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

2009

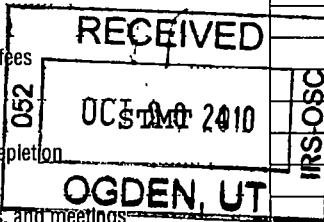
Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2009, or tax year beginning

, 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	Name of foundation CAMPBELL FAMILY FOUNDATION	A Employer identification number 62-1678860		
	Number and street (or P O box number if mail is not delivered to street address) BOX 413005 #310	Room/suite	B Telephone number (239) 403-7919	
	City or town, state, and ZIP code NAPLES, FL 34101-3005	C If exemption application is pending, check here ► <input type="checkbox"/>		
		D 1 Foreign organizations, check here ► <input type="checkbox"/>		
		2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>		
		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>		
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>		
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 1,473,138.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____			
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))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income
1 Contributions, gifts, grants, etc., received	100,000.		N/A	
2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B Interest on savings and temporary cash investments				
3	161.	161.		STATEMENT 1
4 Dividends and interest from securities	5,494.	5,492.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	-10,343.			
b Gross sales price for all assets on line 6a				
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 or (loss)				
11 Other income	-110.	-110.		STATEMENT 3
12 Total Add lines 1 through 11	95,202.	5,543.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees				
c Other professional fees				
17 Interest				
18 Taxes	282.	282.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses	4,808.	4,663.		145.
24 Total operating and administrative expenses. Add lines 13 through 23	5,090.	4,945.		145.
25 Contributions, gifts, grants paid	1,080,200.			1,080,200.
26 Total expenses and disbursements. Add lines 24 and 25	1,085,290.	4,945.		1,080,345.
27 Subtract line 26 from line 12:	-990,088.			
a Excess of revenue over expenses and disbursements				
b Net investment income (if negative, enter -0-)		598.		
c Adjusted net income (if negative, enter -0-)			N/A	



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments		9,593.	54,312.
	3	Accounts receivable ►			54,312.
		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			
	7	Other notes and loans receivable ►			
		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			
	b	Investments - corporate stock			
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis ►			
		Less accumulated depreciation ►			
	12	Investments - mortgage loans			
	13	Investments - other	STMT 6	1,620,032.	585,225.
	14	Land, buildings, and equipment basis ►			1,418,826.
		Less accumulated depreciation ►			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers)		1,629,625.	639,537.
	17	Accounts payable and accrued expenses			1,473,138.
Liabilities	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)		0.	0.
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 27 through 31				
	27	Capital stock, trust principal, or current funds		0.	0.
	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.
	29	Retained earnings, accumulated income, endowment, or other funds		1,629,625.	639,537.
	30	Total net assets or fund balances		1,629,625.	639,537.
	31	Total liabilities and net assets/fund balances		1,629,625.	639,537.

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	1,629,625.
2	Enter amount from Part I, line 27a	2	-990,088.
3	Other increases not included in line 2 (itemize) ►	3	0.
4	Add lines 1, 2, and 3	4	639,537.
5	Decreases not included in line 2 (itemize) ►	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	639,537.

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 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a MIDLAND INTL FUND LP AND MIDLAND US FUND LP					
b PASSTHROUGH				VARIOUS	VARIOUS
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			-10,343.		
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a					
b			-10,343.		
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	-10,343.	
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). If (loss), enter -0- in Part I, line 8	{ }		3	N/A	

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.)

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 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 (col. (b) divided by col. (c))
2008	140,750.	2,626,871.	.053581
2007	131,600.	2,741,212.	.048008
2006	102,730.	1,986,909.	.051703
2005	112,723.	1,368,793.	.082352
2004	112,915.	1,387,354.	.081389

2 Total of line 1, column (d)

2 **.317033**

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 **.063407**

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5

4 **2,099,715.**

5 Multiply line 4 by line 3

5 **133,137.**

6 Enter 1% of net investment income (1% of Part I, line 27b)

6 **6.**

7 Add lines 5 and 6

7 **133,143.**

8 Enter qualifying distributions from Part XII, line 4

8 **1,080,345.**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 instructions)1a Exempt operating foundations described in section 4940(d)(2), check here ► and enter "N/A" on line 1.

Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)

1	6.
2	0.
3	6.
4	0.
5	6.

6a	
6b	
6c	
6d	8.

7	8.
8	
9	
10	2.
11	0.

7 Total credits and payments. Add lines 6a through 6d
 8 Enter any **penalty** for underpayment of estimated tax. Check here if Form 2220 is attached
 9 Tax due If the total of lines 5 and 8 is more than line 7, enter **amount owed**
 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**
 11 Enter the amount of line 10 to be: **Credited to 2010 estimated tax** ►

2. Refunded ►

Part VII-A | Statements Regarding Activities

1a 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?

	Yes	No
1a	X	
1b	X	
1c	X	

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

c Did the foundation file Form 1120-POL for this year?

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?

*If "Yes," attach a detailed description of the activities.*3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

If "Yes," attach the statement required by General Instruction T

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

- By language in the governing instrument, or
- By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year?

If "Yes," complete Part II, col. (c), and Part XV.

8a Enter the states to which the foundation reports or with which it is registered (see instructions) ►

FLb If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation*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)? *If "Yes," complete Part XIV*10 Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*

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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?

13 X

Website address ► **NONE**

14 The books are in care of ► **J. DOUGLAS CAMPBELL** Telephone no. ► **239-403-7919**
Located at ► **BOX 413005, #310, NAPLES, FL** ZIP+4 ► **34101**

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year

► 15 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.

1a During the year did the foundation (either directly or indirectly):

(1) Engage in the sale or exchange, or leasing of property with a disqualified person?

Yes X No

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?

Yes X No

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?

Yes X No

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?

Yes X No

(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?

Yes X No

(6) Agree to pay money or property to a government official? (Exception Check "No")

If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)

Yes X No

b 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 page 20 of the instructions)?

N/A

►

Organizations relying on a current notice regarding disaster assistance check here

c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?

1b

2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?

Yes X No

If "Yes," list the years ► _____, _____, _____, _____, _____

b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)

N/A

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

2b

► _____, _____, _____, _____, _____

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

Yes X No

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)

N/A

3b

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

4a

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

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)? 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)?

N/A

5b



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

6b

X

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870

Yes No

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

Yes No

7b

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.

(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
J. DOUGLAS CAMPBELL BOX 413005 #310 NAPLES, FL 34101	PRESIDENT 5.00	0.	0.	0.
NANCY CAMPBELL BOX 413005 #310 NAPLES, FL 34101	SECRETARY 5.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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

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

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

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



0

Part IX-A Summary of Direct Charitable Activities

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

Expenses

1	N/A	
2		
3		
4		

Part IX-B Summary of Program-Related Investments

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		
3		
Total. Add lines 1 through 3		► 0 .

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,110,978.
b	Average of monthly cash balances	1b	20,712.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,131,690.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,131,690.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	31,975.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,099,715.
6	Minimum investment return Enter 5% of line 5	6	104,986.

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	104,986.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	6.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	6.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	104,980.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	104,980.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	104,980.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,080,345.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,080,345.
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	5	6.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,080,339.

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				104,980.
2 Undistributed income, if any, as of the end of 2009			0.	
a Enter amount for 2008 only				
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007	29,344.			
e From 2008	140,750.			
f Total of lines 3a through e	170,094.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 1,080,345.			0.	
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions) **	1,080,345.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	104,980.			104,980.
6 Enter the net total of each column as indicated below:	1,145,459.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 instr.				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)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a	1,145,459.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008	65,114.			
e Excess from 2009	1,080,345.			

** SEE STATEMENT 8

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Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SEE STATEMENT 10				
Total			► 3a	1,080,200.
<i>b Approved for future payment</i>				
NONE				
Total			► 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

1 Program service revenue:

a _____
 b _____
 c _____
 d _____
 e _____
 f _____

g Fees and contracts from government agencies

2 Membership dues and assessments

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5 Net rental income or (loss) from real estate:

a Debt-financed property
 b Not debt-financed property

6 Net rental income or (loss) from personal property

7 Other investment income

8 Gain or (loss) from sales of assets other than inventory

9 Net income or (loss) from special events

10 Gross profit or (loss) from sales of inventory

11 Other revenue:

a _____
 b _____
 c _____
 d _____
 e _____

12 Subtotal. Add columns (b), (d), and (e)

13 Total. Add line 12, columns (b), (d), and (e)

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

		Unrelated business income	Excluded by section 512, 513, or 514	(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	
1 Program service revenue:				
a				
b				
c				
d				
e				
f				
g Fees and contracts from government agencies				
2 Membership dues and assessments				
3 Interest on savings and temporary cash investments			14	161.
4 Dividends and interest from securities			14	5,494.
5 Net rental income or (loss) from real estate:				
a Debt-financed property				
b Not debt-financed property				
6 Net rental income or (loss) from personal property				
7 Other investment income			14	-110.
8 Gain or (loss) from sales of assets other than inventory			18	-10,343.
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue:				
a				
b				
c				
d				
e				
12 Subtotal. Add columns (b), (d), and (e)		0.		-4,798.
13 Total. Add line 12, columns (b), (d), and (e)			13	0. -4,798.

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
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Name of organization

CAMPBELL FAMILY FOUNDATION

Employer identification number

62-1678860

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	J. DOUGLAS CAMPBELL BOX 413005 #310 NAPLES, FL 34101	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
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FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
MIDLAND INTL FUND LP AND MIDLAND US FUND LP PASSTHROUGH	161.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	161.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
CHARLES SCHWAB	14.	0.	14.
MIDLAND INTL FUND LP AND MIDLAND US FUND LP PASSTHROUGH	5,480.	0.	5,480.
TOTAL TO FM 990-PF, PART I, LN 4	5,494.	0.	5,494.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MIDLAND INTL FUND LP AND MIDLAND US FUND LP PASSTHROUGH	-110.	-110.	
TOTAL TO FORM 990-PF, PART I, LINE 11	-110.	-110.	

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	282.	282.		0.
TO FORM 990-PF, PG 1, LN 18	282.	282.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT

5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PORTFOLIO DEDUCTIONS	4,379.	4,379.		0.
INTEREST EXPENSE	284.	284.		0.
ANNUAL REPORT	70.	0.		70.
BANK FEES	75.	0.		75.
TO FORM 990-PF, PG 1, LN 23	4,808.	4,663.		145.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT

6

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
GT OFFSHORE FUND LIMITED	COST	263,443.	1,041,124.
MIDLAND INTL EQUITY TI LP	COST	155,200.	207,823.
MIDLAND US EQUITY TI LP	COST	166,582.	169,879.
TOTAL TO FORM 990-PF, PART II, LINE 13			585,225. 1,418,826.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTOR
PART VII-A, LINE 10

STATEMENT

7

NAME OF CONTRIBUTOR

ADDRESS

J. DOUGLAS CAMPBELL

BOX 413005 #310
NAPLES, FL 34101

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION
53.4942(A)-3(D)(2) TO TREAT
EXCESS QUALIFYING DISTRIBUTIONS
AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT 8

PURSUANT TO CODE SEC. 4942(H)(2) AND REG. 53.4942(A)-3(D)(2), CAMPBELL FAMILY FOUNDATION ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS COMING FROM PRIOR YEAR'S UNDISTRIBUTED INCOME AS FOLLOWS:

YEAR END	AMOUNT
2007	\$29,344
2008	\$75,636

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

CAMPBELL FAMILY FOUNDATION PMB 310
P.O. BOX 413005
NAPLES, FL 341013005

TELEPHONE NUMBER

239-403-7919

FORM AND CONTENT OF APPLICATIONS

N/A

ANY SUBMISSION DEADLINES

OCTOBER

RESTRICTIONS AND LIMITATIONS ON AWARDS

CHARITIES SENDING MORE THAN ONE SOLICITATION PER YEAR OR SEND PREMIUMS SUCH AS ADDRESS LABELS, CALENDARS, ORNAMENTS, ETC. WILL NOT BE CONSIDERED FOR CONTRIBUTIONS.

FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 10

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AMERICAN INSTITUTE OF PHILANTHROPY P.O. BOX 578460 CHICAGO, IL 60657	NONE GENERAL PURPOSE	PUBLIC	200.
BOULDER HUMANE SOCIETY 2323 55TH ST BOULDER, CO 80301	NONE GENERAL PURPOSE	PUBLIC	1,000.
CATO INSTITUTE 1000 MASSACHUSETTS AVE., N.W. WASHINGTON, DC 20001	NONE GENERAL PURPOSE	PUBLIC	1,000.
CHEMICAL HERITAGE FOUNDATION 315 CHESTNUT STREET PHILADELPHIA, PA 19106	NONE GENERAL PURPOSE	PUBLIC	100.
CHILDREN'S ADVOCACY CENTER 3830 EVANS AVE FORT MYERS, FL 33901	NONE GENERAL PURPOSE	PUBLIC	1,000.
COLLIER HEALTH SERVICES FUND P.O. BOX 877 IMMOKALEE, FL 34143	NONE GENERAL PURPOSE	PUBLIC	1,000.
COMMUNITY FOUNDATION OF COLLIER COUNTY 2400 TAMiami TRAIL NORTH, SUITE 300 NAPLES, FL 34103	NONE GENERAL PURPOSE	PUBLIC	200.
CONSERVANCY OF SW FLORIDA 991 2ND AVE N NAPLES, FL 34103	NONE GENERAL PURPOSE	PUBLIC	250.

CAMPBELL FAMILY FOUNDATION

62-1678860

DAVID LAWRENCE CENTER 6075 BATHEY LANE NAPLES, FL 34116	NONE MEDICAL	PUBLIC	5,000.
DUKE SCHOOL OF ENGINEERING DUKE UNIVERISITY: PRATT SCHOOL OF ENGINEERING DURHAM, NC 27701	NONE EDUCATION	PUBLIC	1,500.
ECO-CYCLE P.O. BOX 19006 BOULDER, CO 80308	NONE GENERAL PURPOSE	PUBLIC	1,000.
FLORIDA GUARDIAN AD LITEM PROGRAM P.O. BOX 10688 TALLAHASSEE, FL 32302	NONE GENERAL PURPOSE	PUBLIC	100.
FOSTER CARE COUNCIL 5051 CASTELLO DR., #21 NAPLES, FL 34103	NONE GENERAL PURPOSE	PUBLIC	15,000.
FUN TIME ACADEMY 102 12TH ST NORTH NAPLES, FL 34102	NONE EDUCATION	PUBLIC	250.
HATHAWAY BROWN SCHOOL 19600 N PARK BLVD CLEVELAND, OH 44122	NONE EDUCATION	PUBLIC	500.
HILSDALE COLLEGE 33 EAST COLLEGE ST. HILSDALE, MI 49242	NONE EDUCATION	PUBLIC	100.
LEE MEMORIAL HEALTH SYSTEM FOUNDATION P.O. BOX 2218 FORT MYERS, FL 33902	NONE GENERAL PURPOSE	PUBLIC	500.
MARINE CORPS-LAW ENFORCEMENT FOUNDATION 10 ROCKEFELLER PLAZA STE 1007 NEW YORK, NY 10020	NONE GENERAL PURPOSE	PUBLIC	1,000.

CAMPBELL FAMILY FOUNDATION

62-1678860

MT. SINAI BAPTIST CHURCH 1227 MT. SINAI CHURCH ROAD SHELBY, NC 28152	NONE GENERAL PURPOSE	PUBLIC	1,000.
NAMI OF COLLIER COUNTY 6216 TRAIL BOULEVARD, BUILDING C NAPLES, FL 34108	NONE GENERAL PURPOSE	PUBLIC	500.
NCH HEALTHCARE FOUNDATION 11190 HEALTH PARK BLVD. NAPLES, FL 34110	NONE MEDICAL	PUBLIC	2,500.
NEIGHBORHOOD HEALTH CLINIC 121 GOODLETTE ROAD NORTH NAPLES, FL 34102	NONE GENERAL PURPOSE	PUBLIC	500.
RONALD MCDONALD HOUSE CHARITIES OF SOUTHWEST FLORIDA 16100 ROSERUSH COURT FORT MYERS, FL 33908	NONE MEDICAL	PUBLIC	5,000.
ST. ANDREW'S-SEWANEE SCHOOL 290 QUINTARD ROAD SEWANEE, TN 37375	NONE EDUCATION	PUBLIC	1030000.
ST. JUDE'S HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	NONE MEDICAL	PUBLIC	1,000.
THE LEAGUE CLUB 5051 CASTELLO DR., STE. 218 NAPLES, FL 34103	NONE GENERAL PURPOSE	PUBLIC	1,000.
TRINITY-BY-THE-COVE EPISCOPAL CHURCH 553 GALLEON DR NAPLES, FL 34102	NONE RELIGION	PUBLIC	7,500.
VOICE FOR KIDS OF SWFL 13180 N CLEVELAND AVE #237 FORT MYERS, FL 33903	NONE GENERAL PURPOSE	PUBLIC	500.

CAMPBELL FAMILY FOUNDATION

62-1678860

YOUTH HAVEN
5867 WHITAKER ROAD NAPLES, FL
34112

NONE
GENERAL PURPOSE

PUBLIC

1,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

1,080,200.

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ►

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).		
Type or print File by the extended due date for filing the return. See Instructions.	Name of Exempt Organization CAMPBELL FAMILY FOUNDATION	Employer Identification number 62-1678860
	Number, street, and room or suite no. If a P.O. box, see instructions. BOX 413005 #310	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NAPLES, FL 34101-3005	

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

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

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

J. DOUGLAS CAMPBELL

- The books are in the care of ► **BOX 413005, #310 - NAPLES, FL 34101**
- Telephone No. ► **239-403-7919** 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 is for.

- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**.
- 5 For calendar year **2009**, or other tax year beginning , and ending .
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 State in detail why you need the extension

**ADDITIONAL TIME IS NEEDED IN ORDER TO GATHER THE INFORMATION NECESSARY
TO FILE A COMPLETE AND ACCURATE RETURN.**

- 8a 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.
- 8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.
- 8c Balance Due. Subtract line 8b from line 8a. 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.

	8a	\$	0.
	8b	\$	39.
	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► All J. Campbell Title ► CPA

Date ► 8-9-10

Form 8868 (Rev. 4-2009)