See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling . . . . . ▶

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

	Tax year	Prior 3 years			(e) Total
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test—enter ⅔ of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test—enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year—see page 28 of the instructions.)

1 **Information Regarding Foundation Managers:**

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

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

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

Check here ▶ ☐ If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

Scott Brazda,
Executive Director, Stuller Family Foundation, 1213 Terrace Hwy., Broussard, LA 70518 337-394-5432

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

See attached grant application

c Any submission deadlines:

Normally three (3) weeks before the quarterly board meeting.

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

Restricted to educational, children advocacy and welfare, basic human needs and religious, contiguous to Lafayette Parish, Louisiana.

STULLER FAMILY FOUNDATION

INFORMATION FOR GRANT APPLICANTS

PURPOSE:

The purpose of the Stuller Family Foundation ("Foundation") is to support nonprofit religious, scientific, literary, humanitarian or educational organizations in the Acadiana area. The Foundation does not grant financial support to individuals, sport teams/events or political candidates/ organizations. The Foundation's Board generally meets quarterly to review funding requests from qualified organizations. The submission or review of a grant application does not obligate the Stuller Family Foundation to grant any request.

Stuller Family Foundation Mission Statement

"The Stuller Family Foundation is a Christian-based private foundation that endeavors to lead by example through practicing its belief in the importance of good stewardship by assisting needy qualified religious, men, women, children and humanitarian organizations, which are primarily located in Lafayette Parish, Louisiana and the adjacent parishes, by providing such organizations matching and direct grant assistance."

SUBMISSION CHECKLIST

A. **Proposal Summary**: Every application should include the attached Foundation summary that includes the following information:
   - Organization name, address and Chief Executive Officer
   - Brief summary of the project and the service area
   - Need for the project
   - Project director & qualifications
   - Amount requested

B. **Additional Narrative**: The application should include no more than two (2) additional typed 8 ½"x 11"pages that includes the following information:
   - Concise overview of current programs and need for project.
   - Detailed description and challenges to be met by the project.
   - If applicable, the plan for continued funding for the project once the Foundation's financial support is completed.

C. **Attachments**: Attachments should include the following information and not be more than five (5) 8 ½" x 11" pages:
   - Copy of the Internal Revenue Service notice stating that the organization is tax-exempt or a copy of the organization's parent/ agent's 501 (c)(3) letter.
   - Mission statement, if available.
   - Supporting materials, such as reports, brochures and news articles

IMPORTANT DATES

The Stuller Family Foundation meets on a quarterly basis (March, June, September and December) each year. Deadlines for grant applications are as follows:

- March 1st
- June 1st
- September 1st
- December 1st

In order for The Stuller Family Foundation to review your grant application at an optimum level, it is highly recommended that your materials arrive at our office ***prior*** to the aforementioned deadlines.

THE STULLER FAMILY FOUNDATION
Funding Request

Organization Name: _____ Are you a qualified charitable organization under the Internal Revenue Code? __YES __NO

Address: _____

_____

Contact Person: _____ Phone Number: _____

Fax Number: _____ Email: _____

The Organization's Primary Focus/Mission:

_____

_____

_____

_____

Why are you requesting this specific funding? _____

How much are you requesting: $_____ Funding deadline? _____

How many individuals will be served with this grant? _____

Is the requested funding needed over a period of time? If so, what are the stages of need? When?

_____

_____

What are your long-term plans for sustaining this program? (If Applicable)

_____

_____

_____

How will your organization determine the success or failure of this program?

_____

_____

Does this program lend itself to potential partnerships with other nonprofit organizations?? (Explain)

Is the requested funding part of a matching program? _____YES _____NO

How long has the organization been in existence? _____Years

Please list six (6) board members.

_____
_____

_____
_____

_____
_____

Executive Director_____
_____

What is the organization's current operating budget? $_____

How many paid employees does the organization have? _____

How much funding did your organization raise in its last operating year? $_____.
Please list percentage from: donations _____% grants_____% members _____% program fees _____% other_____%

The organization will spend this grant for the following purpose(s): (Please check all that apply)

____Christian Work
____Children's Welfare
____Women's Welfare
____Christian Family Values and Ethics
____Civic/ Social
____Moral Programs
____Nature / Environmental
____Other (please explain)_____

____Abused Persons
____Education
____Humanitarian
____Teen Programs
____Aged
____Health/ Disease
____Social

Does your organization have certified audits? ____YES ____ NO
Accountants_____

Are all necessary IRS and State filings complete? ____YES ____NO

If NO, please explain.

_____

_____

Please attach the following documentation:

- Any public solicitation material that you have.
- IRS exempt status letter.
- Any other pertinent information.

I _____, representing the above organization do hereby attest that the information presented is true and correct to the best of my knowledge.

_____

Signature Title Date

The Stuller Family Foundation reserves the right to review the organization's records to monitor adherence to the above funding request. The Foundation **does not** make grants to individuals, athletic teams or political organizations. Acceptance of a donation from the Stuller Family Foundation is an agreement to use the grant as designated in the above request. Stuller Family Foundation reserves the right to withhold or stop funding if the organization's charitable purpose or the use of this specific grant is not as indicated herein. **Completion and/or submission of an application is not an agreement to fund and does not constitute any liability for, or to, Stuller Family Foundation to furnish or provide any financial support or backing to the applying organization.**

We wish your organization the best in its future endeavors.

May God bless you and your organization.

Stuller Family Foundation