal. Add line 12, of worksheet in line 1 t XVI-B Relie No. Explain the accordance of the second sec	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
Subtotal Add columnostal. Add line 12, columnostal worksheet in line 1 t XVI-B Related No. Explain the accordance with the second statement of the sec	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
Subtotal Add column Total. Add line 12, c worksheet in line 1 rt XVI-B Relate Re No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
Subtotal Add column Total. Add line 12, c worksheet in line 1 TXVI-B Reli e No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
otal. Add line 12, c worksheet in line 1 t XVI-B Related No. Explain the acc	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83
Subtotal Add column Fotal. Add line 12, consideration worksheet in line 1 rt XVI-B Relate No. Explain the accordance with the accordance of the subtraction of the su	columns (b), (d), and (e)	venfy calcula to the Ac	ctions) ccomplishment of E ch income is reporte exempt purposes	Exempt Purped in column (other than	ooses (e) of Part XVI-A con	130,83

	t XVII		Regarding T	ransfers To and T	ransactions	and Relati	onships With I	Nonc		able
1	in sec	he organization directly ction 501(c) of the Cozations?	or indirectly ode (other than	engage in any of the section 501(c)(3) organ	nizations) or in				Yes	No
а		. •		hantable exempt organizati				4-(4)		x
								1a(1) 1a(2)		$\frac{\lambda}{X}$
b		transactions						10(2)		
_			ritable exempt or	ganization				1b(1)		x
				empt organization				1b(2)		Х
				s				1b(3)		Х
								1b(4)		X
								1b(5)		X
				indraising solicitations .		 .		1b(6)	<u> </u>	X
C			-	er assets, or paid employee				1c	<u> </u>	X
d		•		Yes," complete the folio	_		-			
		<u> </u>		ices given by the repo gement, show in columi	•					
	value	iii any transaction of	snanny anang	gernerit, snow in column	ii (u) tile valu	e or the goods	s, other assets, or	SEIVIC	es rec	,eiveu
(a) l	.ine no	(b) Amount involved	(c) Name of n	oncharitable exempt organizati	on (d) De	escription of transfer	s, transactions, and share	ng arrar	ngemen	ts
		N/A			N/A					
				 .						
	_	-	<u> </u>	··	_	 				
		, 	 		-	· · · · · · · · · · · · · · · · · · ·				
										
										
	-						-			
							·			
				···						
	_			·						
	1 - 41 -			Land with an interest to						
Za				ted with, or related to, of 501(c)(3)) or in section 527				\square_{v}	es 🔯	No.
h	If "Ye:			or (c)(3)) or in section 327	´ · · · · · · ·				es <u></u>	3 NO
		(a) Name of organization		(b) Type of organ	zation		c) Description of relations	ship		
_										
\equiv										
		-					<u>-</u> -			
_	Under		inco that I have over	amond this solves undivides		hadulas and statem	anto and to the heat			
	onaer belief,	it is true, correct, and com	plete Declaration	amined this return, including of preparer (other than taxpa)	yer or fiduciary) is	based on all inform	nation of which prepare	erhasa.	ny kno	ye and wledge
		Belings &	Stimes		///	12/10	ast. S	orh	eta	M
ė	$-\frac{1}{s}$	ignature of officer or trustee	7,000 100		Date	• • • • • • • • • • • • • • • • • • •	Title	<u>~</u>		7/
-ler		<u></u>			Date		Preparer's			
Sign Here	ر د ک	Preparer's		. 1	[X]	Check if self-employe	ed ► number (S			
Sig	aid arer's Only	signature	6/ Ered	900 KE	11/1/10			39C		
	Paid Preparer's Use Only	Firm's name (or yours if	—	LLP	11	··	EIN ▶ 44-0160	260		
	ر ہ	self-employed), address		CAPITOL STREET,	SUITE 500					
		and ZIP code	JACKS	ON, MS	3	9201-2190	Phone no 601-9		_	
								-om 99	v-PF	(2009)

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, or 990-PF.

OMB No 1545-0047

2009

Name of the organization		Employer identification number
WALKER FOUNDATION		23-7279902
Organization type (check one)		23-7279902
Filers of:	Section:	
1 11013 01.		
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	า
	501(c)(3) taxable private foundation	
-	evered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	ecial Rule. See
General Rule		
-	iling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more contributor. Complete Parts I and II	ore (in money or
Special Rules		
sections 509(a)(1) ai	(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a case of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1	-
the year, aggregate	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any occurributions of more than \$1,000 for use exclusively for religious, charitables, or the prevention of cruelty to children or animals. Complete Parts I, II, and I	e, scientific, literary, or
the year, contribution aggregate to more the year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions \$1,000. If this box is checked, enter here the total contributions that were rely religious, charitable, etc., purpose Do not complete any of the parts unless ization because it received nonexclusively religious, charitable, etc., contributions.	butions did not eceived during the the General Rule ons of \$5,000 or more
990-EZ, or 990-PF), but it mus	s not covered by the General Rule and/or the Special Rules does not file Schest answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of, to certify that it does not meet the filing requirements of Schedule B (Form 99).	ıts Form 990-EZ,
For Privacy Act and Paperwork Redu	ction Act Notice, see the Instructions Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)

JSA

for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-FZ, or 990-PF) (2009	
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Page	of	 Οĭ	Part

Schedule B (Form 990, 990	0-EZ, or 990-PF) (2009)	Page of of Part I
Name of organization	WALKER FOUNDATION	Employer identification number 23-7279902
Part I Contribut	ors (see instructions)	

rart I	Contributors (see instructions)		,
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	WALKER LANDS 2829 LAKELAND DRIVE, SUITE 1600	\$ \$	Person X Payroll Noncash
	JACKSON, MS 39208		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		s	Person Payroil 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 Payroli 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)

Schedule K-1

INVESTMENT	2,20	71, 0,	
EXPENSES PER BOOKS	2,206. 145. 7,135. 65.	71,027.	

TOTAL

HOPE COMMUNITY CREDIT UNION GOLDMAN SACHS
LABRADOR CAPITAL PARTNERS II DIVERSIFIED TRUST K-1S
GT ASSET ALLOCATION FUND

DESCRIPTION

80,578.

65. 71,027.

2,206. 145. 7,135.

NET

REVENUE AND PAGE 21

SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
ı ⊢-	
PART	
990PE,	
FORM	

NET 'INVESTMENT INCOME	26,845. 30,215. 20. 59. 57,139.
REVENUE AND EXPENSES PER_BOOKS	26,845. 30,215. 20. 59.
	TOTAL
DESCRIPTION	DIVERSIFIED TRUST K-1S GT ASSET ALLOCATION FUND STATE STREET LABORADOR CAPITAL PARTNERS II

FORM 990PF, PART I - OTHER INCOME

	NET	INVESTMENT	INCOME			102,743.	-118.
REVENUE	AND	EXPENSES	PER BOOKS	22,864.	233.	102,743.	-118.

102,625.

125,722.

TOTALS

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FEES
T.EGAI,
PART T -
990PF.
FORM

ADJUSTED	NETINCOME
NET	INVESTMENT
REVENUE AND	EXPENSES PER BOOKS
	DESCRIPTION

793.

CHARITABLE PURPOSES

TOTALS

LEGAL FEES

793.

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CHARITABLE <u>PURPOSES</u>		• 0
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	2,900.	5,900.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

NET INVESTMENT INCOME	5,840.	5,840.
REVENUE AND EXPENSES PER BOOKS	5,840. 44,100.	49,940.
DESCRIPTION	DIVERSIFIED TRUST MGMT FEE WALKER LANDS ADMIN FEES	TOTALS

- INTEREST EXPENSE FORM 990PF, PART I

NET INVESTMENT INCOME	60,683.	. 169, 697.
REVENUE AND EXPENSES PER BOOKS	60,683.	60,697.
		TOTALS
DESCRIPTION	GT ASSET ALLOCATION LABRADOR II	

TAXES	
1	
Н	ļ
PART	
990PF.	1
FORM	(

NET INVESTMENT <u>INCOME</u>	2,678. 6. 1,456.	4,140.
REVENUE AND EXPENSES PER BOOKS	2,408. 2,678. 6. 1,456.	6,548.
DESCRIPTION	FEDERAL TAXES PAID FOREIGN TAXES - DIV TRUST K-1S FOREIGN TAXES - LABRADOR II FOREIGN TAXES - GT ASSET	TOTALS

- OTHER EXPENSES FORM 990PF, PART I

	NET	INVESTMENT	INCOME	10,956.				57,218.						7,373.	75,547.	
REVENUE	AND	EXPENSES	PER BOOKS	10,956.	1,892.	256.	3,276.	57,218.	2,181.	1,562.	161.	4,027.	408.	7,373.	89,310.	
			DESCRIPTION	DIVERSIFED TRUST	OFFICE EXPENSE	ART INSURANCE	DUES	GT ASSET ALLOCATION FUND	TRAINING & SEMINARS	TELEPHONE	COMPUTER MAINTENANCE	TRAVEL & LODGING	MEETING EXPENSE	LABRADOR CAPITAL PARTNERS II	TOTALS	

ATTACHMENT 10

ENDING <u>EMV</u>	1,364,998. 170,814. 3,709,703. 5,735. 3,971,836.	9,223,086.
ENDING BOOK VALUE	873,017. 147,817. 2,458,510. 5,735. 4,769,653.	8,254,732.
DESCRIPTION	DIVERSIFIED TRUST LABRADOR CAPITAL PARTNERS II PALOMA PARTNERS GOLDMAN SACHS GT ASSET ALLOCATION FUND	TOTALS

FORM 990PF, PART II - OTHER INVESTMENTS

12
ATTACHMENT

FORM 990PF, PART II - OTHER ASSETS

ENDING BOOK VALUE

ENDING <u>FMV</u>

ARTWORK

DESCRIPTION

177,000.

177,000.

177,000.

177,000.

TOTALS

PAGE 31

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT_

TAX EXEMPT INCOME

2,945.

TOTAL

2,945.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

615. NONDEDUCTIBLE EXPENSES

> 615. TOTAL

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BELINDA STYRES MIRROR LAKE PLAZA, 2829 LAKELAND DR 1600 JACKSON, MS 39232	SECRETARY 20.00	Ö	Ö	
W E WALKER III MIRROR LAKE PLAZA, 2829 LAKELAND DR 1600 JACKSON, MS 39232	TRUSTEE 20.00		.0	
MARCIE SKELTON MIRROR LAKE PLAZA, 2829 LAKELAND DR 1600 JACKSON, MS 39232	DIRECTOR 20.00	68,250.	Ö	
GLORIA WALKER MIRROR LAKE PLAZA, 2829 LAKELAND DR 1600 JACKSON, MS 39232	TRUSTEE 20.00		.0	
MERRY DOUGHERTY MIRROR LAKE PLAZA, 2829 LAKELAND DR 1600 JACKSON, MS 39232	TRUSTEE 5.00	.0	.0	

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ATTACHMENT 15

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

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390522

COMPENSATION	0	. 0	68,250.	390522	1770
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 5.00	TRUSTEE 5.00	GRAND TOTALS	4.23.48 PM V 09-8.3	E.O. O. O. E.E.
	2829 LAKELAND DR	2829 LAKELAND DR		10/28/2010 4	
NAME AND ADDRESS	KATIE MCBRAYER MIRROR LAKE PLAZA, 1600 JACKSON, MS 39232	ANDREW MALLISON MIRROR LAKE PLAZA, 1600 JACKSON, MS 39232		2186aN A878	קיסט אשססדס

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS

0

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FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

MARCIE SKELTON 2829 LAKELAND DRIVE, SUITE 1600 JACKSON, MS 39232 601-939-3003

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
KSW FOUNDATION 2829 LAKELAND DRIVE, SUITE 1600 JACKSON, MS 39232	COMMON DIRECTORS EXEMPT	TO SUPPORT THE FOUNDATION	25,000
MSW FOUNDATION 2829 LAKELAND DRIVE, SUITE 1600 JACKSON, MS 39232	COMMON DIRECTORS EXEMPT	TO SUPPORT THE FOUNDATION	25,000
WEW FOUNDATION 2829 LAKELAND DRIVE, SUITE 1600 JACKSON, MS 39232	COMMON DIRECTORS EXEMPT	TO SUPPORT THE FOUNDATION	25,000
CENTREVILLE ACADEMY, INC 1419 ACADEMY STREET CENTREVILLE, MS 39631	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	100
PARENTS OF PUBLIC SCHOOLS 200 NORTH CONGRESS STREET, SUITE 500 JACKSON, MS 39201	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	15,000
MILLSAPS COLLEGE 1701 NORTH STATE STREET JACKSON, MS 39210-0001	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	24,000

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
YOUNGLIFE	NONE	TO SUPPORT THE MISS:ON OF THE ORGANIZATION	25,000
4085 MALLORY LANE	TAX-EXEMPT		
FRANKLIN, TN 37067			
SOCIETY OF SAINT JOHN THE EVANGELIST	NONE	TO SUPPORT THE MISSION OF THE ORGANIZATION	5,000
980 MEMORIAL DRIVE	TAX-EXEMPT		
CAMBRIDGE, MA 02138-5717			
MISSISSIPPI MUSEUM OF ART	NONE	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,000
380 S LAMAR ST	TAX-EXEMPT		
JACKSON, MS 39201-4007			
MISSISSIPPI OPERA	NONE	TO SUPPORT THE MISSION OF THE ORGANIZATION	5,000
P O BOX 1551	TAX-EXEMPT		
JACKSON, MS 39215-1551			
NEW STAGE THEATRE	NONE	TO SUPPORT THE MISSION OF THE ORGANIZATION	5,000
1100 CARLISLE	TAX-EXEMPT		
JACKSON, MS 39202			
MISSISSIPPI COLLEGE SCHOOL OF LAW	NONE	TO SUPPORT THE MISSION OF THE ORGANIZATION	25,000
151 EAST GRIFFITH STREET	TAX-EXEMPT		
JACKSON, MS 39201			

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE NATURE CONSERVANCY 405 BRIARWOOD DRIVE, SUITE 101 JACKSON, MS 39206	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,000
MISSISSIPPI MUSEUM OF NATURAL SCIENCE FOUNDATION 2148 RIVERSIDE DRIVE JACKSON, MS 39202-1353	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,000
DELTA WATERFOWL FOUNDATION P O BOX 3128 BISMARCK, ND 58502	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,000
MISSISSIPPI CHILDREN'S HOME SERVICES P O BOX 1078 JACKSON, MS 39215-1078	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	2,000
DUCKS UNLIMITED 193 BUSINESS PARK DRIVE, SUITE E RIDGELAND, MS 39157-6026	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	100,400
US INTERNATIONAL BALLET COMPETITION POST OFFICE BOX 3696 JACKSON, MS 39207	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	12,500.

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CONSUMER CREDIT COUNSELING SERVICE 2906 N STATE STREET, SUITE 204 JACKSON, MS 39216	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	5,000
HABITAT FOR HUMANITY P O BOX 55634 JACKSON, MS 392296-5634	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	15,000
BOY SCOUTS OF AMERICA 855 RIVERSIDE DR JACKSON, MS 39202-1138	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,000
VOICE OF CALVARY MINISTRIES 531 WEST CAPITOL STREET JACKSON, MS 39203	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	5,000
UNITED WAY OF THE CAPITOL AREA 843 N PRESIDENT ST JACKSON, MS 39202-2561	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	25,000
LIFE OF MISSISSIPPI 1304 VINE STREET JACKSON, MS 39202	NONE TAX-EXEMPT	TO SUPPORT THE MISSION OF THE ORGANIZATION	2,000

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GRANTS
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PART X
4_990PE,
FOR

AMOUNT	2,000	5,000	0000,
PURPOSE OF GRANT OR CONTRIBUTION	TO SUPPORT THE MISSION OF THE ORGANIZATION	TO SUPPORT THE MISSION OF THE ORGANIZATION	TO SUPPORT THE MISSION OF THE ORGANIZATION
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE
	TAX-EXEMPT	TAX-EXEMPT	TAX-EXEMPT
RECIPIENT NAME, AND ADDRESS	HONDURAS MEDICAL MISSION	MISSISSIPPI SYMPHONY ORCHESTRA	MS COMMISSION FOR VOLUNTEERS
	P O BOX 23107	201 EAST PASCAGOULA STREET	3825 RIDGEWOOD ROAD, SUITE 601
	JACKSON, MS 39225-3107	JACKSON, MS 39201	JACKSON, MS 39211

418,000

TOTAL CONTRIBUTIONS PAID

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

Name of estate or trust		number				
WALKER FOUNDATION				23-727990	2	
Note: Form 5227 filers need to complete only!		il-ld O V				
Part I Short-Term Capital Gains and I	osses - Assets	s Held One Yo	ear or Less	(e) Cost or other ba	ele T	(f) Gain or (loss) for
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce	(see page 4 of the instructions)		the entire year Subtract (e) from (d)
1a						
					+	· · · · · · · · · · · · · · · · · · ·
					_	···
b Enter the short-term gain or (loss), if any, f	rom Schedule D-1	I, line 1b			1b	53,077.
2 Short-term capital gain or (loss) from Form	ıs 4684, 6252, 678	31, and 8824			2	
3 Net short-term gain or (loss) from partners	hips, S corporatio	ns, and other e	states or trusts .		3	
4 Short-term capital loss carryover Enter the Carryover Worksheet					4 (
5 Net short-term gain or (loss). Combine in column (3) on the back	nes 1a through 4	ın column (f). E	nter here and on line	13,	5	53,077.
Part II Long-Term Capital Gains and Loss	es - Assets Held	More Than One	· · · · · · · · · · · · · · · · · · ·		<u> </u>	03,017.
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other b (see page 4 of the (nstructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a						
		-				
		_				
b Enter the long-term gain or (loss), if any, f	rom Schedule D-1	, line 6b			6b	-185,680.
7 Long-term capital gain or (loss) from Form	ns 2439, 4684, 62	52, 6781, and 8	824		7	
8 Net long-term gain or (loss) from partners	hips, S corporation	ns, and other es	states or trusts		8	
9 Capital gain distributions					9	
10 Gain from Form 4797, Part I					10	
11 Long-term capital loss carryover Enter the Carryover Worksheet	e amount, if any, f	rom line 14 of the	ne 2008 Capital Loss		11	(
12 Net long-term gain or (loss). Combine liii column (3) on the back	nes 6a through 11	ın column (f) E	inter here and on line	e 14a,	12	-185,680.
For Paperwork Reduction Act Notice, see the Instru						D (Form 1041) 2009

Sched	ule D (Form 1041) 2009				Page 2
-	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
	Caution: Read the instructions before completing this p		(see page 5)	or trust s	
	Net short-term gain or (loss)	13	_	 _	53,077.
14	Net long-term gain or (loss):	14a			-185,680.
	Total for year	-			103,000:
	28% rate gain				
	Total net gain or (loss). Combine lines 13 and 14a	-		·	-132,603.
Note	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form	990-1	, Part I, line 4a) If lines	14a and 15, column	(2), are net gains, go
o Pa	rt V, and do not complete Part IV If line 15, column (3), is a net loss, complete Pa	art IV a	nd the Capital Loss C	arryover Workshee	s necessary
Par	t IV Capital Loss Limitation				
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P			1 1.	
a	The loss on line 15, column (3) or b \$3,000 :: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag			16 (3,000.)
Note C <i>arr</i> y	: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag rovelWorksheet on page 7 of the instructions to figure your capital loss carryove	e 1, IIN er	ie 22 (or Form 990-1, ii	ne 34), is a loss, col	mpiete the CapitalLoss
Par	t V Tax Computation Using Maximum Capital Gains Rate	es	,		
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu			nount is entered in	n Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more				
	tion: Skip this part and complete the worksheet on page 8 of the instructions 14b, sel. (3) or line 14b, sel. (4) or line 14b, sel.	ons if			
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	n 990-T trusts. Complete this part only if both lines 14a and 15 ar	e gair	ns. or qualified divide	ends are included	I in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa				
	er line 14b, col (2) or line 14c, col (2) is more than zero		·		
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17		
18	Enter the smaller of line 14a or 15 in column (2)	•	' '		
	but not less than zero18				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19			Ì	
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 21	_			
22	Subtract line 21 from line 20 If zero or less, enter -0		22		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24?				
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.				
	No. Enter the amount from line 23				
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same? Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	- 00	27		
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	0 22	21		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
20	Enter the amount non-line 20 (nume 20 to blank, office 0)				
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (15)			30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rat			· · · · · · 	
	(see the Schedule Ginstructions in the instructions for Form 1041)				
32	Add lines 30 and 31				
33	Figure the tax on the amount on line 17 Use the 2009 Tax Ra	te Sch	nedule for Estates a	nd Trusts	<u> </u>
	(see the Schedule Ginstructions in the instructions for Form 1041) .				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33				

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Schedule D (Form 1041) 2009

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D
(Form 1041)

▶ See instructions for Schedule D (Form 1041). Department of the Treasury Internal Revenue Service ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2009

Name of estate or trust

Employer identification number

WALKER FOUNDATION				23-7279902	
Part I Short-Term Capital Gains an	d Losses - Ass	ets Held One Ye			
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a LABRADOR CAPITAL PARTNERS					
II, LP - SHORT TERM	VARIOUS	VARIOUS			-216.
GT ASSET ALLOCATION FUND					
LP - SHORT TERM	VARIOUS	VARIOUS			93,513.
SMALL/MID CAP US EQUITY					
COMMON TRUST FUND - SHORT	VARIOUS	VARIOUS			-12,458.
INTERNATIONAL EQUITY					07.760
COMMON TRUST FUND - SHORT	VARIOUS	VARIOUS		<u> </u>	-27,762.
	<u> </u>	ļ			
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1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b

53,077.

Schedule D-1 (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d
LABRADOR CAPITAL PARTNERS, LP - LONG TERM					1,26
GT ASSET ALLOCATION FUND					1,20
LP - LONG TERM	VARIOUS	VARIOUS			-97,63
SMALL/MID CAP US EQUITY	VARIOUS	VARIOUS			3,703
COMMON TRUST FUND - LONG	VARIOUS	VARIOUS			-25,79
INTERNATIONAL EQUITY COMMON TRUST FUND - LONG	VARIOUS	VARIOUS			-59,02
INTERNATIONAL EQUITY FUND	VARIOUS	09/30/2009	75,000.	67,438.	7 , 56
SMALL/MID CAP US EQUITY FUND	VARIOUS	VARIOUS	275,000.	287,051.	-12,05
			<u></u>		

FORM 990-PF - PART IV

Kind of Property		AINS AND LOSSES FOR TAX ON INVEST Description				797	Date acquired	Date sold
Gross sale price less openses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		LABRADOR CA		ERS II, LP - IES	- SHORT		VARIOUS -216.	VARIOUS
		LABRADOR CA		ERS, LP - LO	ONG TER		1,265.	
		GT ASSET AL PROPERTY TY		ND LP - SHOP	RT TERM		VARIOUS 93,513.	VARIOUS
		1	LOCATION FU PE: SECURIT	ND LP - LONG	G TERM		VARIOUS	VARIOUS
		SMALL/MID CAP US EQUITY COMMON TRUST FUN					-97,638. VARIOUS	VARIOUS
		PROPERTY TY	PE: SECURIT	'IES			-12,458.	
		1	AP US EQUIT PE: SECURIT	Y COMMON TRO	UST FUN		VARIOUS -25,792.	VARIOUS
			AL EQUITY C	COMMON TRUST	FUND ~		VARIOUS -27,762.	VARIOUS
			AL EQUITY C PE: SECURIT	COMMON TRUST	FUND -		VARIOUS -59,026.	VARIOUS
75,000.			VAL EQUITY F PE: SECURIT				VARIOUS	09/30/20
·		SMALL/MID O	CAP US EQUIT				VARIOUS	VARIOUS
275,000.		287,051.					-12,051.	
TAL GAIN (L	oss)		· · · · · · · · · · · · · · · · · · ·					

Form 8	ve 📆 888	4-2009)					Page 2					
• If y	on are	e filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II	and check this box			▶ X					
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868												
• If y	ou are	e filing for an Automatic 3-Month Extension, complete only Part I (on page 1	I)									
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).												
		Name of Exempt Organization	Employer identification number									
Type or print	WALKER FOUNDATION	23-72799	23-7279902									
File by the extended	Number, street, and room or suite no. If a P.O. box, see instructions											
	MIRROR LAKE PLAZA, 2829 LAKELAND DRIVE											
due date for filing the		City, town or post office, state, and ZIP code. For a foreign address, see instructions										
return instruc		JACKSON, MS 39232										
Chec	k type	e of return to be filed (File a separate application for each return).										
	-	n 990 X Form 990-PF Form 1041				\Box	Form 6069					
	Form	n 990-BL Form 990-T (sec. 401(a) or 408(a) trust)		Form 4720	Γ	\neg	Form 8870					
	Form	Form 5227	_	_								
STO	Pl Do	n 990-EZ Form 990-T (trust other than above) not complete Part II if you were not already granted an automatic 3-mor	nth exte	ension on a previo	usly	file	ed Form 8868.					
• Th	e bool	ks are in the care of BELINDA STYRES										
Telephone No. ▶ 601 939-3003 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												
		names and EINs of all members the extension is for		<u> </u>								
4 I request an additional 3-month extension of time until 11/15/2010												
5	0.00											
6												
7		in detail why you need the extension										
	TGGW	TIONAL TIME 13 REQUIRED TO ACCUMULATE THE INFORMAT	LICN I	NECESSARY TO								
FILE A COMPLETE AND ACCURATE RETURN.												
8a												
nonrefundable credits See instructions						\$	2,000.					
b	b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated											
previously with Form 8868						\$	2,000.					
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit												
	See instructions	8 c	\$									
·		Signature and Verification	า									
		es of perjury, I declare that I have examined this form, including accompanying schedules are ect, and complete, and that I am authonzed to prepare this form	nd statem	ents, and to the best	of my	kno	wledge and belief					
Signat	ture 🕨	Title ▶		Date	•							
		מצח וום				BS	868 (Boy 4 2000)					

190 E CAPITOL STREET, SUITE 500 JACKSON, MS 39201-2190