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Form 990-PF

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

OMB No 1545-0052

2009 Treated as a Private Foundation 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 and ending G Check all that apply Initial return Initial return of a former public charity Final return Amended return X Address change Name change Name of foundation A Employer identification number Use the IRS Ford Family Charitable Foundation 72-1464198 label. Phil K. Livingston, Trustee Otherwise, Telephone number (see page 10 of the instructions) 601-794-9458 print Number and street (or P O box number if mail is not delivered to street address) Room/suite or type. Post Office Box 2726 If exemption application is pending, check here See Specific City or town, state, and ZIP code 1 Foreign organizations, check here Instructions. Hammond LA 70401 2 Foreign organizations meeting the H Check type of organization | X | Section 501(c)(3) exempt private foundation 85% test check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end J Accounting method Cash X Accrual of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here line 16) ▶ \$ 0 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net expenses per for charitable total of amounts in columns (b) (c), and (d) may not necessarily equal books income ıncome purposes the amounts in column (a) (see page 11 of the instructions) ) cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► |X| If the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 3,491 3,491 3,491 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10a Gross sales less returns & allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) С 11 Other income (attach schedule) 491 3,491 3,491 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Stmt 1 395 Accounting fees (attach schedule) Other professional fees (attach schedule) 17 Taxes (attach schedule) (see page 14 of the instructions) Stmt 2 202 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings Printing and publications Stmt 3 54 23 Other expenses (att sch) Total operating and administrative expenses. 651 0 Add lines 13 through 23 6,000 6,000 Contributions, gifts, grants paid 6,000 6,651 0 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 -3,160 Excess of revenue over expenses and disbursements 3,491 Net investment income (if negative, enter -0-)

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

3,491

Fo	rm 990	PF (2009) Ford Family Charitable Foundation	72-146419	98	Page <b>2</b>
	Dorf I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	
	Part I	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash—non-interest-bearing	8,829	2,178	
	2	Savings and temporary cash investments			
	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 page 16 of the			
-		instructions)			
	7	Other notes and loans receivable (att_schedule)			
	•	Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
šet	9	Prepaid expenses and deferred charges			
Assets	-	•			
~	10a	Investments—U S and state government obligations (attach schedule)  Investments—corporate stock (attach schedule)  See Stmt 4		3,491	<del></del>
	b	,		3,431	
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
	40	Less accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ► )			
	16	Total assets (to be completed by all filers—see the			
$\dashv$		instructions. Also, see page 1, item I)	8,829	5,669	0
	17	Accounts payable and accrued expenses			
Ś	18	Grants payable			
Liabilities	19	Deferred revenue			
悥	20	Loans from officers, directors, trustees, and other disqualified persons			
ë.	21	Mortgages and other notes payable (attach schedule)			
7	22	Other liabilities (describe ▶ )			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here ▶ X			
es		and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances	24	Unrestricted	8,829	5,669	
ia	25	Temporarily restricted			
ĕ	26	Permanently restricted			
pu		Foundations that do not follow SFAS 117, check here ▶			
Fu		and complete lines 27 through 31.			
7	27	Capital stock, trust principal, or current funds			
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
set	29	Retained earnings, accumulated income, endowment, or other funds			
159	30	Total net assets or fund balances (see page 17 of the	·		
įt/		instructions)	8,829	5,669	
ž	31	Total liabilities and net assets/fund balances (see page 17			
	٠.	of the instructions)	8,829	5,669	
_	Part I				<del></del>
_		net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	agree with		
•		of year figure reported on prior year's return)	agree min		8,829
2				2	-3,160
		r amount from Part I, line 27a		3	-3,100
		r increases not included in line 2 (itemize) ►		4	5,669
		lines 1, 2, and 3		5	5,669
_		eases not included in line 2 (itemize)	Line 30	6	5,669
_6	iotal	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b)	, mie Ju		3,009

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 on page 18

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<u>Pa</u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	instr	uctions)				
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)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	ļ			_35	
	here ▶ X and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of						
	Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<del> </del>			0	
3	Add lines 1 and 2	3	<b> </b>			35	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	ļ			0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	<u> </u>			35	
6	Credits/Payments						
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
b	Exempt foreign organizations—tax withheld at source 6b						
С	Tax paid with application for extension of time to file (Form 8868)  6c						
d	Backup withholding erroneously withheld 6d 6d						
7	Total credits and payments Add lines 6a through 6d	7	ļ				
8	Enter any penalty for underpayment of estimated tax. Check here 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	ļ			35	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10					
11_	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶	11					
<u>Pa</u>	rt 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				Yes	No	
	participate or intervene in any political campaign?			1a		X	
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19						
	of the instructions for definition)?			1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities						
С	Did the foundation file Form 1120-POL for this year?			1c		Х	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers  \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X	
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5_		X	
	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			i			
	conflict with the state law remain in the governing instrument?			6	Х		
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 I	ΧV		7	X		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the						
	instructions)   LA						
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? If "No," attach explanation			8b	Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or						
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page						
	27)? If "Yes," complete Part XIV			9		X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses			10		X	
				uu		10000	

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Pa	art 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 page 20 of the 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 applic	cation?		13	X	
	Website address ► N/A					
14		lephone no 🕨				
	10 Indian Bowl Point					
	Located at ► Lumberton, MS	ZIP+4 ▶	39455	•		
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			
<u> Pa</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Require	<u>d</u>				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	∐ Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	Yes	X No	]		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No 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		<u></u>			
	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		E=3			
	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 Regula	tions	/-			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ ∐			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		4-			
	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c		
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))					
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and		<b></b>			
	6e, Part XIII) for tax year(s) beginning before 2009?		X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
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 page 20 of the instructions )		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
_	20 , 20 , 20 , 20			-		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	П.,	₹			
	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 40 of 5 of	t				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		37/5			
4 -	foundation had excess business holdings in 2009 )	_	N/A	3b	ļ	3.5
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposi			4a		X_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it					37
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in	20097		4b		<u> </u>

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_Pa	art VII-B Statements Regarding /	Activities for Which Form	4720 May Be F	Required (con	tinued)			
5a	During the year did the foundation pay or incu	r any amount to			_			
	(1) Carry on propaganda, or otherwise attempt	ot to influence legislation (section 4	4945(e))?	□,	Yes X No			
	(2) Influence the outcome of any specific pub	lic election (see section 4955), or t	to carry on,					
	directly or indirectly, any voter registration	drive?		╽,	Yes X No			
	(3) Provide a grant to an individual for travel,	study, or other similar purposes?		□,	Yes 🛚 X No			]
	(4) Provide a grant to an organization other th							
	section 509(a)(1), (2), or (3), or section 49	40(d)(2)? (see page 22 of the inst	ructions)	□,	Yes X No			
	(5) Provide for any purpose other than religion	us, charitable, scientific, literary, o	r educational					ĺ
	purposes, or for the prevention of cruelty t	o children or animals?		□ ,	Yes X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of t	he transactions fail to qualify unde	er the exceptions de	scribed in				1
	Regulations section 53 4945 or in a current no	itice regarding disaster assistance	(see page 22 of the	e instructions)?	N/A	5b		Ь—
	Organizations relying on a current notice rega	*			▶ ∐			
С	If the answer is "Yes" to question 5a(4), does to	the foundation claim exemption fro	m the tax	(- [		[		
	because it maintained expenditure responsibil	ity for the grant?		N/A 📗 🔻	Yes No			
	If "Yes," attach the statement required by Regi	ulations section 53 4945-5(d)						
6a	Did the foundation, during the year, receive an	ly funds, directly or indirectly, to pa	ay premiums					
	on a personal benefit contract?			□ ,	Yes X No		, 1	
b	Did the foundation, during the year, pay premi	ums, directly or indirectly, on a pei	rsonal benefit contra	act?		6b		X
	If "Yes" to 6b, file Form 8870				-			
7a	At any time during the tax year, was the found	·		_	Yes X No	igwdown		<u> </u>
<u>b</u>	If yes, did the foundation receive any proceeds				N/A	7b		<u> </u>
Pa	art VIII Information About Office	rs, Directors, Trustees, Fo	oundation Man	agers, Highly	Paid Employ	ees,		
	and Contractors							
1 1	ist all officers, directors, trustees, foundation	n managers and their compens	ation (see page 22	of the instruction	1S).			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Ev	pense a	ecount
	(a) Name and addres	ss	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		er allowa	
	<del></del>			ļ	compensation	—		
Ph	il K. Livingston	Lumberton	Trustee					
	Indian Bowl Point	MS 39455	1.00	0	o	4		0
	elen Dufreche	Hammond	Trustee		1			
	406 Edgar Traylor Road	LA 70401	1.00	0	0	1		0
	on Ford, IV	Hammond	Trustee					
40	406 Edgar Traylor Rd	LA 70401	1.00	0	0	4		0
		<del> </del>	<u> </u>			<u> </u>		
2	Compensation of five highest-paid employe	es (other than those included o	n line 1—see page	23 of the instruc	tions).			
	If none, enter "NONE."		<del>- p</del>			т		
			(b) Title, and average		(d) Contributions to employee benefit	(e) Ex	pense a	ecount
	(a) Name and address of each employee pa	aid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		er allowa	
	<del></del>		-		compensation	<b>├</b> ──		
NC	NE							
			<del> </del>	<b></b>		<del> </del>		
			<del> </del>	-		<del>                                     </del>		
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			<u> </u>			—		
						↓		
		· · · · · · · · · · · · · · · · · · ·		<u> </u>	<u> </u>	<u> </u>		
Tota	I number of other employees paid over \$50,000					<u> </u>		0
					Fo	rm <b>99</b> f	0-PF	(2009)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, H	lighly Paid Em	ployees,	
and Contractors (continued)			
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions).	none, enter "NOI	NE."	
	Type of service	(c) Comp	ensation
NONE			
		ŀ	
		<del>-  -</del>	
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	er of		
organizations and other beneficiaries served, conferences convened, research papers produced etc		Exper	nses
1 See Statement 5			
<del></del>			4,000
2 Contribution to Ginger Ford Habitat for Humanity. All			
contributions are used to assist in the construction of			
homes for the needy withing the Florida Parishes Region	on.		1,000
3 See Statement 6			
managinal and a second			500
4 Tangipahoa Parish Senior Citizens. All donations are			
utilized to assist in providing the areas senior citizens and with assential items and as food and abolton			E00
in need with essential items, such as food and shelter Part IX-B Summary of Program-Related Investments (see page 24 of the instruction		<u> </u>	500
Part IX-B Summary of Program-Related Investments (see page 24 of the instruction Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	ліб <i>)</i>	A	
1 N/A	<del>-</del>	Amount	
1 21/22			
2			
All other program-related investments See page 24 of the instructions			
3			
Total. Add lines 1 through 3	<b>•</b>		

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Pa	art X Minimum Investment Return (All domestic foundations must complete this part. For	eign fo	
	see page 24 of the instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	JI	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	]
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	35
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	-35
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	-35
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	-35
	and VIII — Overlife in a Direction of the contract of the cont		
	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	6,000
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	6,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	35
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,965
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundat		- 7000
	qualifies for the section 4940(e) reduction of tax in those years		

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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.

The name, address, and telephone number of the person to whom applications should be addressed **N/A** 

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

c Any submission deadlines

NT / T

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

N/A

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SLU Foundation None Non Profit **SLU Box 2012** To Promote University Advancement 4,000 Hammond LA 70402 Habitat for Humanity None Non Profit 1110 Commercial Drive Homebuilding Support 1,000 Hammond LA 70401 Our Daily Bread None Non Profit 509 S Chestnut Street Support for Food Pantry 500 Hammond LA 70403 Tangi Parish Sr Citizens None Non Profit 106 North Bay Street Elderly Care 500 Amite LA 70422 6,000 **Total** 3a Approved for future payment N/A Total **▶** 3b

DAA

Part XVI-A	Analysis of Income-Producing Ac	tivities				9
Enter gross am	ounts unless otherwise indicated	Unrelate	d business income	Excluded	by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program se		-				the instructions )
		·		1		
d						
f						<del></del> .
-	nd contracts from government agencies					
	p dues and assessments					<del></del>
	savings and temporary cash investments and interest from securities			25	3,491	
	ncome or (loss) from real estate			23	3,491	
	nanced property					
	ot-financed property					
	ncome or (loss) from personal property					
7 Other inves	tment income					
8 Gain or (los	s) from sales of assets other than inventory					
	or (loss) from special events					
	t or (loss) from sales of inventory					<del> </del>
	nue a	-				
		l l	·-···			<del></del>
		l l				
е						
12 Subtotal A	dd columns (b), (d), and (e)			0	3,491	0
	line 12, columns (b), (d), and (e)				13	3,491
	in line 13 instructions on page 28 to verify calculation					
Part XVI-B	<u> </u>					
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purp					of the
	instructions )	cooc (canor andar	-, p	o. o.o p.o	poolo, (oco page ac c	
N/A						
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DAA						Form <b>990-PF</b> (2009)

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					<del>                                     </del>	******			
2.	a le the four	dation directly or indirectly affiliate	d with or rolated to	one or more to		0.0001201.000	<u>.</u>		<del></del>
20		•	•	•	•	organizations			
	described	in section 501(c) of the Code (other	er than section 501(	(c)(3)) or in section	n 527?				Yes X No
t	o If "Yes," co	omplete the following schedule							
	(	a) Name of organization	(b) Type of	f organization		(	c) Description of	of relations	ship
	N/A						<u> </u>		<u> </u>
				·	+				
				<del>- · · · · · · · ·</del>	-	<del></del>		-	
					<del>                                     </del>				
					<u> </u>				
	Under penal	ties of perjury, I declare that I have exam	uned this return, includ	ing accompanying s	chedules a	and statements, and	to the best of r	nv knowle	dge and
	belief, it is fr	ue correct and complete Declaration o	f preparer (other than to	axpayer or fiduciary	is based	on all information of	which preparer	has any k	knowledge
		2 Kmil Ch Chara	A CAN	I		<b>k</b>			
						- 🕨	_ <del>.</del>		
ē	Sigdatu	re of officer or trustee		Date		<u> </u>	tle		
Here			~		1	Date			Preparer's identifying
_	ایما	Preparer's N			1		Check if self-employed	ু ভা	number (see <b>Signature</b> on page 30 of the instructions)
Sign	그 등	signature			4	08/13/10	seir-employed		page 50 of the instructions)
S	Paid sparer's se Only	<u> </u>	1 D D1	653	A.	(00) 13/10	<u>''</u>		<del></del>
	4 7 8 8   1	Firm's name (or yours if David	i B. Danel	, CPA 🖊		ر د			

70401

EIN ► 72-1305539

Phone no 985-429-1040

Firm's name (or yours if self-employed), address,

and ZIP code

P.O. Box 2726

Hammond,

FORDFAMILYT Ford Family Charitable Foundation

Federal Statements

72-1464198 FYE: 12/31/2009

Stat	Statement 1 - Form 990-PF, P	Form 990-PF, Part I, Line 16b - Accounting Fees	ting Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Accounting Fees - Tax Preparatio Total	\$ 395	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$ s	\$ \$
	Statement 2 - Form 990	Statement 2 - Form 990-PF, Part I, Line 18 - Taxes	Se)	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Federal Taxes Total	\$ 202	0 « « «	w w	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Sta	Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses	Part I, Line 23 - Other E	penses	

Charitable Purpose

Adjusted Net

Net Investment

Total

Description

Expenses Office Supplies

Total

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FORDFAMILYT Ford Family Charitable Foundation 72-1464198 • Federal Statements

FYE: 12/31/2009

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

D	escription					
		Beginni of Yea	End of Year	Basis of Valuation		Faır Market Value
Regions Bank						
-		\$	\$ 3,491	Cost	\$_	
Total		\$	 3,491		\$	0

8/13/2010

72-1464198

## **Federal Statements**

FYE: 12/31/2009

### Statement 5 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

#### Description

Contribution to the Southeastern Louisiana University Development Foundation. All funds are utilized to advance the institution of higher education, and fund its degree programs.

## Statement 6 - Form 990-PF, Part IX-A, Line 3 - Summary of Direct Charitable Activities

#### Description

Donation to Our Daily Bread to provide financial assistance in the development of food distribution programs for the homeless and those without the means to provide food for their famlies.

Form (Rev April 2009)

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

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		1	

OMB No 1545-1709

Department of the Treasury File a separate application for each return. Internal Revenue Service 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 Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Name of Exempt Organization **Employer identification number** Type or Ford Family Charitable Foundation print 72-1464198 Phil K. Livingston, Trustee File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions filing your 10 Indian Bowl Point return See City, town or post office, state, and ZIP code. For a foreign address, see instructions Lumberton MS 39455 Check type of return to be filed (file a separate application for each return) Form 990 Form 990-T (corpora Form 990-BL Form 990-T (sec 40 Form 990-EZ Form 990-T (trust ot-Form 990-PF Form 1041-A The books are in the care of ▶ Phil K Livingston Telephone No ▶ FAX No ▶ If the organization does not have an office or place of business in the United States, If this is for a Group Return, enter the organization's four digit Group Exemption Nur for the whole group, check this box ▶ If it is for part of the group, check t a list with the names and EINs of all members the extension will cover I request an automatic 3-month (6 months for a corporation required to file Form 9 until 08/15/10, to file the exempt organization return for the organization for the organization's return for calendar year 2009 tax year beginning , and ending Final return Change in accounting period If this tax year is for less than 12 months, check reason Initial return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 3b Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment

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

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

System) See instructions

Form **8868** (Rev 4-2009)

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