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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

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

HAYSWOOD FOUNDATION INC.  
1 WEST MCDONALD PARKWAY 3 A  
MAYSVILLE, KY 41056

A Employer identification number

23-7345996

B Telephone number (see the instructions)

(606) 563-9333

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)

\$ 7,302,864.

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)

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

31,343.

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

3 Interest on savings and temporary cash investments

59,284.

59,284.

59,284.

4 Dividends and interest from securities

113,977.

113,977.

113,977.

5a Gross rents

b Net rental income or (loss)

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

-615,755.

b Gross sales price for all assets on line 6a

1,892,629.

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

0.

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

-411,151.

173,261.

173,261.

16,480.

13 Compensation of officers, directors, trustees, etc

20,600.

4,120.

16,480.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach sch) See St 1

4,320.

4,320.

c Other prof fees (attach sch) See St 2

38,705.

38,705.

17 Interest

18 Taxes (attach schedule) See Stm 3

-5,713.

50.

-7,024.

1,261.

19 Depreciation (attach sch) and depletion

20 Occupancy

11,462.

2,292.

9,170.

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule)

See Statement 4

10,134.

2,016.

8,148.

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

79,508.

38,755.

5,724.

35,059.

25 Contributions, gifts, grants paid Stmt 5

312,630.

312,630.

26 Total expenses and disbursements. Add lines 24 and 25

392,138.

38,755.

5,724.

347,689.

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

-803,289.

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

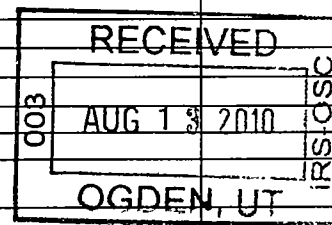
134,506.

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

167,537.

SCANNED AUG 16 2010

ADMINISTRATIVE AND OPERATING EXPENSES



G14 R

**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>ASSETS</b>	1 Cash — non-interest-bearing			
	2 Savings and temporary cash investments	394,953.	102,326.	102,326.
	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)	810,725.	785,736.	818,916.
	b Investments — corporate stock (attach schedule)	5,729,580.	5,012,283.	5,013,441.
	c Investments — corporate bonds (attach schedule)	1,127,657.	1,359,446.	1,348,260.
	11 Investments — land, buildings, and equipment basis			
Less: accumulated depreciation (attach schedule)				
12 Investments — mortgage loans				
13 Investments — other (attach schedule)				
14 Land, buildings, and equipment basis	21,189.			
Less: accumulated depreciation (attach schedule) See Stmt 6	1,268.	19,921.	19,921.	19,921.
15 Other assets (describe See Statement 7)	1.	1.		
16 <b>Total assets</b> (to be completed by all filers — see instructions. Also, see page 1, item I)	8,082,837.	7,279,713.	7,302,864.	
<b>LIABILITIES</b>	17 Accounts payable and accrued expenses	548.	713.	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe )			
	23 <b>Total liabilities</b> (add lines 17 through 22)	548.	713.	
<b>NET FUND ASSETS OR FUND BALANCES</b>	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>			
	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	8,082,289.	7,279,000.	
	30 <b>Total net assets or fund balances</b> (see the instructions)	8,082,289.	7,279,000.	
	31 <b>Total liabilities and net assets/fund balances</b> (see the instructions)	8,082,837.	7,279,713.	

**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	8,082,289.
2 Enter amount from Part I, line 27a	2	-803,289.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	7,279,000.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	7,279,000.

**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 8				
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			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(j) Fair Market Value as of 12/31/69	(k) Adjusted basis as of 12/31/69	(l) 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	-615,755.
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	0.

**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 <input type="checkbox"/> 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 <input type="checkbox"/> and enter 1% of Part I, line 27b		1	2,690.
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	2,690.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-		5	2,690.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a	8,000.	
b Exempt foreign organizations — tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	8,000.	
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	5,310.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax	11	2,800.	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 <b>Form 1120-POL</b> 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 <b>Form 990-T</b> 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) KY		
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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**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>RANDY ANDERSON C.P.A.</u> Telephone no <u>606 564-6260</u> Located at <u>1 WEST McDONALD PKWY, MAYSVILLE, KY</u> ZIP + 4 <u>41056</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>	N/A		

**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
<b>1a</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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 <input type="checkbox"/>	1b	N/A
<b>c</b> 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?	1c	X
<b>2</b> 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))		
<b>a</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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)	2b	N/A
<b>c</b> 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>		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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)	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
<b>b</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?	4b	X

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**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

X

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 9		20,600.	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 DONATIONS TO LOCAL CHARITIES	
	206,277.
2 SCHOLARSHIPS	
	106,413.
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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**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	1 a	6,393,358.
b	Average of monthly cash balances	1 b	182,335.
c	Fair market value of all other assets (see instructions)	1 c	
d	<b>Total</b> (add lines 1a, b, and c)	1 d	6,575,693.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,575,693.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	98,635.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,477,058.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	323,853.

**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	323,853.
2a	Tax on investment income for 2009 from Part VI, line 5	2 a	2,690.
b	Income tax for 2009 (This does not include the tax from Part VI)	2 b	
c	Add lines 2a and 2b	2 c	2,690.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	321,163.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	321,163.
6	Deduction from distributable amount (see instructions)	6	
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	321,163.

**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	1 a	347,689.
b	Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	347,689.
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	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	347,689.

**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				321,163.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			0.	
b Total for prior years: 20____, 20____, 20____		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005	85,266.			
c From 2006	80,516.			
d From 2007	22,036.			
e From 2008	145,103.			
f Total of lines 3a through e	332,921.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 347,689.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2009 distributable amount				321,163.
e Remaining amount distributed out of corpus	26,526.			
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	359,447.			
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				0.
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	359,447.			
10 Analysis of line 9:				
a Excess from 2005	85,266.			
b Excess from 2006	80,516.			
c Excess from 2007	22,036.			
d Excess from 2008	145,103.			
e Excess from 2009	26,526.			



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

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

## 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	
<b>1</b>	Program service revenue:					
<b>a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>f</b>						
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments					
<b>3</b>	Interest on savings and temporary cash investments					59,284.
<b>4</b>	Dividends and interest from securities					113,977.
<b>5</b>	Net rental income or (loss) from real estate:					
<b>a</b>	Debt-financed property					
<b>b</b>	Not debt-financed property					
<b>6</b>	Net rental income or (loss) from personal property					
<b>7</b>	Other investment income					
<b>8</b>	Gain or (loss) from sales of assets other than inventory					-615,755.
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory					
<b>11</b>	Other revenue					
<b>a</b>				1		
<b>b</b>						
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>12</b>	Subtotal. Add columns (b), (d), and (e)					-442,494.
<b>13</b>	Total. Add line 12, columns (b), (d), and (e)					-442,494.

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

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

[illegible]



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HAYSWOOD FOUNDATION INC.

23-7345996

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**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
PROFESSIONAL SERVICES	\$ 4,320.		\$ 4,320.	
Total	\$ 4,320.	\$ 0.	\$ 4,320.	\$ 0.

**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
INVESTMENT FEE-5TH 3RD&HL	\$ 17,918.	\$ 17,918.		
INVESTMENT FEES-US BANK	20,787.	20,787.		
Total	\$ 38,705.	\$ 38,705.	\$ 0.	\$ 0.

**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 INCOME TAX	\$ -7,506.		\$ -7,506.	
FOREIGN TAXES.	50.	\$ 50.		
PAYROLL TAXES	1,576.		315.	\$ 1,261.
TAX AND LICENSE	167.		167.	
Total	\$ -5,713.	\$ 50.	\$ -7,024.	\$ 1,261.

**Statement 4**  
**Form 990-PF, Part I, Line 23**  
**Other Expenses**

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
COPIER MAINTENANCE	\$ 239.		\$ 48.	\$ 191.
EMPLOYEE HEALTH	4,000.		800.	3,200.
INSURANCE	2,718.		544.	2,174.
INTERNET ACCESS	263.		53.	210.
MEETING EXPENSE	755.		151.	634.
MEMBERSHIP DUES	495.		99.	396.
MISC	64.		1.	63.
SUPPLIES	1,136.		227.	909.
WORKERS COMP	464.		93.	371.
Total	\$ 10,134.	\$ 0.	\$ 2,016.	\$ 8,148.

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HAYSWOOD FOUNDATION INC.

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**Statement 5**  
**Form 990-PF, Part I, Line 25**  
**Contributions, Gifts, and Grants**

Cash Grants and Allocations

Class of Activity:	EDUCATION	
Donee's Name:	K. DESPAIN SCHOLARSHIP PROGRAM	
Donee's Address:	VARIOUS	
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		\$ 1,400.
Class of Activity:	EDUCATION	
Donee's Name:	DOWNING SCHOLARSHIP PROGRAM	
Donee's Address:	VARIOUS	
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		105,013.
Class of Activity:	RECREATION	
Donee's Name:	LIMESTONE FAMILY YMCA	
Donee's Address:	US 68 MAYSVILLE, KY 41056,	
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		8,750.
Class of Activity:	ARTS	
Donee's Name:	MAYSVILLE PLAYERS	
Donee's Address:	SECOND STREET MAYSVILLE, KY 40156,	
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		50,000.
Class of Activity:	ARTS	
Donee's Name:	OHIO VALLEY ARTIST GUILD	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		4,000.
Class of Activity:	EDUCATION	
Donee's Name:	MAYSVILLE MASON CO LIBRARY	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		68,000.
Class of Activity:	YOUTH RECREATION	
Donee's Name:	TOM BROWNING BOYS AND GIRLS CLUB	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		8,750.



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HAYSWOOD FOUNDATION INC.

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**Statement 5 (continued)**  
**Form 990-PF, Part I, Line 25**  
**Contributions, Gifts, and Grants**

Class of Activity:	PROTECTION OF YOUTH	
Donee's Name:	CASA PROGRAM	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		\$ 10,000.
Class of Activity:	COMMUNITY DEVELOPEMENT	
Donee's Name:	MAYSVILLE INITIATIVES	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		8,750.
Class of Activity:	EDUCATION	
Donee's Name:	ST PATRICK SCHOOL	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		11,667.
Class of Activity:	EDUCATION	
Donee's Name:	LICKING VALLEY COLLEGE	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		7,000.
Class of Activity:	EDUCATION	
Donee's Name:	ST AUGUSTINE SCHOOL	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		5,000.
Class of Activity:	CHARITY	
Donee's Name:	EASTER SEALS	
Donee's Address:		
Relationship of Donee:	NONE	
Organizational Status of Donee:	501 C 3	
Amount Given:		1,000.
Class of Activity:	COMMUNITY DEVELOPMENT	
Donee's Name:	LICKING VALLEY RC&D COUNCIL	
Donee's Address:	MAYSVILLE, KY 41056	
Relationship of Donee:	NONE	
Organizational Status of Donee:	501(C) (3)	
Amount Given:		1,000.
Class of Activity:	COMMUNITY DEVELOPMENT	

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HAYSWOOD FOUNDATION INC.

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**Statement 5 (continued)**  
**Form 990-PF, Part I, Line 25**  
**Contributions, Gifts, and Grants**

Donee's Name:	EWING FIRE DEPARTMENT		
Donee's Address:			
Relationship of Donee:	NONE		
Organizational Status of Donee:	501(C)(3)		
Amount Given:		\$	5,000.
Class of Activity:	YOUTH PROTECTION		
Donee's Name:	BOYS CLUB OF CINCINNATI		
Donee's Address:			
Relationship of Donee:	NONE		
Organizational Status of Donee:	501(C)(3)		
Amount Given:			10,000.
Class of Activity:	YOUTH EDUCATION		
Donee's Name:	NATIVITY MONTESSORI SCHOOL		
Donee's Address:			
Relationship of Donee:	NONE		
Organizational Status of Donee:	501(C)(3)		
Amount Given:			2,300.
Class of Activity:	COMMUNITY DEVELOPMENT		
Donee's Name:	MAYSVILLE CHAPTER		
Donee's Address:			
Relationship of Donee:	NONE		
Organizational Status of Donee:	501(C)(3)		
Amount Given:			5,000.
		Total	\$ 312,630.

**Statement 6**  
**Form 990-PF, Part II, Line 14**  
**Land, Buildings, and Equipment**

Category	Basis	Accum. Deprec.	Book Value	Fair Market Value
Machinery and Equipment	\$ 21,189.	\$ 1,268.	\$ 19,921.	\$ 19,921.
Total	\$ 21,189.	\$ 1,268.	\$ 19,921.	\$ 19,921.

**Statement 7**  
**Form 990-PF, Part II, Line 15**  
**Other Assets**

	Book Value	Fair Market Value
Total	\$ 0.	\$ 0.

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**Statement 8**  
**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	425 DOVER CORP	Purchased	6/21/2005	6/16/2009
2	500 EMC CORP MASS	Purchased	10/17/2005	6/16/2009
3	1625 EBAY INC COM	Purchased	5/26/2006	6/16/2009
4	25000 FEDERAL HOME LOAN	Purchased	12/19/2005	7/30/2009
5	271 MICROSOFT	Purchased	6/10/2005	11/23/2009
6	1110 MORGAN STANLEY DEAN	Purchased	6/21/2005	7/23/2009
7	2042 PFIZER	Purchased	Various	6/16/2009
8	8018 SYNOVUS FINANCIAL	Purchased	Various	8/31/2009
9	200 TEVA PHARMACEUTICAL	Purchased	10/17/2005	11/23/2009
10	1702 TOTAL SYS SVCS INC	Purchased	Various	4/08/2009
11	175 VANGUARD BD INDEX	Purchased	6/27/2008	7/30/2009
12	1743 WALGREEN CO	Purchased	Various	2/02/2009
13	1400 WYETH	Purchased	5/07/2008	10/15/2009
14	2010 SALES REPORTED ON 09 FORM	Purchased	Various	Various
15	FIDELITY	Purchased	Various	7/29/2009
16	FIRST AMERICAN MID CAP	Purchased	Various	7/29/2009
17	FIRST AMERN INVT FDS	Purchased	Various	7/29/2009
18	FIRST AMERN INVT FDS	Purchased	Various	7/29/2009
19	FIRST AMERN INVT FDS	Purchased	Various	7/29/2009
20	Capital Gain Dividends			

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HAYSWOOD FOUNDATION INC.

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**Statement 9**  
**Form 990-PF, Part VIII, Line 1**  
**List of Officers, Directors, Trustees, and Key Employees**

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compensation</u>	<u>Contri- bution to EBP &amp; DC</u>	<u>Expense Account/ Other</u>
JOHN MCDOWELL 377 EDMONT ROAD MAYSVILLE, KY 41056	Director 0	\$ 0.	\$ 0.	\$ 0.
DAVID CLARKE 309 WADSWORTH DRIVE MAYSVILLE, KY 41056	Director 0	0.	0.	0.
MICHAEL CLARKE 119 SUTTON STREET MAYSVILLE, KY 41056	Director 0	0.	0.	0.
WILLIAM C. MCNEILL 140 W MAPLE LEAF MAYSVILLE, KY 41056	Director 0	0.	0.	0.
JOHN G PARKER 41 HACKETT RIDGE BROOKSVILLE, KY 41004	Director 0	0.	0.	0.
WARREN MARKWELL 220 EDMONT ROAD MAYSVILLE, KY 41056	Director 0	0.	0.	0.
KIRK TOLLE 658 HILLCREST ROAD MAYSVILLE, KY 41056	0	0.	0.	0.
ANN TOMLIN 289 SHANNON LANE MAYSVILLE, KY 41056	Director 0	0.	0.	0.
DOUGLAS HENDRICKSON 180 EDMONT ROAD MAYSVILLE, KY 41056	Treasurer 0	0.	0.	0.
DAVE WALLINGFORD JERSEY RIDGE ROAD MAYSVILLE, KY 41056	President 0	0.	0.	0.
DEBRA WALLINGFORD 2 RIVER RIDGE MAYSVILLE, KY 41056	Director 0	0.	0.	0.
SALLY WALTON 721 HILL CREST MAYSVILLE, KY 41056	Director 0	0.	0.	0.

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## Federal Statements

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HAYSWOOD FOUNDATION INC.

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**Statement 9 (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
ROBERT ROSS 660 BUFFALO TRACE MAYSVILLE, KY 41056	Secretary 0	\$ 0.	\$ 0.	\$ 0.
RONALD RICE 8020 MARSHALL DRIVE MAYSVILLE, KY 41056	Vice President 0	0.	0.	0.
LLOYD SCHILTZ MAYSVILLE, KY 41056	Executive Direc 25.00	20,600.	0.	0.
JOHN W. MCNEILL 1055 JERSEY RIDGE ROAD MAYSVILLE, KY 41056	Director 0	0.	0.	0.
Total		\$ 20,600.	\$ 0.	\$ 0.

**Statement 10**  
**Form 990-PF, Part XV, Line 2a-d**  
**Application Submission Information**

Name of Grant Program: SEE ATTACHED  
Name: HAYSWOOD FOUNDATION  
Care Of: LLOYD SCHILTZ  
Street Address: ONE W. MCDONALD PKWY  
City, State, Zip Code: MAYSVILLE, KY 41056  
Telephone: (606) 563-9333  
Form and Content: SEE ATTACHED APPLICATIONS  
Submission Deadlines: SEE ATTACHED APPLICATIONS  
Restrictions on Awards: SEE ATTACHED APPLICATIONS

# 2009 Application Form and Instructions

## G. L. & Elsie H. Downing Scholarship Katie DeSpain Scholarship Matt Stahl Scholarship

Hayswood Foundation, Inc., Administrator  
1 West McDonald Parkway, Suite 3A, Maysville, KY 41056

The attached application form is shared by the three scholarship programs, above. Only one application is needed to apply for all three scholarships. Answer all questions as completely as possible. If you have questions, contact the Foundation office immediately by calling 563-9333, or by sending an email to [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net).

**ELIGIBILITY:** You must be under the age of 25 at the time of initial application. You must not have already completed or attended four years of college. Scholarships are not awarded for post-graduate studies. Members of the families of the directors or staff of Hayswood Foundation, or of the original donors of the scholarship programs, are ineligible. You must have graduated from an accredited high school, or have completed at least one year of studies at an accredited college or university in the United States. Applicants must be attending or planning to attend, an accredited U. S. college or university. No more than two siblings can receive a scholarship from a given scholarship program ("Siblings" includes blood related, adopted, and step children within a given family unit.). Program-specific requirements are discussed, below, and are in addition to these general requirements.

**SUBMISSION DEADLINE:** Completed applications ("Completed" applications consist of the attached 5-page application form plus all materials required to be submitted in addition to the application form.) must be in the Foundation office (at the address, above) no later than **5:00 P.M. Friday, April 24, 2009.**

**ATTACHMENTS:** Pay careful attention to the section on Page 1 that lists additional information that must be submitted in order for an application to be considered complete. Included is proof of submission of the Free Application for Federal Student Assistance (FAFSA). Start that submission process now, if you have not already done so. Make or print a copy of your FAFSA application to submit with this scholarship application.

**AWARDS:** Scholarships are awarded for one-year periods. Past recipients must reapply for future consideration. Scholarships are paid directly to the financial aid office of the recipient's school in equal payments prior to each semester or quarter. Withdrawing from school for any reason, other than serious illness, injury, or other reason acceptable to the Foundation, will result in loss of funding. No scholarship will be paid after a student completes what would be considered his or her senior year of study.

**CONFIDENTIALITY:** While the information provided on or with this application form will be treated as confidential, it will be made available to the Scholarship Committee, Board of Directors, and staff of Hayswood Foundation, Inc. for evaluation and selection purposes. To ensure privacy prior to receipt by the Foundation, it is recommended that application materials be placed in a sealed envelope for delivery.

### G. L. and Elsie H. Downing Scholarship

To be eligible, the applicant, or the applicant's parents, must have resided in Mason County for at least two years immediately prior to an application's submission. The number of years that an applicant may qualify to receive funding will be determined by the total number of years of residency. The selection process is based on financial need, academics, and extra-curricular activities. To be considered, high school students must have a 3.00 cumulative grade point average or better; college applicants must have a 2.50 cumulative grade point average or better.

### Katie DeSpain Scholarship

To be eligible, applicants must have graduated from an accredited high school in Mason County. The selection process is based on financial need, academics, and extra-curricular activities. To be considered, first-time applicants from high school or college must have a 3.00 cumulative grade point average or better (Prior recipients must have a 2.50 GPA or better.).

### Matt Stahl Scholarship

To be eligible, applicants must have graduated from St. Patrick's or Mason County High School. The selection process is based on financial need, academics, and extra-curricular activities. To be considered, applicants from high school or college must have a 2.50 cumulative grade point average or better.

# G. L. & Elsie H. Downing, Katie DeSpain, and Matt Stahl Scholarships

## GENERAL INSTRUCTIONS

- All responses to questions on this form must be clearly typed or printed in ink. If you have questions, contact our office by calling 563-9333, or by email to [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net).
- Write only on the front of the application sheets, and on the front of any attachments to the application. Information placed on the back of sheets may be missed when copying. When additional sheets must be attached to answer any question, indicate in the answer space that separate sheets are attached, and indicate on those sheets the section of the application that is being supplemented.
- The applicant's name must appear on all supplemental information attached to or accompanying the application.

### VERY IMPORTANT: INFORMATION TO BE ATTACHED TO, OR PROVIDED FOR THIS APPLICATION

**NOTE: Current scholarship recipients who are submitting this application to retain their scholarships need not resubmit any item in this section which is marked with an asterisk (\*).**

- \*1. If you are currently a high school student, attach a copy of your official transcript for all high school academic credits.
2. Attach a copy of your official transcript for any college courses completed.
- \*3. Attach a copy of your most recent ACT and/or SAT scores.
4. Attach a BRIEF statement about your ambitions, and tell us what receiving a scholarship would mean/has meant to you.
- \*5. Attach a recent black & white or color photograph. Photos of first-time recipients will be used in a news release.
- \*6. Provide three letters of recommendation. Two must be written by current or past teachers who have taught you in a classroom environment. The third letter must come from a non-teacher source. Each letter is to be mailed or delivered directly to the Foundation office by the author, and must be received by the application deadline. Letters written by relatives of the applicant, or any employee or director of Hayswood Foundation, will not be accepted. Letters must be dated, and may not be dated prior to January 1, 2009. Provide the attached handouts to the authors of your letters so that they will be aware of these requirements.
7. Attach a copy of your 2009 Free Application for Federal Student Aid (FAFSA), along with a copy of the Student Aid Report (SAR) that you received in response to your FAFSA. If you have not yet received your SAR, attach a copy of your FAFSA, then submit a copy of your SAR as soon as it arrives (SAR's submitted after the application deadline will be accepted.).
8. Attach a copy of any Forms W-2 that you received for employment in 2008, along with a signed copy of pages 1 & 2 of your 2008 federal income tax return, if you were required to file.
9. Attach copies of your parents' Forms W-2 for 2008, along with signed copies of pages 1 & 2 of their 2008 federal income tax returns. If your parents are separated or divorced, we will need this tax information from **BOTH** parents. If unable to provide the second parent's information, the parent with custody must submit a signed statement that the information is unavailable, and give the reason.

### PERSONAL INFORMATION OF APPLICANT

**NOTE: Current scholarship recipients who are submitting this application to retain their scholarships need not answer any item in this section that is marked with an asterisk (\*).**

Name \_\_\_\_\_ Last 4 Digits of Social Security No. \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone Number : \_\_\_\_\_ Phone number where you can be reached at college: \_\_\_\_\_

Date of birth \_\_\_\_\_ Marital status: ( ) single ( ) married Number of dependents: \_\_\_\_\_

\*High school attended: \_\_\_\_\_ \*Rank in HS graduating class: \_\_\_\_\_ of \_\_\_\_\_ total graduates

Current enrollment status: ( ) high school student ( ) college student, and in \_\_\_\_\_ year ( ) not currently enrolled

Current cumulative grade point average, or cumulative GPA at the end of last semester attended: \_\_\_\_\_

Name(s) of parent(s)/guardian(s): \_\_\_\_\_

Address of parent(s)/guardian(s): \_\_\_\_\_

Number of years of residency in Mason County for applicant: \_\_\_\_\_ Number of years for applicant's parents: \_\_\_\_\_

Do you have a brother or sister (including step brothers and sisters, and adopted siblings) who has received one of these scholarships?

RECIPIENT'S NAME

SCHOLARSHIP PROGRAM

\_\_\_\_\_  
\_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**PERSONAL INFORMATION OF APPLICANT, CONTINUED**

List extra-curricular activities for school, community, your family, and/or church. This section is important, so be specific and complete in your descriptions. Attach a separate sheet, if needed, and indicate below that there is an attachment.

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

College you plan to attend, or are attending, and its location \_\_\_\_\_

### APPLICANT'S FINANCIAL NEED

Itemize, below, your anticipated expenses for attending college during the full upcoming school year. Include costs of tuition, housing, meal plans, books, and fees related to enrollment or classes (If you are uncertain of the exact amounts, estimates of expenses can be obtained by contacting your college's financial aid office.). **Do not list expenses for transportation or for personal items, as they will not be considered when awarding scholarships.**

**NATURE OF EXPENSE**

DOLLAR AMOUNT

[illegible]

Total Expenses \$



Applicant's Name: \_\_\_\_\_

### APPLICANT'S FINANCIAL ASSISTANCE

List other grants or scholarships for which you have applied (even if you have not been notified of receipt), and which have been awarded to you for the upcoming school year (indicate the amount you will receive for the **FULL** school year). **DO NOT LIST STUDENT LOANS.** Seeking other sources of assistance will not lessen your chance of being selected. Should any of this information change, contact the Foundation office immediately. If selected, you will be required to submit a copy of the financial assistance award letter that you receive from your college.

SOURCE OF ASSISTANCE	INDICATE IF AWARDED OR APPLIED FOR	AMOUNT AWARDED (IF APPLICABLE)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total of Other Assistance \$ \_\_\_\_\_

If you received more financial aid in past years than was needed for your expenses, and surplus funds are available in your college account for future use, show the amount of that surplus here. Do not include funds from student loans, or personal or family contributions. \$ \_\_\_\_\_

Total of All Other Funds Available \$ \_\_\_\_\_

### APPLICANT'S ASSETS

Indicate, below, your assets including checking and savings accounts, certificates of deposit, savings bonds, stocks, other bonds, trust funds, real estate, and vehicles.

NATURE OF ASSET	VALUE	HOW OBTAINED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

As an applicant for the Hayswood Foundation, Inc. scholarship programs, I certify that the information I have provided on this application is correct to the best of my knowledge. I understand that my submission of this application in no way guarantees that funds will be awarded, or the amount of the award should I be selected. If selected, I understand that (1) I may attend the college of my choice, provided the institution is accredited and located within the United States, (2) all scholarship funds awarded will be paid directly to my college's Financial Aid Office, to be applied toward my expenses under the college's normal procedures for the administration of scholarships (The Foundation reserves the right to reclaim any funds which remain unused at the end of the school year, or consider the amount of those unused funds in determining the amount of future awards), (3) I must submit a copy of my grades to the Foundation at the completion of each semester, as well as evidence of my enrollment for the subsequent semester, (4) I must disclose to the Foundation any additional financial assistance received following the submission of this application (The Foundation reserves the right to reduce the amount of any scholarship awarded should the recipient receive additional funds from other sources), (5) the Foundation reserves the right to cancel any scholarship for failure of a recipient to meet academic requirements, or because of a recipient's unlawful conduct, and (6) selection as a recipient for the upcoming school year does not guarantee funding for any subsequent year.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Applicant's Name: \_\_\_\_\_

**PERSONAL INFORMATION OF PARENT(S)/GUARDIAN(S)**

With whom do you reside? ( ) both parents ( ) father ( ) mother ( ) step father ( ) step mother ( ) other

Please check one of the boxes to the right if parents are divorced ( ) or separated ( ).

Are both parents living? ( ) yes ( ) no

Father's name: \_\_\_\_\_ Father's age: \_\_\_\_\_

Father's address (if same as applicant's, write "same"): \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

Position held: \_\_\_\_\_

Mother's name: \_\_\_\_\_ Mother's age: \_\_\_\_\_

Mother's address (if same as applicant's, write "same"): \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

Position held: \_\_\_\_\_

List dependents (other than the applicant ) for federal income tax purposes in 2008 (If parents are divorced, list dependents for both ):

Name	Relationship to applicant	Age	If living w/family, check here	Name of school, if attending	Grade level

Applicant's Name: \_\_\_\_\_

**FINANCIAL INFORMATION OF PARENTS/GUARDIANS  
(OR FOR PARENT WITH CUSTODY, IF DIVORCED)**

**Annual Income and Deductible Expenses**

**Actual 2008 Amounts From  
Federal Income Tax Return**

**Estimated Amounts for 2009**

Adjusted gross income \_\_\_\_\_  
Net taxable income \_\_\_\_\_  
Tax-exempt income \_\_\_\_\_  
Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

Adjusted gross income \_\_\_\_\_  
Net taxable income \_\_\_\_\_  
Tax-exempt income \_\_\_\_\_  
Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

**Assets and Liabilities at the Time of This Application**

1. Market value of home, if owned: \$ \_\_\_\_\_  
2. Market value of other real estate: \_\_\_\_\_  
3. Dollar value of share of business  
or farm: \_\_\_\_\_  
4. Total bank deposit accounts: \_\_\_\_\_

5 Other investments (stocks,  
bonds, etc.): \_\_\_\_\_  
6 Total of lines 1 through 5: \_\_\_\_\_  
7 Total indebtedness: \_\_\_\_\_  
8 Net assets (Line 6 minus  
Line 7): \$ \_\_\_\_\_

**FINANCIAL INFORMATION OF NON-CUSTODY PARENT (IF PARENTS ARE DIVORCED)**

(If unavailable, parent with custody must provide a written statement to that effect, and explain why.)

**Annual Income and Deductible Expenses**

**Actual 2008 Amounts From  
Federal Income Tax Return**

**Estimated Amounts for 2009**

Adjusted gross income \_\_\_\_\_  
Net taxable income \_\_\_\_\_  
Tax-exempt income \_\_\_\_\_  
Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

Adjusted gross income \_\_\_\_\_  
Net taxable income \_\_\_\_\_  
Tax-exempt income \_\_\_\_\_  
Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

**Assets and Liabilities at the Time of This Application**

1. Market value of home, if owned: \$ \_\_\_\_\_  
2 Market value of other real estate: \_\_\_\_\_  
3. Dollar value of share of business  
or farm: \_\_\_\_\_  
4 Total bank deposit accounts: \_\_\_\_\_

5 Other investments (stocks,  
bonds, etc.): \_\_\_\_\_  
6 Total of lines 1 through 5: \_\_\_\_\_  
7. Total indebtedness: \_\_\_\_\_  
8 Net assets (Line 6 minus  
Line 7): \$ \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**ADDITIONAL INFORMATION**

Other than parental assistance, and assets of the applicant listed on page 3 of this application, list any additional sources of support that are available to the applicant for use toward the cost of education

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Explain any circumstances that create a financial hardship which would not be apparent from the information reported elsewhere on this application (Attach a separate sheet if necessary )

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**CERTIFICATION BY PARENTS/GUARDIANS**

(If parents are divorced, the signature of the parent with custody is sufficient)

To the best of my/our knowledge, the information reported is complete and accurate I/We agree to inform Hayswood Foundation, Inc of any major changes in our financial status as reported.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR FIRST-TIME APPLICANTS, AND THOSE WHO HAVE NOT PREVIOUSLY  
RECEIVED SCHOLARSHIP FUNDS FROM A HAYSWOOD FOUNDATION PROGRAM**

It is crucial that the authors of your letter's of recommendation understand our requirements. If a letter is not in our office by the application deadline, the application is incomplete and ineligible for consideration. To help this process operate as smoothly as possible, write your name on each of these three instruction forms, separate the forms, and provide one to each individual you select to write a letter. Remember that you are ultimately responsible for ensuring that the letters are submitted, so remember to follow up with each author to see if their letter has been completed and delivered. You may also contact the Foundation office to inquire.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for a 2009-2010 scholarship offered by Hayswood Foundation, Inc. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of the Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2009. Your letter should be no longer than one page, single side. **Do not give your completed letter to the applicant.** Instead, mail or deliver it directly to the Foundation office no later than **5:00 p.m. on Friday, April 24, 2009.** A late letter will result in the application's disqualification. Submission may be by mail or in person at the following address: Hayswood Foundation, Inc., 1 West McDonald Parkway, Suite 3A, Maysville, Kentucky, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope ready in case our office is closed and you need to slide the letter under the office door. If you regularly write letters for many students, you may mail or deliver multiple letters at a time. If you have questions, please call the Foundation office at (606) 563-9333, or email us at [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). Your time and effort are greatly appreciated.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for a 2009-2010 scholarship offered by Hayswood Foundation, Inc. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of the Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2009. Your letter should be no longer than one page, single side. **Do not give your completed letter to the applicant.** Instead, mail or deliver it directly to the Foundation office no later than **5:00 p.m. on Friday, April 24, 2009.** A late letter will result in the application's disqualification. Submission may be by mail or in person at the following address: Hayswood Foundation, Inc., 1 West McDonald Parkway, Suite 3A, Maysville, Kentucky, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope ready in case our office is closed and you need to slide the letter under the office door. If you regularly write letters for many students, you may mail or deliver multiple letters at a time. If you have questions, please call the Foundation office at (606) 563-9333, or email us at [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). Your time and effort are greatly appreciated.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for a 2009-2010 scholarship offered by Hayswood Foundation, Inc. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of the Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2009. Your letter should be no longer than one page, single side. **Do not give your completed letter to the applicant.** Instead, mail or deliver it directly to the Foundation office no later than **5:00 p.m. on Friday, April 24, 2009.** A late letter will result in the application's disqualification. Submission may be by mail or in person at the following address: Hayswood Foundation, Inc., 1 West McDonald Parkway, Suite 3A, Maysville, Kentucky, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope ready in case our office is closed and you need to slide the letter under the office door. If you regularly write letters for many students, you may mail or deliver multiple letters at a time. If you have questions, please call the Foundation office at (606) 563-9333, or email us at [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). Your time and effort are greatly appreciated.

## Have you remembered to do the following?

- ☐ **Review all information on the application for accuracy.**
- ☐ **Place your name at the tops of pages 2 - 6 of the application, and on each piece of supplemental information accompanying the application form.**
- ☐ **Provide a written statement of your goals, and what receiving this scholarship would mean/has meant to you.**
- ☐ **Provide a recent black & white or color photo** (Applies only to first-time applicants, and those who are re-applying but have never been selected to receive a scholarship.).
- ☐ **Provide a copy of your high school transcript** (Applies only to applicants currently in high school.).
- ☐ **Provide a copy of your most recent ACT or SAT score** (Does not apply to current recipients applying to continue receipt of scholarship.).
- ☐ **Provide copies of all college transcripts, if applicable.**
- ☐ **Provide copies of your 2008 Forms W-2, if applicable.**
- ☐ **Provide copies of pages 1 and 2 of your 2008 federal income tax form, if applicable.**
- ☐ **Provide copies of your parents' 2008 Forms W-2** (If your parents are divorced, we need W-2's from both, or a signed statement from the parent with custody that the information is unavailable, and why.).
- ☐ **Provide copies of pages 1 and 2 of your parents' 2008 federal income tax return** (If your parents are divorced, we need tax returns from both, or a signed statement from the parent with custody that the information is unavailable, and why.).
- ☐ **Provide copies of your 2009 Free Application for Federal Student Aid and the Student Aid Report that you received in response** (SAR's not yet received are to be submitted upon receipt.).
- ☐ **Select three qualified individuals to submit letters of recommendations.** (Does not apply to current recipients applying to renew their scholarships.)
- ☐ **If your parents are divorced, and you are not providing a W-2, income tax return, and/or financial information requested on Page 6 for the non-custody parent, provide a signed statement from the parent with custody that the information is unavailable, and why** (Only one signed statement is required to cover any and all omissions.).
- ☐ **Sign the application at the bottom of page 3.**
- ☐ **Have your parent(s) or guardian(s) sign at the bottom of page 6** (If your parents are divorced, only the signature of the parent with custody is required.).
- ☐ **Arrange for the delivery of your application to our office, along with all required information, before this year's deadline of 5:00 p.m. on Friday, April 24.**

# Hayswood Foundation, Inc.

One West McDonald Parkway, Suite 3A, Maysville, KY, 41056

Phone: (606) 563-9333

Fax: (606) 563-9444

Email: hayswoodfoundation@maysvilleky.net

## **2009 GRANT APPLICATION INSTRUCTIONS**

Hayswood Foundation, Inc., as a charitable organization, is limited, by the Internal Revenue Service, in the types of grants that can be made, and in the types of recipients who qualify to receive funds. In general, grants may be made to non-profit organizations in a seven county area that includes Bracken, Fleming, Lewis, Mason and Robertson Counties in Kentucky, and Adams and Brown Counties in Ohio. The purpose of the grant must be to promote education, or mental or physical health. **Only those organizations recognized by the Internal Revenue Service as able to receive tax-deductible contributions from individuals are eligible for consideration. Preference is given to organizations qualifying under Section 501(c)(3).** Schools must be accredited, and must provide written evidence that accreditation is current.

Grants will not be made for programs or purposes involving political indoctrination or action, or which predominately involve social or religious indoctrination or action. Grants are not made to or for the benefit of individuals, but only to recognized tax-exempt organizations. No portion of any grant may directly benefit of any officer, director, or member of any recipient, except in a manner that would indiscriminately benefit other members of the class to be served. Grants will not be made for the purpose of funding endowment funds.

It is possible that a grant will be awarded on a conditional basis. These grants would require an organization to raise money from other sources to match funds received from the Foundation. Not all money received from other sources will qualify for the match (Detailed requirements are available upon request.). Grants for major capital purposes will be awarded on a \$1-for-\$2 conditional basis, only, and will be paid over a number of years, with the length of time dependent upon the amount, and other specific conditions of the request. Applicants may use a single application form to apply for multiple projects. However, if one of the projects is a major capital project, a separate application form should be used for that project.

Recipients of major capital grants of \$100,000 or more will be required to conduct special reviews of the use of granted funds at least every two years, with a final review conducted within 90 days of the date of the final distribution. The grant reviews must be performed by an independent, licensed public accountant, and copies provided to the Foundation.

**Completed applications must be received in the office of Hayswood Foundation, Inc. no later than 5:00 p. m. on Monday, August 3, 2009. Applications will not be accepted after the deadline has passed.** A "completed" application consists of the attached application form, plus all supporting documentation requested under the form's Item 18. For ease of completion, applicants may create their own application form, provided the item numbers and text listed on our original application are recreated in their entirety. Applications should be submitted in loose-leaf form, not bound or stapled (**DO NOT USE STAPLES**), with information printed on one side of each sheet, only. Print must be in black or other dark ink. Applications must be signed by an officer or the executive director of the applying organization.

By submitting an application, the applicant acknowledges that Hayswood Foundation, Inc. may rely on the information being accurate and current as of the date stated. Any material misstatement will result in rejection, and any grant funds theretofore paid based on reliance on that misstatement will be immediately refunded upon our notice to the applicant.

Distributions of awards to selected applicants should not be expected earlier than November 1, 2009. Once grant money is awarded to an organization, that money must be used for the purpose stated in the application, or a different purpose if prior approval is received from the Foundation. Money not used as stated or approved must be returned. Successful grantees will be required to account for all grant monies spent and/or restricted. Any funds received from other organizations for the same purpose must also be disclosed. No new grants will be made to any organization, or any successor organization, for a period of four years thereafter until such accounting and disclosure is provided.

Questions about the application process should be directed to the phone number, or email address, above.

## 2009 HAYSWOOD FOUNDATION, INC. GRANT APPLICATION

Additional sheets may be attached if more space is needed for a response. Reference the item number(s) on all attachments. You may also create your own application form, provided the item numbers and text listed on this original application are recreated in their entirety.

(1) Legal name of organization: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

(2) Contact person: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email Address: \_\_\_\_\_

(3) Names and addresses of officers and executive director:

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(4) Names and addresses of directors:

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(5) Compensation of officers, directors, and all employees:

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(6) Charitable purpose of organization: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(7) How long has organization been in existence? \_\_\_\_\_

(8) Describe geographic area and number of individuals served by organization?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(9) Grant amount requested: \$ \_\_\_\_\_

(10) Will/has organization applied for this same grant to any other organizations or foundations? \_\_\_\_Y\_\_\_\_N

(11) If you answered YES to question #10, please list all organizations or foundations to which you will or have applied:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(12) Purpose(s) for which this grant is requested:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(13) How will this grant benefit your service population?

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(14) Will your project still be feasible if our Foundation grants only a portion of the funds requested in this application?  
Will you be able to raise matching funds if our Foundation provides you with a challenge grant?

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(15) Describe your fundraising activities over the previous eighteen (18) month period, and include the net amount raised for each activity:

ty: \_\_\_\_\_

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(16) Describe your planned fundraising activities for the upcoming twelve (12) month period:

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(17) If your organization was awarded a grant from Hayswood Foundation in 2008, briefly account for the use of that grant, including a summary of how the funds were spent, and note if any of those funds remain unused.

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(18) Attachments to this application must include the following:

- (a) Copy of determination letter from the Internal Revenue Service recognizing organization as tax exempt. If a 501(c)(3) organization, provide a copy of that determination letter.
- (b) Organization's current assets and liabilities, certified by an officer or the Executive Director;
- (c) Statement of organization's receipts and disbursements for the last two fiscal years;
- (d) Detailed narrative statement of use of any Hayswood funds granted to organization during the past three years;
- (e) Detailed narrative statement of proposed use of funds requested in this application; and
- (f) If applying organization is a school, written evidence of current accreditation.

(19) Discretionary attachments and presentation:

You may submit additional documentation to explain and support this grant request. You should also be prepared to appear before the Hayswood Grant Committee, if requested by the Committee, to make an oral and/or visual presentation to supplement this written application.

I certify, to the best of my knowledge, the accuracy of the information provided on and with this application.

\_\_\_\_\_  
Signature and title of organization's chief executive officer or executive director

\_\_\_\_\_  
Typed/Printed name

\_\_\_\_\_  
Date

# HEDGES-BARNETT SCHOLARSHIP

## 2009 Application Form and Instructions

Hayswood Foundation, Inc., Administrator  
1 West McDonald Parkway, Suite 3A  
Maysville, KY 41056

The attached application form is to be submitted when applying for the Hedges-Barnett Scholarship. Answer all questions as completely as possible, and pay careful attention to the section on Page 1 that lists additional information that must be submitted in order for an application to be considered complete. If you have questions, contact the Bracken County High School Guidance Counselor's office, or the office of Hayswood Foundation by calling (606) 563-9333, or by email to [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net).

**ELIGIBILITY:** The Hedges-Barnett Scholarship is available to current and past members of the graduating class of Bracken County High School. First-time recipients will be selected from the current high school graduating class, only. Current recipients may reapply, but their merit will be evaluated against all other applications received. Applicants must be planning to attend an accredited post-secondary institution in the state of Kentucky. The selection process is based on financial need, academics, and extra-curricular activities. Students who have already completed or attended four years of college are not eligible. Members of the families of the directors or staff of Hayswood Foundation, Inc., or of the family of the scholarship's donor, are not eligible.

**SUBMISSION DEADLINE:** Completed applications ("Completed" applications consist of the attached 5-page application form plus all materials required to be submitted in addition to the application form.) must be received in the Bracken County High School Guidance Counselor's office, or the office of Hayswood Foundation (address, above) no later than **3:00 P.M. Thursday, April 23, 2009.**

**ATTACHMENTS:** Pay careful attention to the section on Page 1 that lists additional information that must be submitted in order for an application to be considered complete. Included is proof of submission of the Free Application for Federal Student Assistance (FAFSA). Start that submission process now, if you have not already done so. Make or print a copy of your FAFSA application to submit with this scholarship application.

**AWARDS:** Scholarships are awarded for one-year periods. The amount of the scholarship is subject to change from year to year. Past recipients must reapply for future consideration. Scholarships are paid directly to the financial aid office of the recipient's school in equal payments prior to each semester or quarter. Withdrawing from school for any reason, other than serious illness, injury, or other reason acceptable to the Foundation, will result in loss of funding. No scholarship will be paid after a student completes what would be considered the senior year of study.

**CONFIDENTIALITY:** While the information provided on or with this application form will be treated as confidential, it will be made available to the Bracken County High School Scholarship Selection Committee for evaluation and selection purposes, and to the Board of Directors and staff of Hayswood Foundation, Inc. for final approval. To ensure privacy during delivery, it is recommended that application materials be placed in a sealed envelope.

# HEDGES-BARNETT SCHOLARSHIP

APPLICATION DEADLINE 3:00 P.M. THURSDAY, APRIL 23, 2009

## GENERAL INSTRUCTIONS

- Carefully review each section of this application and respond as requested. All responses to the questions on this form must be clearly typed or printed in ink. If you have a question, contact the Bracken County High School Guidance Office (735-3153) or the office of Hayswood Foundation (606-563-9333, or hayswoodfoundation@maysvilleky.net)
- Write only on the front of the application sheets, and on the front of any attachments to the application. Information placed on the back of sheets may be missed when copying. When additional sheets must be attached to answer any question, indicate in the answer space that separate sheets are attached, and indicate on those sheets the section of the application that is being supplemented
- The applicant's name must appear on all supplemental information attached to or accompanying the application.
- Documents and letters required has supplements to this application are considered parts of a "completed" application, and are subject to the deadline stated above

## VERY IMPORTANT: INFORMATION TO BE ATTACHED TO, OR PROVIDED FOR THIS APPLICATION

**NOTE: Current scholarship recipients who are submitting this application to retain their scholarships need not resubmit any item in this section which is marked with an asterisk (\*).**

- \*1. Attach a copy of your official transcript for all high school academic credits.
2. Attach a copy of your official transcript for any college or approved post-secondary courses completed
- \*3. Attach a copy of your most recent ACT and/or SAT scores
4. Attach a **BRIEF** statement about your ambitions (college & career plans), and about what receiving a scholarship would mean/has meant to you.
- \*5. Attach a recent black & white or color photograph. Photos of first-time recipients may be publicized in a news release. We will make every reasonable effort to return photos
- \*6. Provide three letters of recommendation. Two must be written by current or past teachers/instructors who have taught you in a classroom environment. The third must come from someone outside of school. Each letter is to be mailed or delivered directly to the BCHS guidance office by the author. Letters not received at the BCHS guidance office by the application deadline of 3:00 p.m. Thursday, April 23, 2009 will not be accepted. Letters written by relatives of the applicant, or any employee or director of Hayswood Foundation, Inc. will not be accepted. Provide the attached handouts to the authors of your letters so that they will be aware of these requirements.
7. Attach a copy of your 2009 Free Application for Federal Student Aid (FAFSA), along with a copy of the Student Aid Report (SAR) that you received in response to your FAFSA (If you have not yet received your SAR, submit this application with the attached FAFSA copy, then submit the SAR copy as soon as it arrives. SAR's submitted after the application deadline will be accepted.)
8. Attach a copy of any Forms W-2 that you received for employment in 2008, along with a signed copy of your 2008 federal income tax return, if you were required to file
9. Attach copies of your parents' Forms W-2 for 2008, along with signed copies of their federal income tax returns filed for 2008

## PERSONAL INFORMATION OF APPLICANT

**NOTE: Current scholarship recipients who are submitting this application to retain their scholarships need not answer any item in this section which is marked with an asterisk (\*).**

Name \_\_\_\_\_ Last 4 Digits of Social Security No.: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone Number.: \_\_\_\_\_ Phone number where you can be reached at college: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Marital status: ( ) single ( ) married Number of dependents: \_\_\_\_\_

\*Rank in graduating class: \_\_\_\_\_ of \_\_\_\_\_ total graduates

Current enrollment status: ( ) high school student ( ) college student, and in \_\_\_\_\_ year ( ) not currently enrolled

Current cumulative grade point average, or cumulative GPA at the end of last semester attended: \_\_\_\_\_

Name(s) of parent(s)/guardian(s): \_\_\_\_\_

Address of parent(s)/guardian(s): \_\_\_\_\_

Do you have a brother or sister (including step brothers and sisters, and adopted siblings) who has received a Hedges-Barnett scholarship? If yes, write the name(s) below. \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**PERSONAL INFORMATION OF APPLICANT, CONTINUED**

Extra-curricular activities for school, community, your family, and/or church (This section is important, so be specific and complete in your descriptions. Attach a separate sheet, if needed, and indicate below that there is an attachment.):

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

College you plan to attend, or are attending, and its location: \_\_\_\_\_

### APPLICANT'S FINANCIAL NEED

Itemize, below, your expenses for attending college during the full upcoming school year. Include costs of tuition, housing, meal plans, books, and fees related to enrollment or classes (If you are uncertain of the exact amounts, estimates of expenses can be obtained by contacting your college's financial aid office.) **Do not list expenses for transportation or for personal items, as they are not considered when awarding scholarships.**

**NATURE OF EXPENSE**

DOLLAR AMOUNT

[illegible]

Total Expenses \$

[illegible]

Indicate, below, your assets including checking and savings accounts, certificates of deposit, savings bonds, stocks, other bonds, trust funds, real estate, and vehicles.

[illegible]

Date \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**PERSONAL INFORMATION OF PARENT(S)/GUARDIAN(S)**

With whom does applicant reside? ☐ both parents ☐ father ☐ mother ☐ step father ☐ step mother ☐ other

Please check one of the boxes to the right if parents are divorced ☐ or separated ☐

Are both parents living? ☐ yes ☐ no

Father's name: \_\_\_\_\_ Father's age: \_\_\_\_\_

Father's address (if same as applicant's, write "same"): \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

Position held: \_\_\_\_\_

Mother's name: \_\_\_\_\_ Mother's age: \_\_\_\_\_

Mother's address (if same as applicant's, write "same"): \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

Position held: \_\_\_\_\_

List dependents (other than the applicant) for federal income tax purposes in 2008:

Name	Relationship to applicant	Age	If living w/family, check here	Name of school, if attending	Grade level



Applicant's Name: \_\_\_\_\_

**FINANCIAL INFORMATION OF PARENTS/GUARDIANS**

**Annual Income and Deductible Expenses**

**Actual 2008 Amounts From  
Federal Income Tax Return**

**Estimated Amounts for 2009**

Adjusted gross income \_\_\_\_\_

Adjusted gross income \_\_\_\_\_

Net taxable income \_\_\_\_\_

Net taxable income \_\_\_\_\_

Tax-exempt income \_\_\_\_\_

Tax-exempt income \_\_\_\_\_

Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

**Assets and Liabilities at the Time of This Application**

1 Market value of home, if owned \$ \_\_\_\_\_

5 Other investments (stocks,  
bonds, etc.): \_\_\_\_\_

2 Market value of other real estate \_\_\_\_\_

6 Total of lines 1 through 5: \_\_\_\_\_

3 Dollar value of share of business  
or farm \_\_\_\_\_

7 Total indebtedness: \_\_\_\_\_

4 Total bank deposit accounts \_\_\_\_\_

8 Net assets (Line 6 minus  
Line 7): \$ \_\_\_\_\_

**ADDITIONAL INFORMATION**

Other than parental assistance, and assets of the applicant listed on page 3 of this application, list any additional sources of support that are available to the applicant for use toward the cost of education

Explain any circumstances that create a financial hardship which would not be apparent from the information reported elsewhere on this application (Attach a separate sheet if necessary.).

**CERTIFICATION BY PARENTS/GUARDIANS**

I/We have reviewed this application for omissions and errors. To the best of my/our knowledge, the information reported is complete and accurate. I/We agree to inform Hayswood Foundation, Inc. of any major changes in our financial status as reported

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR FIRST-TIME APPLICANTS, AND THOSE WHO HAVE NOT PREVIOUSLY  
RECEIVED FUNDS FROM THE HEDGES-BARNETT SCHOLARSHIP PROGRAM**

It is crucial that the authors of your letter's of recommendation understand our requirements for the proper and timely submission of their letters. If a letter is not in our office by the application deadline, the application is incomplete and ineligible for consideration. To help this process operate as smoothly as possible, write your name on each of these three instruction forms, separate the forms, and provide one to each individual you select to write a letter. Remember that you are ultimately responsible for ensuring that the letters are submitted, so remember to follow up with each author to see if their letter has been completed and delivered.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for the 2008-2009 Hedges-Barnett Scholarship. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of Hayswood Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2008. Your letter should be no longer than one page, single side. Indicate in your letter if you are a current/past teacher or other individual acquainted with the applicant. **Do not give your completed letter to the applicant.** Instead, direct it to the Guidance Counselor's office at Bracken County High School no later than **3:00 p.m. on Thursday, April 24, 2008.** A late letter will result in the disqualification of the student's application. Submission may be in person, or by mail at the following address: Bracken County High School, Attn: Tammi Wright, 350 West Miami Street, Brooksville, Kentucky, 41004. If by mail, ensure adequate time for delivery. If in person, have your letter in a sealed envelope addressed to Ms. Wright's attention. If you have any questions, please call Ms. Wright at (606) 735-3153, or contact the Foundation office at (606) 563-9333, or email [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). We appreciate your time and effort in support of this student.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for the 2008-2009 Hedges-Barnett Scholarship. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of Hayswood Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2008. Your letter should be no longer than one page, single side. Indicate in your letter if you are a current/past teacher or other individual acquainted with the applicant. **Do not give your completed letter to the applicant.** Instead, direct it to the Guidance Counselor's office at Bracken County High School no later than **3:00 p.m. on Thursday, April 24, 2008.** A late letter will result in the disqualification of the student's application. Submission may be in person, or by mail at the following address: Bracken County High School, Attn: Tammi Wright, 350 West Miami Street, Brooksville, Kentucky, 41004. If by mail, ensure adequate time for delivery. If in person, have your letter in a sealed envelope addressed to Ms. Wright's attention. If you have any questions, please call Ms. Wright at (606) 735-3153, or contact the Foundation office at (606) 563-9333, or email [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). We appreciate your time and effort in support of this student.

Applicant's Name: \_\_\_\_\_

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## **Have you remembered to do the following?**

- ☐ Review all information on the application for accuracy.
- ☐ Place your name at the tops of pages 2 - 5 of the application, and on each piece of supplemental information accompanying the application form.
- ☐ Provide a written statement of your goals, and what receiving this scholarship would mean/has meant to you.
- ☐ Provide a recent black & white or color photo (Applies only to first-time applicants, and those who are re-applying but have never received a scholarship.).
- ☐ Provide a copy of your high school transcript (Applies only to applicants currently in high school.).
- ☐ Provide a copy of your most recent ACT or SAT score.  
(Does not apply to current recipients applying to continue receipt of scholarship.)
- ☐ Provide copies of all college transcripts, if applicable.
- ☐ Provide copies of your 2008 Forms W-2, if applicable.
- ☐ Provide copies of pages 1 and 2 of your 2008 federal income tax form, if applicable.
- ☐ Provide copies of your parents' 2008 Forms W-2.
- ☐ Provide copies of pages 1 and 2 of your parents' 2008 federal income tax return.
- ☐ Provide copies of your 2009 Free Application for Federal Student Aid and the Student Aid Report that you received in response (SAR's not yet received are to be submitted upon receipt.)
- ☐ Select three qualified individuals to submit letters of recommendations.  
(Does not apply to current recipients applying to renew their scholarships.)
- ☐ Sign the application at the bottom of page 3.
- ☐ Have your parent(s) or guardian(s) sign at the bottom of page 5.
- ☐ Arrange for the delivery of your application to the BCHS counselor's office, along with all required information, before this year's deadline of 3:00 p.m. on Thursday, April 23.

# PAT MOORE SCHOLARSHIP PROGRAM

## 2009 Application Form and Instructions

Hayswood Foundation, Inc., Administrator  
1 West McDonald Parkway, Suite 3A  
Maysville, KY 41056

The Pat Moore Scholarship was established by Hayswood Foundation in memory of a man who devoted much of his life to the young people who loved sports as much as he did. Charles Patrick Moore was a 1988 graduate of Maysville High School, and was elected to the 10th Region Hall of Fame for his skills as a basketball player. At the time of his death in May, 2002, Pat was only thirty-two years of age. He was an employee of the Maysville Housing Authority where he was the Resident Initiative Coordinator, and Chairman of the local Salvation Army chapter. Pat was an assistant coach for the Mason County High School Varsity basketball team, and head coach of the freshman basketball team. In past years, Pat had coaching experience at St. Patrick's and Fleming County High Schools, and was well-known in the Maysville community for his work with the "Dirt Bowl" basketball competitions. At the time of his death, Pat was also on the Board of Directors of Hayswood Foundation.

The attached application form is to be submitted only when applying for the Pat Moore Scholarship (Separate forms are used when applying for other Hayswood Foundation scholarships). Answer all questions as completely as possible, and pay careful attention to the section on Page 1 that lists additional information that must be submitted in order for an application to be considered complete. If you have questions, contact the Foundation office immediately by calling (606) 563-9333, or by email to [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net).

**SUBMISSION DEADLINE:** Completed applications ("Completed" applications consist of the attached 5-page application form plus all materials required to be submitted in addition to the application form.) must be in the Foundation office (at the address, above) no later than **5:00 P.M. Friday, April 24, 2009.**

**ATTACHMENTS:** Pay careful attention to the section on Page 1 that lists additional information that must be submitted in order for an application to be considered complete. Included is proof of submission of the Free Application for Federal Student Assistance (FAFSA). Start that submission process now, if you have not already done so. Make or print a copy of your FAFSA application to submit with this scholarship application.

**AWARDS:** Scholarships are awarded for one-year periods. Past recipients must reapply for future consideration. Scholarships are paid directly to the financial aid office of the recipient's school in equal payments prior to each semester or quarter. Withdrawing from school for any reason, other than serious illness, injury, or other reason acceptable to the Foundation, will result in loss of funding. No scholarship will be paid after a student completes what would be considered the senior year of study.

**CONFIDENTIALITY:** While the information provided on or with this application form will be treated as confidential, it will be made available to the Scholarship Committee, Board of Directors, and staff of Hayswood Foundation, Inc. for evaluation and selection purposes. To ensure privacy prior to receipt by the Foundation, it is recommended that application materials be placed in a sealed envelope.

## General Eligibility Requirements

The Pat Moore Scholarship is available to graduating seniors at Mason County High School, Fleming County High, or St. Patrick High School, or past graduates of one of those schools. Applicants must have participated, for at least one season, as an athlete on a team at one of these schools. Participation in cheerleading, or in intramural sports, does not qualify. Applicants must be under the age of twenty-five at the time of initial application. Applicants may attend any accredited college or university in the United States, provided they are enrolled as a full-time student for undergraduate studies.

The selection process is based on financial need, academics, and extra-curricular activities. To be considered, a 2.50 cumulative grade point average or better is required.

# PAT MOORE SCHOLARSHIP APPLICATION

## GENERAL INSTRUCTIONS

- All responses to questions on this form must be clearly typed or printed in ink. If you have questions, contact our office by calling 563-9333, or by email to [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net).
- Write only on the front of the application sheets, and on the front of any attachments to the application. Information placed on the back of sheets may be missed when copying. When additional sheets must be attached to answer any question, indicate in the answer space that separate sheets are attached, and indicate on those sheets the section of the application that is being supplemented.
- The applicant's name must appear on all supplemental information attached to or accompanying the application.

## VERY IMPORTANT: INFORMATION TO BE ATTACHED TO, OR PROVIDED FOR THIS APPLICATION

**NOTE: Current scholarship recipients who are submitting this application to retain their scholarships need not resubmit any item in this section which is marked with an asterisk (\*).**

- \*1 If you are currently a high school student, attach a copy of your official transcript for all high school academic credits.
- 2 Attach a copy of your official transcript for any college courses completed.
- \*3. Attach a copy of your most recent ACT and/or SAT scores.
- 4 Attach a BRIEF (1 page or less) statement about your ambitions (college & career plans), what receiving a scholarship would mean/has meant to you, and why you believe you are deserving.
- \*5 Attach a recent black & white or color photograph. Photos of first-time recipients will be publicized in a news release. We make every effort to return photos.
- \*6. Provide three letters of recommendation. One must be written by your high school coach or athletic director, or by your college coach or athletic director if you are participating in sports at that level. One must be written by a current or past teacher who is not a member of the athletic department, and who taught you in a classroom environment. The third must come from a non-school source. Each letter is to be mailed or delivered directly to the Foundation office by the author, and must be received at the Foundation office by the application deadline. Letters written by relatives of the applicant, or any employee or director of Hayswood Foundation will not be accepted. Letters must be dated, and may not be dated prior to January 1, 2009. Provide the attached handouts to the authors of your letters so that they will be aware of these requirements.
- 7 Attach a copy of your 2009 Free Application for Federal Student Aid (FAFSA), along with a copy of the Student Aid Report (SAR) that you received in response to your FAFSA. If you have not yet received your SAR, attach a copy of your FAFSA, then submit a copy of your SAR as soon as it arrives (SAR's submitted after the application deadline will be accepted).
8. Attach a copy of any Forms W-2 that you received for employment in 2008, along with a signed copy of pages 1 & 2 of your 2008 federal income tax return, if you were required to file.
- 9 Attach copies of your parents' Forms W-2 for 2008, along with signed copies of pages 1 & 2 of their 2008 federal income tax returns. If your parents are separated or divorced, we will need this tax information from **BOTH** parents. If unable to provide the second parent's information, the parent with custody must submit a signed statement that the information is unavailable, and give the reason.

## PERSONAL INFORMATION OF APPLICANT

**NOTE: Current scholarship recipients who are submitting this application to retain their scholarships need not answer any item in this section which is marked with an asterisk (\*).**

Name: \_\_\_\_\_ Last 4 Digits of Social Security No : \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Phone number where you can be reached at college: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Marital status: ( ) single ( ) married Number of dependents: \_\_\_\_\_

\*High school attended: \_\_\_\_\_ \*Rank in graduating class: \_\_\_\_\_ of \_\_\_\_\_ total graduates

Current enrollment status: ( ) high school student ( ) college student, and in \_\_\_\_\_ year ( ) not currently enrolled

Current cumulative grade point average, or cumulative GPA at the end of last semester attended: \_\_\_\_\_

Name(s) of parent(s)/guardian(s): \_\_\_\_\_

Address of parent(s)/guardian(s): \_\_\_\_\_

Do you have a brother or sister (including step brothers and sisters, and adopted siblings) who has received a Pat Moore scholarship? If yes, write the name(s) below.

\_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**PERSONAL INFORMATION OF APPLICANT, CONTINUED**

List extra-curricular activities for school, community, your family, and church. This section is important, so be specific and complete in your descriptions. Attach a separate sheet, if needed, and indicate below that there is an attachment.

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List sports played during high school (other than intramural) and mark the years of participation

	Freshman	Sophomore	Junior	Senior
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

College you plan to attend, or are attending, and its location. \_\_\_\_\_

**APPLICANT'S FINANCIAL NEED**

Itemize, below, your expenses for attending college during the full upcoming school year. Include costs of tuition, housing, meal plans, books, and fees related to enrollment or classes (If you are uncertain of the exact amounts, estimates of expenses can be obtained by contacting your college's financial aid office.) **Do not list expenses for transportation or for personal items, as they will not be considered when awarding scholarships.**

NATURE OF EXPENSE	DOLLAR AMOUNT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total Expenses	\$ _____

Applicant's Name: \_\_\_\_\_

#### APPLICANT'S FINANCIAL ASSISTANCE

List other grants or scholarships for which you have applied (even if you have not been notified of receipt), and which have been awarded to you for the upcoming school year (indicate the amount you will receive for the **FULL** school year). **DO NOT LIST STUDENT LOANS.** Seeking other sources of assistance will not lessen your chance of being selected. Should any of this information change, contact the Foundation office immediately. If selected, you will be required to submit a copy of the financial assistance award letter that you receive from your college.

SOURCE OF ASSISTANCE	INDICATE IF AWARDED OR APPLIED FOR	AMOUNT AWARDED (IF APPLICABLE)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total of Other Assistance \$ \_\_\_\_\_

If you received more financial aid in past years than was needed for your expenses, and surplus funds are available in your college account for future use, show the amount of that surplus here.  
Do not include funds from student loans, or personal or family contributions. \$ \_\_\_\_\_

Total of All Other Funds Available

#### APPLICANT'S ASSETS

Indicate, below, your assets including checking and savings accounts, certificates of deposit, savings bonds, stocks, other bonds, trust funds, real estate, and vehicles

NATURE OF ASSET	VALUE	HOW OBTAINED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

As an applicant for the Pat Moore Scholarship, I certify that the information I have provided on this application is correct to the best of my knowledge. I understand that my submission of this application in no way guarantees that funds will be awarded. If selected, I understand that (1) I may attend the college of my choice, provided the institution is accredited, (2) all scholarship funds awarded will be paid directly to my college's Financial Aid Office, to be applied toward my expenses under the college's normal procedures for the administration of scholarships (The Foundation reserves the right to reclaim any funds which remain unused at the end of the school year, or consider the amount of those unused funds in determining the amount of future awards), (3) I must submit a copy of my grades to the Foundation at the completion of each semester, as well as evidence of my enrollment for the subsequent semester, (4) I must disclose to the Foundation any additional financial assistance received following the submission of this application, (5) the Foundation reserves the right to cancel any scholarship for failure of a recipient to meet academic requirements, or because of a recipient's unlawful conduct, and (6) selection as a recipient for the upcoming school year does not guarantee funding for any subsequent year.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Applicant's Name: \_\_\_\_\_

**PERSONAL INFORMATION OF PARENT(S)/GUARDIAN(S)**

With whom do you reside? ( ) both parents ( ) father ( ) mother ( ) step father ( ) step mother ( ) other

Please check one of the boxes to the right if parents are divorced ( ) or separated ( )

Are both parents living? ( ) yes ( ) no

Father's name: \_\_\_\_\_ Father's age: \_\_\_\_\_

Father's address (if same as applicant's, write "same"): \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

Position held: \_\_\_\_\_

Mother's name: \_\_\_\_\_ Mother's age: \_\_\_\_\_

Mother's address (if same as applicant's, write "same"): \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

Position held: \_\_\_\_\_

List dependents (other than the applicant ) for federal income tax purposes in 2008 (If parents are divorced, list dependents for both.)

Name	Relationship to applicant	Age	If living w/family, check here	Name of school, if attending	Grade level



Applicant's Name: \_\_\_\_\_

**FINANCIAL INFORMATION OF PARENTS/GUARDIANS**

**Annual Income and Deductible Expenses**

**Actual 2008 Amounts From  
Federal Income Tax Return**

**Estimated Amounts for 2009**

Adjusted gross income \_\_\_\_\_

Adjusted gross income \_\_\_\_\_

Net taxable income \_\_\_\_\_

Net taxable income \_\_\_\_\_

Tax-exempt income \_\_\_\_\_

Tax-exempt income \_\_\_\_\_

Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

Income derived from all other  
sources (including pre-paid living  
expenses, travel allowances,  
deferred retirement) \_\_\_\_\_

**Assets and Liabilities at the Time of This Application**

1 Market value of home, if owned. \$ \_\_\_\_\_

5 Other investments (stocks,  
bonds, etc.): \_\_\_\_\_

2 Market value of other real estate \_\_\_\_\_

6 Total of lines 1 through 5: \_\_\_\_\_

3 Dollar value of share of business  
or farm. \_\_\_\_\_

7 Total indebtedness: \_\_\_\_\_

4 Total bank deposit accounts. \_\_\_\_\_

8 Net assets (Line 6 minus  
Line 7): \$ \_\_\_\_\_

**FINANCIAL INFORMATION OF NON-CUSTODY PARENT (IF PARENTS ARE DIVORCED)**

(If unavailable, parent with custody must provide a written statement to that effect, and explain why.)

**Annual Income and Deductible Expenses**

**Actual 2008 Amounts From  
Federal Income Tax Return**

**Estimated Amounts for 2009**

Adjusted gross income \_\_\_\_\_

Adjusted gross income \_\_\_\_\_

Net taxable income \_\_\_\_\_

Net taxable income \_\_\_\_\_

Tax-exempt income \_\_\_\_\_

Tax-exempt income \_\_\_\_\_

Income derived from all other  
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or farm: \_\_\_\_\_

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8 Net assets (Line 6 minus  
Line 7): \$ \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

### ADDITIONAL INFORMATION

Other than parental assistance, and assets of the applicant listed on page 3 of this application, list any additional sources of support that are available to the applicant for use toward the cost of education.

Explain any circumstances that create a financial hardship which would not be apparent from the information reported elsewhere on this application (Attach a separate sheet if necessary.)

### CERTIFICATION BY PARENTS/GUARDIANS

**(If parents are divorced, the signature of the parent with custody is sufficient)**

I/We have reviewed this application for omissions and errors. To the best of my/our knowledge, the information reported is complete and accurate. I/We agree to inform Hayswood Foundation, Inc. of any major changes in our financial status as reported.

**Signature**

Date \_\_\_\_\_

Signature

Date \_\_\_\_\_

**FOR FIRST-TIME APPLICANTS, AND THOSE WHO HAVE NOT PREVIOUSLY  
RECEIVED FUNDS FROM THE PAT MOORE SCHOLARSHIP PROGRAM**

It is crucial that the authors of your letter's of recommendation understand our requirements for the proper and timely submission of their letters. If a letter is not in our office by the application deadline, the application is incomplete and ineligible for consideration. To help this process operate as smoothly as possible, write your name on each of these three instruction forms, separate the forms, and provide one to each individual you select to write a letter. Remember that you are ultimately responsible for ensuring that the letters are submitted, so remember to follow up with each author to see if their letter has been completed and delivered.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for the 2009-2010 Pat Moore Scholarship. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of Hayswood Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2009. Your letter should be no longer than one page, single side. Indicate in your letter if you are a current/past teacher, current/past coach or school athletic director, or other individual acquainted with the applicant. **Do not give your completed letter to the applicant.** Instead, deliver or mail it directly to the Foundation office no later than **5:00 p.m. on Friday, April 24, 2009.** A late letter will result in the disqualification of the student's application. Submission may be by mail or in person at the following address: Hayswood Foundation, Inc., 1 West McDonald Parkway, Suite 3A, Maysville, Kentucky, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope ready in case our office is closed and it is necessary to slide the letter under the office door. If you regularly write letters for many students, you may mail or deliver multiple letters at a time. If you have any questions, please call the Foundation office at (606) 563-9333, or email us at [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). We appreciate your time and effort.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for the 2009-2010 Pat Moore Scholarship. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of Hayswood Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2009. Your letter should be no longer than one page, single side. Indicate in your letter if you are a current/past teacher, current/past coach or school athletic director, or other individual acquainted with the applicant. **Do not give your completed letter to the applicant.** Instead, deliver or mail it directly to the Foundation office no later than **5:00 p.m. on Friday, April 24, 2009.** A late letter will result in the disqualification of the student's application. Submission may be by mail or in person at the following address: Hayswood Foundation, Inc., 1 West McDonald Parkway, Suite 3A, Maysville, Kentucky, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope ready in case our office is closed and it is necessary to slide the letter under the office door. If you regularly write letters for many students, you may mail or deliver multiple letters at a time. If you have any questions, please call the Foundation office at (606) 563-9333, or email us at [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). We appreciate your time and effort.

Applicant's Name: \_\_\_\_\_

You have been selected to write a letter of recommendation for a student who is applying for the 2009-2010 Pat Moore Scholarship. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of Hayswood Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2009. Your letter should be no longer than one page, single side. Indicate in your letter if you are a current/past teacher, current/past coach or school athletic director, or other individual acquainted with the applicant. **Do not give your completed letter to the applicant.** Instead, deliver or mail it directly to the Foundation office no later than **5:00 p.m. on Friday, April 24, 2009.** A late letter will result in the disqualification of the student's application. Submission may be by mail or in person at the following address: Hayswood Foundation, Inc., 1 West McDonald Parkway, Suite 3A, Maysville, Kentucky, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope ready in case our office is closed and it is necessary to slide the letter under the office door. If you regularly write letters for many students, you may mail or deliver multiple letters at a time. If you have any questions, please call the Foundation office at (606) 563-9333, or email us at [hayswoodfoundation@maysvilleky.net](mailto:hayswoodfoundation@maysvilleky.net). We appreciate your time and effort.

## Have you remembered to do the following?

- ☐ **Review all information on the application for accuracy.**
- ☐ **Place your name at the tops of pages 2 - 6 of the application, and on each piece of supplemental information accompanying the application form.**
- ☐ **Provide a written statement of your goals, what receiving this scholarship would mean/has meant to you, and why you are deserving of consideration.**
- ☐ **Provide a recent black & white or color photo** (Applies only to first-time applicants, and those who are re-applying but have never received a scholarship ).
- ☐ **Provide a copy of your high school transcript** (Applies only to applicants currently in high school.).
- ☐ **Provide a copy of your most recent ACT or SAT score** (Does not apply to current recipients applying to continue receipt of scholarship.)
- ☐ **Provide copies of all college transcripts, if applicable.**
- ☐ **Provide copies of your 2008 Forms W-2, if applicable.**
- ☐ **Provide copies of pages 1 and 2 of your 2008 federal income tax form, if applicable.**
- ☐ **Provide copies of your parents' 2008 Forms W-2** (If your parents are divorced, we need W-2's from both, or a signed statement from the parent with custody that the information is unavailable, and why.).
- ☐ **Provide copies of pages 1 and 2 of your parents' 2008 federal income tax return** (If your parents are divorced, we need W-2's from both, or a signed statement from the parent with custody that the information is unavailable, and why.)
- ☐ **Provide copies of your 2009 Free Application for Federal Student Aid and the Student Aid Report that you received in response** (SAR's not yet received are to be submitted upon receipt ).
- ☐ **Select three qualified individuals to submit letters of recommendations.**  
(Does not apply to current recipients applying to renew their scholarships.)
- ☐ **If your parents are divorced, and you are not providing a W-2, income tax return, and/or financial information requested on Page 6 for the non-custody parent, provide a signed statement from the parent with custody that the information is unavailable, and why** (Only one signed statement is required to cover any and all omissions.).
- ☐ **Sign the application at the bottom of page 3.**
- ☐ **Have your parent(s) or guardian(s) sign at the bottom of page 5** (If your parents are divorced, only the signature of the parent with custody is required.).
- ☐ **Arrange for the delivery of your application to our office, along with all required information, before this year's deadline of 5:00 p.m. on Friday, April 24.**

**PROPOSED BYLAWS AMENDMENT 1**  
**RE: Director Residency Requirement**

Strikethroughs indicate wording that would be removed by the amendments.  
Highlighting indicates wording that would be added.

**Article II**

**Board of Directors**

- (1) **Qualifications.** Directors shall be selected for their ability and willingness to participate effectively in fulfilling the responsibilities of the Board of Directors. ~~Any reputable person at least TWENTY ONE years of age who resides in Mason County, Kentucky, or any contiguous Kentucky or Ohio county shall be eligible for service on the Board of Directors.~~ Any reputable person at least twenty-one years of age who has a substantial involvement in and knowledge of the community we serve, shall be eligible for service on the Board of Directors. A director may not be elected to a term after reaching the age of seventy years. No person shall serve more than two consecutive terms as a director under these bylaws, after which one year must elapse before that person become eligible for re-election.

**PROPOSED BYLAWS AMENDMENT 2**  
**RE: Director Maximum Age Limitation**

Strikethroughs indicate wording that would be removed by the amendments.  
Highlighting indicates wording that would be added.

**Article II**

**Board of Directors**

- (1) **Qualifications.** Directors shall be selected for their ability and willingness to participate effectively in fulfilling the responsibilities of the Board of Directors. Any reputable person at least TWENTY-ONE years of age who resides in Mason County, Kentucky, or any contiguous Kentucky or Ohio county shall be eligible for service on the Board of Directors. ~~A director may not be elected to a term after reaching the age of seventy years.~~ A director may not be elected to a term after reaching the age of seventy years, except:
- a) When the director-nominee possesses an extraordinary capability which relates to a specific problem area confronted by the Board;
  - b) Has not served on the Board in the previous two years;
  - c) Is unanimously nominated by the Evaluation and Nomination Committee, and the nomination is approved by the President of the Board, and
  - d) When there is no other director who will be serving pursuant to this exception.

No person shall serve more than two consecutive terms as a director under these bylaws, after which one year must elapse before that person become eligible for re-election.

**BY LAWS**  
**OF**  
**HAYSWOOD FOUNDATION, INC.**

\*\*\* \*\*

**Article I**

- (1) **Purpose.** Hayswood Foundation is organized exclusively for charitable, educational and scientific purposes, in the Kentucky counties of Mason, Bracken, Robertson, Fleming and Lewis and in the Ohio counties of Brown and Adams, and such other geographic areas as the Board of Directors shall determine by way of financial support, gifts and contributions within the meaning of Internal Revenue Code Section 501(c)(3).

**Article II**

**Board of Directors**

- (1) **Qualifications.** Directors shall be selected for their ability and willingness to participate effectively in fulfilling the responsibilities of the Board of Directors. Any reputable person at least twenty-one years of age, who has substantial involvement in and knowledge of the community we serve, shall be eligible for service on the Board of Directors. A director may not be elected to a term after reaching the age of seventy years, except:
- a) When the director-nominee possesses an extraordinary capability which relates to a specific problem area confronted by the Board;
  - b) Has not served on the Board in the previous two years;
  - c) Is unanimously nominated by the Evaluation and Nomination Committee, and the nomination is approved by the President of the Board; and
  - d) When there is no other director who will be serving pursuant to this exception.

No person shall serve more than two consecutive terms as a director under these bylaws, after which one year must elapse before that person become eligible for re-election.

- (2) **Number of Directors.** The Board of Directors shall consist of fifteen members.
- (3) **Nomination and Election of Directors.** The Evaluation and Nomination committee shall nominate a number of nominees, which exceeds the number of director's positions to be filled by one. There shall be no nominations from the floor without unanimous approval of the directors in attendance at an election meeting, but the Board may, by majority vote, instruct the Evaluation and Nomination

Committee to submit other or additional nominees and may postpone an election pending such new nominations. The committee shall meet each year and submit its nominees to the full Board for consideration and election at the October meeting of the Board of Directors. The election shall be by secret ballot and plurality of all votes cast shall elect. Each director shall be permitted to cast the number of votes equal to the number of positions to be filled, but no director shall be permitted to cast more than one vote per nominee. Should there be a failure to elect the full number of directors intended to be elected due to a tie vote, a secret ballot shall be taken upon the tied nominees without additional nominees.

- (4) **Terms of Office.** There shall be at all times five classes of directors and all directors shall be elected to specified class. Each class shall be designated by the year in which the term of office of the directors composing that class expires. Each director's term shall begin with the Annual Meeting next succeeding his election. Except for the initial Board of Directors serving under these bylaws, each class of directors shall serve for a period of five years.
- (5) **Vacancy.** Upon the occurrence of a vacancy in any class, the Nominating Committee, at any meeting, shall submit a list of nominees to fill the vacancy. Upon submission, the vacancy may be filled by a majority vote of the directors present, which vote shall be taken by secret ballot. A plurality of all votes cast shall elect. The elected nominee shall serve, as a member of the same class in which the vacancy had occurred. His term shall expire with the term of that class, and he shall be deemed to have held the director's seat for a full five year term, regardless of the smaller number of years actually served.
- (6) **Removal.** Directors may be removed for cause by the Board of Directors at any regular meeting, or any special meeting called for that purpose. Failure of any director to attend three consecutive meetings of the Board without good cause shall be grounds for removal of such director from the Board of Directors by a majority vote of all directors then serving on the Board.
- (7) **Resignation.** The resignation of a director shall be in writing and directed to the corporate secretary.
- (8) **Meetings.** The Board of Directors shall hold regular meetings on the second Tuesday of January, May, August and October of each calendar year. The Chairman shall have the power to cancel any regular meeting, provided there is insufficient business to warrant such a meeting, and there is no objection from three or more Board members. The Chairman shall also have the power to change the date, both month and day, of any regular meeting, provided that the revised date falls within 60 days of the cancelled meeting.
- (9) **Annual Meeting.** The regular meeting of the Board of Directors in January shall be the Annual Meeting.



- (10) **Special Meetings.** Special meetings of the Board of Directors may be called by the Chairman at any time, and shall be called by any officer upon written request of any three directors. Notice of the meeting shall contain a statement of the business to be transacted, and at such meeting no business other than that stated in the notice shall be transacted unless waived in writing by all directors then on the Board. Notice of all special meetings shall be mailed or delivered to each member of the Board not less than twenty-four hours prior to the time thereof, provided that the Executive Committee may upon its certification of any emergency authorize the call of a special meeting with not less than three hours prior meeting notice by the best means it deems attainable.
- (11) **Quorum.** Fifty percent of the directors duly elected and serving shall constitute a quorum for the transaction of business at any regular or special meeting of the Board of Directors.
- (12) **Proxy.** No member may be represented or vote by proxy at any meeting of the Board of Directors.
- (13) **Conflict of Interest.**
- (a) A conflict of interest transaction is one in which a director of this corporation has a direct or indirect interest. A conflict of interest transaction shall not be voidable by the corporation solely because of the director's interest in the transaction if any one of the following is true:
    - (i) The material facts of the transaction and the director's interest were disclosed or known to the Board of Directors and the Board of Directors authorized, approved, or ratified the transaction; or
    - (ii) The transaction was fair to the corporation.
  - (b) For purposes of this section, a director of his corporation shall be considered to have an indirect interest in a transaction if:
    - (i) Another entity in which he or she has a material financial interest or in which he or she is a general partner is a party to the transaction; or
    - (ii) Another entity of which he or she is a director, officer or trustee is a party to the transaction and the transaction is or should be considered by the Board of Directors of the other corporation.
- (14) **Compensation.** No director shall at any time receive any form of compensation for his or her services as a director. Actual expenses incurred by a director on behalf of the corporation incidental to activities authorized by the Board of Directors may be reimbursed.

(15) **Powers.** The corporate powers, business, and properties of the corporation shall be exercised, managed and controlled by the Board of Directors, who are authorized to make appropriate delegations of authority through management agreements. Pursuant to Kentucky Revised Statute 273.221 or any subsequent amendment thereof, the Board of Directors, by resolution adopted by a majority of the directors in office, may designate and appoint one or more committees, each of which shall consist of two or more directors, and shall assist the Board of Directors in effectuating its corporate purposes.

(16) **General Standard for Directors.**

- (a) A director of this corporation, subject to Kentucky Revised Statutes 273.161 to 273.387 or any subsequent amendment thereof, shall discharge his or her duties as a director:
  - (i) in good faith;
  - (ii) on an informed basis; and
  - (iii) in a manner he or she honestly believes to be in the best interest of the corporation.
- (b) Such director shall be considered to discharge his or her duties on an informed basis if he or she inquires into the business and affairs of the corporation, or into a particular action to be taken or decision to be made, with the care an ordinarily prudent person in a like position would exercise under similar circumstances.
- (c) In discharging his or her duties, such director shall be entitled to rely on information, opinions, reports, or statements, including financial statements and other financial data, if prepared or presented by one or more officers of the corporation whom the director honestly believes to be reliable and competent in the matters presented, or legal counsel, public accountants, or other persons as to matters the director honestly believes are within the person's professional or expert competence.
- (d) A director of this corporation shall not be considered to act in good faith if he or she has knowledge, concerning the matter in question, that makes reliance otherwise permitted by subsection (c) of this section, unwarranted.
- (e) In addition to any other limitation on such director's liability for monetary damages contained in any provision of the corporation's articles of incorporation, any action taken as a director, or any failure to take any action as a director, shall not be the basis for monetary damages or injunctive relief unless the director has breached or failed to perform the duties of the director's office, and such breach or failure to perform constitutes willful misconduct or wanton or reckless disregard for human rights, safety or property.

### Article III

#### **Committees of the Board**

It shall be the duty of the President at the January meeting of the Board of Directors to appoint all standing committees. It shall be the duty of the President at any regular meeting, or special meeting called for that purpose, to appoint any special committee deemed advisable by the President or directed by the Board, and to fill any committee vacancies. Such committees shall have the powers and duties hereinafter recited and such further responsibilities as may, from time to time, be assigned by the Board, and each committee shall at all times be subject to the control of the Board. Committee members shall be directors of the Board except as otherwise provided by these bylaws. The Executive Director shall be an ex-officio non-voting member of each committee, but he or she may be excused from any committee meeting by the presiding chairman. The Chairman of each committee, excepting the Executive and Finance Committees, shall be appointed by the Board President. Each committee shall hold meetings as determined by need, shall keep records of its transacted business, and shall timely make a full report, together with recommendations for action, if any, at a regular meeting of the Board, or at a special meeting called for that purpose. Meetings shall be held upon the call of any member of the committee, and a majority of the members of the respective committees shall constitute a quorum for the transaction of business. Each committee may adopt other rules of procedure for its own meetings. Service by a board member on one committee does not preclude his or her concurrent service on any other committee or committees.

The corporation shall have the following standing committees:

- (1) **Executive Committee**: The Executive Committee shall have the power and authority to handle all corporate matters requiring immediate action and matters of a routine nature when the Board of directors is not in session, subject to any prior limitations imposed by the Board or law, and shall report all its activities to the Board in a timely fashion. Additionally, the Executive Committee shall be responsible for developing and recommending to the Board of Directors personnel policies and procedures, including the employment and termination of all employees, their compensation, and such other matters as relate to employment by the Board. The Executive Committee shall be composed of the President, Vice-President, Secretary, Treasurer and an additional member. The President of the Board shall be the Chairman of the Executive Committee and shall appoint the additional member from the board membership.
- (2) **Finance Committee**. The Finance Committee shall be responsible for overseeing the receipt, disbursement, control, accounting, management, and general administration of all funds, property and fiscal matters of the corporation. Prior to the May meeting of the Board of Directors, the Finance Committee shall develop its recommendation with respect to the maximum amount of funds, which can be applied to recipients for that yearly scholarship cycle. The recommendation shall be

presented to the Board of Directors at the May meeting. This recommendation shall be based on, at least, five percent of the fair market value of the Downing fund for the prior accounting year. Prior to the May meeting of the Board of Directors, the Finance Committee shall develop its recommendation with respect to maximum amount of funds or other properties which can be applied to charitable purposes of the corporation for that yearly grant cycle. The recommendation shall be based, at least in part, on the average monthly asset value of the corporation for the prior accounting year. All recommendations must comply with the minimum parameters required by the Internal Revenue Code of 1954 as amended as they relate to the activities of private foundations. The recommendations shall be presented to the Board of Directors at the May meeting. The Finance Committee shall consist of at least five members, one of which shall be the Treasurer of the Corporation, who shall serve as the Chairman of the Committee. It is declared policy of the board to achieve the financial growth of the organization while observing, at a minimum, the distribution requirements imposed upon private foundations by the Internal Revenue Code of 1954, as amended.

- (3) **Evaluation and Nomination Committee.** The Evaluation and Nomination Committee shall review the composition of the Board of Directors, shall make nominations for election of individual directors and officers, and shall review the performance of each Board Member in terms of his or her execution of board member responsibilities. Nothing shall preclude the nomination of a member of this committee for election as an officer of the corporation; nor shall membership on this committee preclude the nomination of that member to succeed him or herself as a Director in accordance with the rules applicable to other directors. The Evaluation and Nomination Committee shall meet prior to the October meeting of the Board of Directors and shall submit its nominees for Directors and Officers of the corporation to the Board of Directors at the October meeting
- (4) **Grant Review Committee.** The Grant Review Committee shall be responsible for developing policies and procedures by which applicants can apply for grants. No application shall be considered unless:
  - (a) The grant will directly benefit citizens of Mason County, Kentucky or citizens of other Kentucky or Ohio counties which adjoin Mason County, Kentucky, all without regard to race, creed, color, sex or ethnic origin of the citizens to be benefited by the making of the grant.
  - (b) The applicant is an organization which, at the time of the application, is recognized by the Internal Revenue Service under the provisions of the Internal Revenue Code as an "Exempt Organization".
  - (c) A grant cycle shall be a calendar year. All applicants shall be received not later than August 1 of each year to be eligible for consideration by the Grant Review Committee. All timely applications received during the Grant Cycle shall be considered together by the Grant Review Committee prior to the October meeting

of the Board of Directors. Within the parameters of the funds available, the Grant Review Committee shall submit its report to the Board of Directors at the October meeting containing its recommendations with respect to applications which it believes should be funded. All approved requests shall be funded. Funds for non-conditional grants shall be distributed not later than the last day of the current accounting year. Funds for conditional grants shall be distributed once the grantee organization has provided satisfactory evidence that the required conditions have been met.

- (d) The provisions of sub-paragraph (c) immediately above notwithstanding, the Grant Review Committee, with the concurrence of the Finance Committee, may recommend to the Board a loan to an organization possessing all of the qualifications required of a grant applicant. The loan, if approved by the Board, shall carry a market rate of interest and may be collateralized if required by either the recommending committees or the Board. The term of the loan shall not be for more than one year. Loans shall only be made under these provisions where the loan applicant demonstrates that the need for funds is so compelling and urgent that the delay which may arise in obtaining funds through the grant cycle process will seriously and substantially impair the ability of the applicant to function. A loan applicant may apply for a grant with which to repay the loan, but (i) the fact that the loan was made will not give rise to a preference for approval of the applicant's grant request; and (ii) grant funds will not be available to the loan applicant for the payment of loan interest.

The Grant Committee shall be responsible for the administration of all grants and loans approved by the Board of Directors. The Committee's authority shall include, but is not limited to, the power to approve a grantee's request to change the purpose for which funds were granted, and the power to adjust or remove matching challenge ratios for conditional grants. All changes so approved by the Grant Committee shall be reported to the Board of Directors at the Board's next scheduled meeting. Changes in the amount of funds granted to any grantee, and any changes involving major capital grants, shall require approval by the Board of Directors.

- (5) **Scholarship Committee.** The Scholarship Committee shall recommend to the Board of Directors policies and procedures for the administration of all scholarship programs administered by the Foundation; and shall implement such of those policies and procedures which are approved.

- (a) With regard to all scholarship programs:

- (i) **Program Timing.** The Scholarship Committee shall establish an application deadline not later than April 30<sup>th</sup> of each calendar year. The Committee shall submit its recommendations with respect to approving and funding the selected applications to the Board of Directors at its May meeting, when such applications will be considered by the Board of Directors and approved or rejected.

(ii) **Availability and Distribution of Scholarship Funds.** The net income, but not less than FIVE PERCENT of the average fair market value for the preceding year of the assets held by the Foundation in any fund or sub-fund allocated for scholarship purposes, shall be available for funding scholarships to be awarded from that fund or sub-fund. All funds shall be disbursed directly to the accredited college or university for the benefit of the scholarship recipient.

(iii) **Annual awards; Exceptions; Payments.** Scholarship assistance shall be awarded for an academic year, but funds shall be disbursed to the college or university in pro-rata payments at the beginning of each academic semester. Failure to maintain eligibility shall be cause, within the Board's discretion, to abate the disbursement of all or any part of an award.

(iv) **Other Standards.** The Committee may recommend to and the Board of Directors may adopt other eligibility standards from time to time not in conflict with the provisions of these By-Laws. All approved applicants shall be and remain of good repute and of high moral character.

(v) **Persons Ineligible.** Board Members, individuals who have served on the Board of Directors within two years of the inception of the scholarship cycle, foundation employees, donors and members of their immediate families shall be ineligible for scholarship assistance.

(vi) **Discrimination Prohibited.** No scholarship criteria nor any selection of applicants shall be imposed or made on the basis of race, creed, color, sex, national origin, ethnic background or religion.

(b) With regard to the Downing Scholarship Program:

(i) **Eligibility.** In addition to any other eligibility requirement adopted by the Board of Directors, the applicant for Downing Scholarship assistance or his or her parent must have resided in Mason County, Kentucky for a period not less than two years duration next preceding the date of application; and the applicant must have maintained a 3.0 grade point average (on a 4.0 scale) in high school. Preference shall be shown to otherwise qualifying applicants who demonstrate need for financial assistance.

(ii) **Maximum Award.** In no event shall the amount of scholarship assistance to one applicant exceed ten percent of the annual net income, as defined under (A)(ii), and the Scholarship Committee may, from time to time, recommend to and the Board of Directors may fix a maximum amount which is less than ten percent.

(c) With regard to new scholarship programs arising from funds donated by individuals, organizations, or companies ("Named Scholarships"), for which the Foundation provides administrative services, donors may specify only the following:

- (i) The name of the scholarship program, but donors may not select or influence the selection of any particular applicant for scholarship assistance.
- (ii) A residence qualification within the area of Mason County, Kentucky or any contiguous Kentucky or Ohio county, but such residence qualification shall not be more restrictive than a municipality, community or county; similarly, a designation restricting scholarship benefits to the graduates of a particular secondary school within the geographical area may be specified.
- (iii) Academic standing(s) both with respect to secondary school performance (senior year) and with respect to college academic standing which will qualify a recipient for consideration and reconsideration in subsequent years.
- (iv) A specific field of undergraduate study that must be pursued by recipients in order to be eligible for scholarship assistance.
- (v) That benefits be restricted to applicants attending specified accredited colleges or universities.

Minimum initial contributions shall be not less than \$25,000 per scholarship fund; there shall be no limitation to the maximum amount that may be contributed.

No Named Scholarship shall be established until

- (a) The prospective donor has completed and submitted an application for consideration and approval of the scholarship program;
- (b) The application has been reviewed by the Scholarship Committee, and approved by the Board of Directors;
- (c) A donor agreement has been executed by the Donor and the Board of Directors; and
- (d) The minimum initial funding has been paid to the Foundation.

If no applicant qualifies for scholarship assistance under all of the criteria imposed by a donor, the Board, upon the recommendation of the Scholarship Committee, may waive one or more of the criteria as will qualify an applicant for the assistance; and that particular applicant will be deemed to have satisfied that or those waived criteria in future scholarship cycles, even if subsequent applicants qualify under all criteria. This provision shall be inserted in all donor agreements.

NOTE: With regard to named scholarship programs approved prior to February 1, 2007, the provisions set forth in their donor agreements will be honored, including the continuation of a dollar-for-dollar match up to a maximum of \$50,000 in total matching funds.

#### **Article IV**

**Meeting Procedure.** All parliamentary procedures not otherwise provided for in these bylaws shall be governed by the latest revised edition of Robert's Rules of Order.

**Timetable.** The following timetable for regular Board meetings shall be observed during each calendar year:

##### **JANUARY MEETING**

- (a) Newly elected Director Class is seated.
- (b) Newly elected Officers installed.
- (c) Appoint membership to Standing Committees.

##### **MAY MEETING**

- (a) Receive and vote upon Finance Committee recommendation with respect to funds available for distribution to scholarship applicants.
- (b) Receive and vote upon Scholarship Committee recommendations regarding scholarship awards.
- (c) Receive and vote upon Finance Committee recommendations with respect to funds available for distribution to grant applicants.

##### **AUGUST MEETING**

##### **OCTOBER MEETING**

- (a) Receive and vote upon Grant Review Committee recommendations regarding grant applications.
- (b) Receive report from Evaluation and Nomination Committee and vote upon nominees.

#### **Article V**

- (1) **Number.** The officers of the corporation shall consist of a President, Vice-President, Secretary, and Treasurer; the board, by majority vote, may authorize the election of an assistant secretary and an assistant treasurer who may be ex-officio no-voting members of the board. No person may hold more than one such office.



(2) **Standards of Conduct for Officers.**

- (1) An officer of this corporation subject to the provisions of KRS 273.161 to 273.287, with discretionary authority, shall discharge his duties under that authority:
  - (a) In good faith;
  - (b) On an informed basis; and
  - (c) In a manner he honestly believes to be in the best interests of the corporation.
- (2) Such officer shall be considered to discharge his duties on an informed basis if he makes, with the care an ordinarily prudent person in a like position would exercise under similar circumstances, inquiry into the business and affairs of the corporation, or into a particular action to be taken or decision to be made.
- (3) In discharging his duties such officer shall be entitled to rely on information, opinions, reports, or statements, including financial statements and other financial data, if prepared or presented by:
  - (a) One (1) or more officers or employees of the corporation whom the officer honestly believes to be reliable and competent in the matters presented; or
  - (b) Legal counsel, public accountants, or other persons as to matters the officer honestly believes are within the person's professional or expert competence.
- (4) An officer shall not be considered to act in good faith if he has knowledge concerning the matter in question that makes reliance otherwise permitted by subsection (3) of this section unwarranted.
- (5) Any action taken as an officer, or any failure to take any action as an officer, shall not be the basis for monetary damages or injunctive relief unless;
  - (a) The officer has breached or failed to perform his duties in compliance with this section; and
  - (b) In the case of an action for monetary damages, the breach or failure to perform constitutes willful misconduct or wanton or reckless disregard for human rights, safety or property.
- (3) **Qualifications.** All corporate offices shall be directors of the corporation, provided that an assistant secretary and an assistant treasurer may serve without being elected to the board.
- (4) **Nomination of Officers.** The Evaluation and Nominating Committee shall nominate not more than two candidates for each office filled. Only if the Evaluation and Nominating Committee has submitted a single nominee for any office will additional nominations be accepted from the floor.

- (5) **Election.** The officers for the ensuing year shall be elected at the October meeting of the Board of Directors. The election shall be by secret ballot and a plurality of all votes cast shall elect.
- (6) **Term of Office.** Officers shall serve for a term of one year beginning with the Annual Meeting and expiring with the next succeeding Annual Meeting. No officer shall hold any corporate office for more than three consecutive terms.
- (7) **Vacancies.** The Board of Directors may fill vacant offices for their unexpired terms at any regular meeting of the Board or at any special meeting called for that purpose.
- (8) **Resignations.** The resignation of any officer shall be in writing and directed to the corporate secretary; and if the corporate secretary shall resign, his written resignation shall be directed to the President.
- (9) **Removal.** Any corporate officer may be removed by the Board of Directors whenever by majority vote the Board expresses its judgement that the best interest of the corporation will be served thereby.
- (10) **Duties.** The corporate officers shall have the following respective duties:
  - (a) **President.** The President shall preside at all meetings of the Board of Directors and shall be entitled to vote as any other director. The President shall sign all legal instruments on behalf of the corporation and the official records of the Board of Directors, and shall be responsible to insure that all actions of the Board of Directors are effectuated. The President shall be an ex-officio non-voting member of all standing and special committees, but the President shall have a vote in his capacity as a member of the Executive Committee. The President shall not be a member, either voting or ex-officio, of the Evaluation and Nominating Committee when that committee is considering nominations for the office of president. The President shall perform all duties incident to the office and such additional duties as may, from time to time, be prescribed by the Board of Directors.
  - (b) **Vice-President.** The Vice-President shall perform all duties of the President in the event of his absence, disability, or refusal to act, and such additional duties as may, from time to time, be prescribed by the Board of Directors.
  - (c) **Secretary.** The Secretary shall be responsible for maintaining an attested record of the minutes of all meetings of the Board of Directors and of the Executive Committee. The Secretary shall maintain such other books and records required by the Board of Directors, but may delegate the actual custody thereof to the Executive Director or the Assistant Secretary. The Secretary shall attest all legal instruments on behalf of the corporation, shall give or cause to be given appropriate notices in accordance with these by-laws or as required by law, and

shall perform such duties as may be incident to his or her office and such other duties as may, from time to time, be prescribed by the Board of Directors.

- (d) **Treasurer.** The Treasurer shall keep or cause to be kept correct and accurate accounts of the properties and financial transactions of the corporation, shall within a reasonable time after the close of the corporation's fiscal year submit to the Board of Directors a true and complete statement of the financial condition of the corporation, and shall provide such additional or interim statements as may be required by the Board of Directors from time to time, and shall perform all duties incident to the office and such other duties as may, from time to time, be prescribed by the Board of Directors. The Treasurer shall serve as Chairman of the Finance Committee.
- (e) **Assistant Secretary and Assistant Treasurer.** The Assistant Secretary and Assistant Treasurer shall have the duties and powers of the Secretary and Treasurer respectively in his absence or disability, and shall have such further duties as may, from time to time, be prescribed by the Board of Directors.

## Article VI

### **Executive Director**

The Board of Directors shall select and employ at its pleasure a competent and experienced Executive Director who shall be delegated the responsibility of overall administrative management of corporate affairs and who shall have the necessary authority to exercise such responsibilities, subject only to such policies as may be adopted by the Board or by any committees to which the Board has delegated controlling authority. The Executive Director shall act as a duly authorized representative of the Board in all matters except those in which the Board has formally designated some other person or committee so to act. It shall be the responsibility of the Executive Director to implement the policies of the Board of Directors and to attend all meetings of the Board of Directors and of Board Committees, except when excluded by the Chairman of the Board or of the Committee.

## Article VII

### **Disbursement of Corporate Funds**

- (1) **Authorization.** Any officer of the Corporation, or the Executive Director, either acting alone, may authorize a disbursement of Corporation funds, to a single payee, in an amount not exceeding \$5,000. The form of the authorization shall be a signed letter or requisition form delivered to the custodian of the funds, and identifying the payee, the amount, and the purpose of the disbursement. A disbursement to a single payee of an

amount in excess of \$5,000 shall require the signatures of two Corporation officers, or the signatures of the Executive Director and one Corporation officer. For purpose of this Article, the term "officer" shall include the President, Vice-President, Secretary, and Treasurer, as outlined in Article V, Section 1 of these Bylaws.

## **Article VIII**

### **Bylaw Amendments**

These bylaws may be amended following written notification to all directors at least ten days prior to any meeting of the Board of Directors at which the amendment or amendments is or are to be considered. A two-thirds vote of all Board Members present at any such meeting at which quorum is present shall be required to adopt the proposed bylaw amendment, and each proposed amendment shall be voted upon separately.

Adopted by Majority Vote of  
the Board of Directors, pursuant  
to Notice, this 11th day of  
August, 2009.

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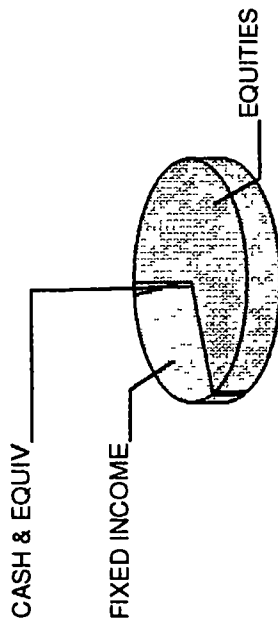
Dr. Robert Ross, Secretary

ACCOUNT NUMBER: 63-0037-01-8  
STATEMENT PERIOD: 12/01/09 - 12/31/09

PORTFOLIO SUMMARY

VALUE OF PORTFOLIO

DESCRIPTION	MARKET VALUE	% OF ACCOUNT
CASH & EQUIV	39,474.52	1.6%
FIXED INCOME	706,279.80	29.0%
EQUITIES	1,687,691.99	69.4%
<b>TOTAL PORTFOLIO</b>	<b>\$ 2,433,446.31</b>	<b>100.0%</b>
ACCRUED INCOME	10,398.47	
<b>TOTAL VALUATION</b>	<b>\$ 2,443,844.78</b>	



MARKET RECONCILEMENT

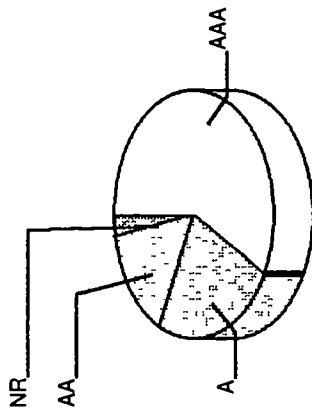
	CURRENT PERIOD	YEAR TO DATE
<b>BEGINNING MARKET VALUE</b>	<b>\$ 2,452,936.61</b>	<b>\$ 2,170,989.84</b>
<b>RECEIPTS</b>		
INTEREST .....	4,628.31	31,722.18
DIVIDENDS .....	6,867.20	32,035.05
ADDITIONS .....	0.00	6,276.15
<b>DISBURSEMENTS</b>		
DISBURSEMENTS TO/FOR BENEFICIARY .....	-48,378.65	-113,233.97
FEES AND EXPENSES .....	-56.44	-18,134.76
REALIZED GAINS/(LOSSES) .....	199.95	-191,996.21
CHANGE IN ACCRUED INCOME BALANCE .....	-1,934.28	-1,586.61
UNREALIZED APPRECIATION/(DEPRECIATION) .....	29,582.08	527,773.11
NON-CASH ACTIVITY .....	0.00	0.00
<b>ENDING MARKET VALUE</b>	<b>\$ 2,443,844.78</b>	<b>\$ 2,443,844.78</b>

HAYSWOOD FOUNDATION INC AGT

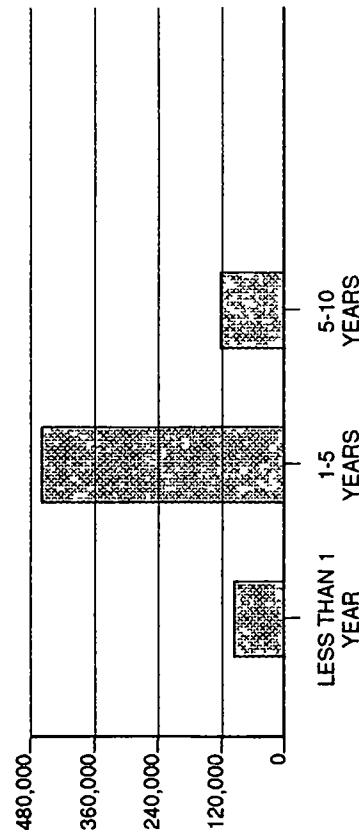
ACCOUNT NUMBER: 63-0037-01-8  
STATEMENT PERIOD: 12/01/09 - 12/31/09

BOND QUALITY SUMMARY

QUALITY RATING	MARKET VALUE	PERCENT
AAA	399,633.50	57.6%
AA	103,598.00	14.9%
A	169,711.90	24.4%
NR	21,405.40	3.1%
TOTAL	\$ 694,348.80	100.0%



BOND MATURITY



YEARS TO MATURITY	MARKET VALUE	PERCENT
LESS THAN 1	102,100.00	14.7%
1-5	465,163.40	67.0%
5-10	127,085.40	18.3%
TOTAL	\$ 694,348.80	100.0%

AVERAGE TIME TO MATURITY: 3.2 YEARS CURRENT YIELD: 4.45%



**PORTFOLIO INVESTMENTS**

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
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**CASH & EQUIVALENTS**

**CASH**

INCOME CASH		29,121.41	29,121.41	0.00		
PRINCIPAL CASH		-29,121.41	-29,121.41	0.00		

**TOTAL CASH**

		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0.00%
						\$ 0.00

**CASH EQUIVALENTS**

GOLDMAN FINANCIAL SQ FED FUND 520	39,474.52	39,474.52	39,474.52	0.00	12.00	0.03%
		1.00	1.00		1.13	

**TOTAL CASH EQUIVALENTS**

		\$ 39,474.52	\$ 39,474.52	\$ 0.00	\$ 12.00	0.03%
					\$ 1.13	

**TOTAL CASH & EQUIVALENTS**

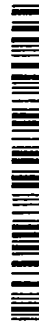
		\$ 39,474.52	\$ 39,474.52	\$ 0.00	\$ 12.00	0.03%
					\$ 1.13	

HAYSWOOD FOUNDATION INC AGT

ACCOUNT NUMBER:  
STATEMENT PERIOD:63-0037-01-8  
12/01/09 - 12/31/09

## PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
<b>FIXED INCOME</b>						
<b>TREASURY AND FEDERAL AGENCIES</b>						
FEDERAL FARM CR BKS CONS SYSTEMWIDE BDS 5.25% DTD 08/21/2003 DUE 08/21/2013	50,000	55,234.50 110.47	52,235.00 104.47	2,999.50	2,625.00 947.91	4.75%
FEDERAL FARM CR BKS CONS SYSTEMWIDE BDS 4.95% DTD 10/10/2007 DUE 10/10/2014	50,000	54,578.00 109.16	53,250.00 106.50	1,328.00	2,475.00 556.87	4.53%
FEDERAL HOME LN MTG CORP MEDIUM TERM NTS 4.125% DTD 02/24/2004 DUE 02/24/2011 CALLABLE	50,000	51,890.75 103.78	49,576.00 99.15	2,314.75	2,062.00 727.60	3.97%
FEDERAL HOME LOAN BKS CONS BDS 4.75% DTD 11/03/2005 DUE 12/10/2010	25,000	25,968.75 103.88	24,989.00 99.96	979.75	1,187.00 69.27	4.57%
FEDERAL HOME LOAN BKS CONS BDS 4.875% DTD 06/16/2008 DUE 06/12/2015 NON-CALLABLE	50,000	53,523.50 107.05	52,518.00 105.04	1,005.50	2,437.00 128.64	4.55%
FEDERAL HOME LOAN BKS CONS BDS 4.375% DTD 08/13/2004 DUE 08/15/2011	50,000	52,703.25 105.41	49,897.60 99.80	2,805.65	2,187.00 826.38	4.15%
FEDERAL NATL MTG ASSN 4.375% DTD 09/23/2002 DUE 09/15/2012	50,000	53,578.25 107.16	50,881.00 101.76	2,697.25	2,187.00 644.09	4.08%





## PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
TENNESSEE VALLEY AUTH GLOBAL PWR BD 2001 SER D 4.875% DTD 12/13/2001 DUE 12/15/2016 NON-CALLABLE	50,000	52,156.50 104.31	52,440.00 104.88	-283.50	2,437.00 108.33	4.67%
<b>TOTAL TREASURY AND FEDERAL AGENCIES</b>		<b>\$ 399,533.50</b>	<b>\$ 385,786.50</b>	<b>\$ 13,846.90</b>	<b>\$ 17,597.00</b>	<b>4.40%</b>

\$ 4,009.09

## NONGOVERNMENT OBLIGATIONS

BANK ONE CORP SUB NT 5.25% DTD 10/24/2002 DUE 01/30/2013	25,000	26,511.50 106.05	24,876.25 99.51	1,635.25	1,312.00 550.52	4.95%
DU PONT E I DE NEMOURS & CO SR NT 5.00% DTD 07/28/2008 DUE 07/15/2013 CALLABLE	20,000	21,545.00 107.73	20,284.00 101.42	1,261.00	1,000.00 461.11	4.64%
EMERSON ELEC CO NT 5.00% DTD 12/11/2002 DUE 12/15/2014 CALLABLE	20,000	21,500.40 107.50	20,232.80 101.16	1,267.60	1,000.00 44.44	4.65%
GENENTECH INC SR NT 4.75% DTD 07/18/2005 DUE 07/15/2015 CALLABLE	20,000	21,405.40 107.03	19,608.00 98.04	1,797.40	950.00 438.05	4.44%
GENERAL ELEC CAP CORP MEDIUM TERM NTS TRANCHE # TR 00698 4.25% DTD 06/06/2005 DUE 06/15/2012	25,000	26,004.75 104.02	24,801.25 99.21	1,203.50	1,062.00 47.22	4.09%
GOLDMAN SACHS GROUP INC SR NT 4.50% DTD 06/28/2005 DUE 06/15/2010	25,000	25,450.50 101.80	24,785.50 99.14	665.00	1,125.00 50.00	4.42%

## HAYSWOOD FOUNDATION INC AGT

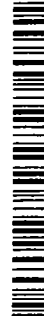
ACCOUNT NUMBER:  
STATEMENT PERIOD:63-0037-01-8  
12/01/09 - 12/31/09

## PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
INTERNATIONAL BUSINESS MACHS CORP NT 4.75% DTD 11/27/2002 DUE 11/29/2012 CALLABLE	25,000	26,858.50 107.43	24,698.50 98.79	2,160.00	1,187.00 105.55	4.42%
JPMORGAN CHASE & CO GLOBAL SUB HLDG CO NT 5.125% DTD 09/15/2004 DUE 09/15/2014	25,000	26,369.00 105.48	25,228.25 100.91	1,140.75	1,281.00 377.25	4.86%
PEPSICO INC 5.15% DTD 05/21/2007 DUE 05/15/2012 NON-CALLABLE	25,000	26,912.50 107.65	26,194.75 104.78	717.75	1,287.00 164.51	4.78%
TOYOTA MTR CR CORP GLOBAL NT 4.25% DTD 03/09/2005 DUE 03/15/2010	25,000	25,189.25 100.76	25,044.50 100.18	144.75	1,062.00 312.84	4.22%
WAL-MART STORES INC NT 4.125% DTD 06/09/2005 DUE 07/01/2010	25,000	25,491.50 101.97	25,016.75 100.07	474.75	1,031.00 515.62	4.05%
WALGREEN CO SR NT 4.875% DTD 07/17/2008 DUE 08/01/2013 CALLABLE	20,000	21,477.00 107.39	20,317.00 101.59	1,160.00	975.00 406.24	4.54%
TOTAL NONGOVERNMENT OBLIGATIONS		\$ 294,715.30	\$ 281,087.55	\$ 13,627.75	\$ 13,272.00 \$ 3,473.35	4.50%

## INCOME EXCHANGE TRADED FUNDS

VANGUARD BD INDEX FD INC SHORT TERM BD ETF	150	11,931.00 79.54	11,588.70 77.26	342.30	299.00	2.51%
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## PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
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## TOTAL INCOME EXCHANGE TRADED FUNDS

		\$ 11,931.00	\$ 11,588.70	\$ 342.30	\$ 299.00	2.51%
					\$ 0.00	

## TOTAL FIXED INCOME

		\$ 705,279.80	\$ 678,462.85	\$ 27,816.95	\$ 31,168.00	4.41%
					\$ 7,482.44	

## EQUITIES

COMMON STOCK  
INDUSTRIALS

TYCO INTERNATIONAL LTD SHS	1,887	67,328.16 35.68	85,760.51 45.45	-18,432.35	1,509.00	2.24%
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## DOVER CORP COM

	1,075	44,730.75 41.61	39,601.60 36.84	5,129.15	1,118.00	2.50%
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## GENERAL ELEC CO COM

	2,500	37,825.00 15.13	75,054.95 30.02	-37,229.95	1,000.00	2.64%
					250.00	

## TOTAL INDUSTRIALS

		\$ 149,883.91	\$ 200,417.06	\$ -50,533.15	\$ 3,627.00	2.42%
					\$ 250.00	

## CONSUMER DISCRETIONARY

COMCAST CORP CL A	4,200	70,812.00 16.86	86,256.00 20.54	-15,444.00	1,587.00	2.24%
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HAYSWOOD FOUNDATION INC AGT

ACCOUNT NUMBER: 63-0037-01-8  
STATEMENT PERIOD: 12/01/09 - 12/31/09

### PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
DISNEY WALT CO COM	1,800	58,050.00 32.25	42,317.82 23.51	15,732.18	630.00 630.00	1.09%
HARLEY DAVIDSON INC COM	1,300	32,760.00 25.20	64,380.94 49.52	-31,620.94	520.00	1.59%
HOME DEPOT INC COM	2,275	65,815.75 28.93	89,857.85 39.50	-24,042.10	2,047.00	3.11%
MATTEL INC COM	1,500	29,970.00 19.98	28,573.20 19.05	1,396.80	1,125.00	3.75%
OMNICOM GROUP INC COM	1,566	61,308.90 39.15	60,301.89 38.51	1,007.01	939.00 234.90	1.53%
<b>TOTAL CONSUMER DISCRETIONARY</b>		<b>\$ 318,715.55</b>	<b>\$ 371,587.70</b>	<b>\$ -52,971.95</b>	<b>\$ 6,848.00</b> <b>\$ 564.90</b>	<b>2.15%</b>

### CONSUMER STAPLES

BROWN FORMAN CORP CL B	700	37,499.00 53.57	31,085.50 44.41	6,413.50	840.00 210.00	2.24%
CVS CAREMARK CORP COM	1,775	57,172.75 32.21	47,481.25 26.75	9,691.50	541.00	0.95%
KRAFT FOODS INC CL A	1,500	40,770.00 27.18	40,999.95 27.33	-229.95	1,740.00 435.00	4.27%



## PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR YIELD
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PEPSICO INC COM	1,200	72,960.00 60.80	62,522.64 52.10	10,437.36	2,160.00 540.00	2.96%
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PROCTER & GAMBLE CO COM	1,000	60,630.00 60.63	66,070.00 66.07	-5,440.00	1,760.00	2.90%
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TOTAL CONSUMER STAPLES		\$ 269,031.75	\$ 248,159.34	\$ 20,872.41	\$ 7,041.00 \$ 1,165.00	2.52%
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## FINANCIALS

BERKSHIRE HATHAWAY INC DEL CL B	3	9,858.00 3,286.00	12,023.70 4,007.90	-2,165.70		
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JPMORGAN CHASE & CO COM	830	34,586.10 41.67	30,842.76 37.16	3,743.34	166.00	0.48%
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PROGRESSIVE CORP OH COM	2,900	52,171.00 17.99	59,892.48 20.65	-7,721.48		
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US BANCORP DEL COM NEW	2,100	47,271.00 22.51	70,238.00 33.45	-22,967.00	420.00 105.00	0.89%
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TOTAL FINANCIALS		\$ 143,886.10	\$ 172,996.94	\$ -29,110.84	\$ 586.00 \$ 105.00	0.41%
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## HEALTH CARE

ALLERGAN INC COM	965	60,804.65 63.01	41,394.90 42.90	19,409.75	193.00	0.32%
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## HAYSWOOD FOUNDATION INC AGT

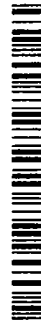
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12/01/09 - 12/31/09

## PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
JOHNSON & JOHNSON COM	1,000	64,410.00 64.41	60,439.90 60.44	3,970.10	1,960.00	3.04%
PFIZER INC COM	1,379	25,084.01 18.19	24,353.14 17.66	730.87	992.00	3.96%
TEVA PHARMACEUTICAL INDS LTD ADR	1,600	89,888.00 56.18	50,976.00 31.86	38,912.00	771.00	0.86%
WATERS CORP COM	1,000	61,960.00 61.96	39,538.50 39.54	22,421.50		
TOTAL HEALTH CARE		\$ 302,146.55	\$ 216,702.44	\$ 85,444.22	\$ 3,916.00	1.30%
					\$ 0.00	

## INFORMATION TECHNOLOGY

AUTOMATIC DATA PROCESSING INC COM	1,500	64,230.00 42.82	57,142.13 38.10	7,087.87	2,040.00 510.00	3.18%
CISCO SYS INC COM	1,275	30,523.50 23.94	28,105.94 22.04	2,417.56		
E M C CORP MASS COM	3,800	66,386.00 17.47	49,466.90 13.02	16,919.10		
MICROSOFT CORP COM	2,800	85,344.00 30.48	84,406.20 30.15	937.80	1,456.00	1.71%



## PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
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## TOTAL INFORMATION TECHNOLOGY

		\$ 246,483.50	\$ 219,121.17	\$ 27,362.33	\$ 3,496.00	1.42%
					\$ 510.00	

## UTILITIES

SOUTHERN CO COM	1,300	43,316.00	41,403.83	1,912.17	2,275.00	5.25%
		33.32	31.85			

## TOTAL UTILITIES

		\$ 43,316.00	\$ 41,403.83	\$ 1,912.17	\$ 2,275.00	5.25%
					\$ 0.00	

## TOTAL COMMON STOCK

		\$ 1,473,464.57	\$ 1,470,488.48	\$ 2,976.09	\$ 27,789.00	1.89%
					\$ 2,914.90	

EQUITY MUTUAL FUNDS  
MID CAP EQUITY FUNDS

GOLDMAN SACHS MID CAP VALUE FUND - INST	724.543	21,134.92	17,048.50	4,086.42	276.00	1.31%
		29.17	23.53			

## TOTAL MID CAP EQUITY FUNDS

		\$ 21,134.92	\$ 17,048.50	\$ 4,086.42	\$ 276.00	1.31%
					\$ 0.00	

## TOTAL EQUITY MUTUAL FUNDS

		\$ 21,134.92	\$ 17,048.50	\$ 4,086.42	\$ 276.00	1.31%
					\$ 0.00	

## EQUITY EXCHANGE TRADED FUNDS



HAYSWOOD FOUNDATION INC AGT

ACCOUNT NUMBER: 63-0037-01-8  
STATEMENT PERIOD: 12/01/09 - 12/31/09

### PORTFOLIO INVESTMENTS

ASSET DESCRIPTION	SHARES/ FACE VALUE	MARKET VALUE/ PRICE	TOTAL COST/ AVG UNIT COST	UNREALIZED GAIN/LOSS	EST. INCOME/ ACCRUED INCOME	CUR. YIELD
VANGUARD INTL EQUITY INDEX FDS FTSE ALL WORLD EX US INDEX FD ETF	2,500	109,025.00 43.61	122,441.60 48.98	-13,416.60	2,157.00	1.98%
VANGUARD INDEX FDS VANGUARD MID-CAP ETF	350	20,982.50 59.95	23,169.24 66.20	-2,186.74	243.00	1.16%
VANGUARD INDEX FDS VANGUARD SMALL-CAP ETF	1,100	63,085.00 57.35	70,828.00 64.39	-7,743.00	700.00	1.11%
TOTAL EQUITY EXCHANGE TRADED FUNDS		\$ 193,092.50	\$ 216,438.84	\$ -23,346.34	\$ 3,109.00	1.61%
TOTAL EQUITIES		\$ 1,687,691.99	\$ 1,703,975.82	\$ -16,283.83	\$ 31,165.00	1.85%
TOTAL MARKET VALUE		\$ 2,433,446.31	\$ 2,421,913.19	\$ 11,533.12	\$ 62,345.00	2.56%
TOTAL MARKET VALUE PLUS ACCRUED INCOME		\$ 2,443,844.78			\$ 10,398.47	





ACCOUNT NUMBER: 63-0037-01-8  
STATEMENT PERIOD: 12/01/09 - 12/31/09

## RECEIPTS

	DATE	INCOME CASH	PRINCIPAL CASH
INTEREST INCOME			
EMERSON ELEC CO NT 5.00% DTD 12/11/2002 DUE 12/15/2014 CALLABLE			
INT TO 12/15/09 ON 20,000	12/15/09	500.00	
FEDERAL HOME LOAN BKS CONS BDS 4.75% DTD 11/03/2005 DUE 12/10/2010			
INT TO 12/10/09 ON 25,000	12/10/09	593.75	
FEDERAL HOME LOAN BKS CONS BDS 4.875% DTD 06/16/2008 DUE 06/12/2015 NON-CALLABLE			
INT TO 12/12/09 ON 50,000	12/14/09	1,218.75	
GENERAL ELEC CAP CORP MEDIUM TERM NTS TRANCHE # TR 00698 4.25% DTD 06/06/2005 DUE 06/15/2012			
INT TO 12/15/09 ON 25,000	12/15/09	531.25	

ACCOUNT NUMBER: 4508-3525  
HAYSWOOD FOUNDATION AGENCYThis statement is for the period from  
December 1, 2009 to December 31, 2009**ASSET DETAIL**

Shares or Face Amount	Security Description	Market Value/ Price	Tax Cost/ Unit Cost	Unrealized Gain(Loss)/ Est Annual Inc	% of Total/ Estimated Curr Yield
<b>Cash &amp; Equivalents</b>					
<b>Cash/Money Market</b>					
62 850.660	First Amer Treasury Oblig Cl Y	62,850.66 1.0000	62,850.66 1.00	0.00 0.00	1.3 0.00
<b>Total Cash/Money Market</b>		<b>\$62,850.66</b>	<b>\$62,850.66</b>	<b>\$0.00 \$0.00</b>	<b>1.3</b>
<b>Cash</b>					
	Principal Cash	- 1,002,551.53	- 1,002,551.53		- 20.7
	Income Cash	1,002,551.53	1,002,551.53		20.7
<b>Total Cash</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00 \$0.00</b>	<b>0.0</b>
<b>Total Cash &amp; Equivalents</b>		<b>\$62,850.66</b>	<b>\$62,850.66</b>	<b>\$0.00 \$0.00</b>	<b>1.3</b>
<b>Taxable Bonds</b>					
<b>US Government Issues</b>					
100,000.000	F N M A M T N 3.875 02/15/2010	100,438.00 100.4380	99,384.90 99.38	1,053.10 3,875.00	2.1 3.86
100,000.000	Federal Home Loan Bks 4.000 02/15/2011	103,688.00 103.6880	99,289.00 99.29	4,399.00 4,000.00	2.1 3.86
100,000.000	F H L M C M T N 5.250 07/18/2011	106,531.00 106.5310	100,859.40 100.86	5,671.60 5,250.00	2.2 4.93
100,000.000	F H L M C M T N 5.125 07/15/2012	108,625.00 108.6250	100,415.30 100.42	8,209.70 5,125.00	2.2 4.72
<b>Total US Government Issues</b>		<b>\$419,282.00</b>	<b>\$399,948.60</b>	<b>\$19,333.40 \$18,250.00</b>	<b>8.7</b>
<b>Corporate Issues</b>					

ACCOUNT NUMBER: 4508-3525  
HAYSWOOD FOUNDATION AGENCYThis statement is for the period from  
December 1, 2009 to December 31, 2009**ASSET DETAIL (continued)**

Shares or Face Amount	Security Description	Market Value/ Price	Tax Cost/ Unit Cost	Unrealized Gain(Loss)/ Est Annual Inc	% of Total/ Estimated Curr Yield
100,000.000	Amer Genl Fin M T N Tranche # Tr 00411 5.400 12/01/2015	68,751.00 68.7510	99,204.00 99.20	- 30,453.00 5,400.00	1.4 7.85
45,000.000	Hydro-Quebec F S A 8.400 01/15/22	57,552.75 127.8950	52,256.25 116.13	5,296.50 3,780.00	1.2 6.57
<b>Total Corporate Issues</b>		<b>\$126,303.75</b>	<b>\$151,460.25</b>	<b>- \$25,156.50 \$9,180.00</b>	<b>2.6</b>
<b>Fixed Income Funds</b>					
84,750.881	Pimco Total Return Fund PTTRX	915,309.51 10.8000	859,386.00 10.14	55,923.51 51,528.54	18.9 5.63
<b>Total Fixed Income Funds</b>		<b>\$915,309.51</b>	<b>\$859,386.00</b>	<b>\$55,923.51 \$51,528.54</b>	<b>18.9</b>
<b>Total Taxable Bonds</b>		<b>\$1,460,895.26</b>	<b>\$1,410,794.85</b>	<b>\$50,100.41 \$78,958.54</b>	<b>30.2</b>
<b>Stocks</b>					
<b>Equity Funds</b>					
28,856.446	First American Small Capital Index Fund Cl Y ASETX	255,668.11 8.8600	261,607.40 9.07	- 5,939.29 1,904.53	5.3 0.74
33,355.122	First Amern Invt Fds Inc Quant Lc Y FQCYX	647,089.37 19.4000	766,792.73 22.99	- 119,703.36 8,972.53	13.4 1.39
29,564.644	First Amern Invt Fds Quant Lc Gr Y FQGYX	647,465.70 21.9000	649,903.24 21.98	- 2,437.54 8,189.41	13.4 1.26
16,689.514	First Amern Invt Fds Quant Lc Val Y FQVYX	318,435.93 19.0800	363,861.07 21.80	- 45,425.14 6,575.67	6.6 2.06
9,110.000	I Shares Msci Eafe Index Fund E T F EFA	503,600.80 55.2800	517,586.80 56.82	- 13,986.00 13,127.51	10.4 2.61

ACCOUNT NUMBER: 4508-3525  
HAYSWOOD FOUNDATION AGENCYThis statement is for the period from  
December 1, 2009 to December 31, 2009**ASSET DETAIL (continued)**

Shares or Face Amount	Security Description	Market Value/ Price	Tax Cost/ Unit Cost	Unrealized Gain(Loss)/ Est Annual Inc	% of Total/ Estimated Curr Yield
10,150,000	Ishares Msci Emerging Mkts E T F EEM	421,225.00 41.5000	357,889.00 35.26	63,336.00 243.60	8.7 0.06
10,988.976	Rowe T Price Mid-Cap Growth Fd #64 RPMGX	521,866.47 47.4900	446,592.00 40.64	75,274.47 0.00	10.8 0.00
<b>Total Equity Funds</b>		<b>\$3,315,351.38</b>	<b>\$3,364,232.24</b>	<b>- \$48,880.86 \$39,013.25</b>	<b>68.5</b>
<b>Total Stocks</b>		<b>\$3,315,351.38</b>	<b>\$3,364,232.24</b>	<b>- \$48,880.86 \$39,013.25</b>	<b>68.5</b>
<b>Total Assets</b>		<b>\$4,839,097.30</b>	<b>\$4,837,877.75</b>	<b>\$1,219.55 \$117,971.79</b>	<b>100.0</b>
<b>Estimated Current Yield</b>					<b>2.43</b>

**ASSET DETAIL MESSAGES**

Time of trade execution and trading party (if not disclosed) will be provided upon request.

Publicly traded assets are valued in accordance with market quotations or valuation methodologies from financial industry services believed by us to be reliable. Assets that are not publicly traded may be reflected at values from other external sources. Assets for which a current value is not available may be reflected at a previous value or as not valued at par value, or at a nominal value. Values shown do not necessarily reflect prices at which assets could be bought or sold. Values are updated based on internal policy and may be updated less frequently than statement generation.

**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](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

<b>Type or print</b>  File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	HAYSWOOD FOUNDATION INC.	23-7345996
	Number, street, and room or suite number. If a P.O. box, see instructions	
	1 WEST MCDONALD PARKWAY 3 A	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	MAYSVILLE, KY 41056	

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

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► RANDY ANDERSON C. P. A.

Telephone No ► 606 564-6260 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

<b>3a</b> 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	<b>3a</b>	\$ 2,690.
<b>b</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	<b>3b</b>	\$ 8,000.
<b>c Balance Due.</b> 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	<b>3c</b>	\$ 0.

**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)