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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 , 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 ELLA WEST FREEMAN FOUNDATION		A Employer identification number 72-6018322
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite P.O. BOX 13218		B Telephone number 504-895-1984
	City or town, state, and ZIP code NEW ORLEANS, LA 70185-3218		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"/>
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			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 26,669,321.		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	42,000.		N/A	
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments	31,691.	30,735.		STATEMENT 1
4	Dividends and interest from securities	625,558.	616,938.		STATEMENT 2
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	<3,243,103.>			
b	Gross sales price for all assets on line 6a	12,005,522.			
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	<43,588.>	<43,588.>		STATEMENT 3
12	Total. Add lines 1 through 11	<2,587,442.>	604,085.		
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 STMT 4	28,488.	0.		28,488.
c	Other professional fees STMT 5	105,747.	105,747.		0.
17	Interest				
18	Taxes STMT 6	16,387.	14,190.		0.
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses STMT 7	267,900.	264,410.		2,929.
24	Total operating and administrative expenses. Add lines 13 through 23	418,522.	384,347.		31,417.
25	Contributions, gifts, grants paid	1,500,075.			1,500,075.
26	Total expenses and disbursements. Add lines 24 and 25	1,918,597.	384,347.		1,531,492.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	<4,506,039.>			
b	Net investment income (if negative, enter -0-)		219,738.		
c	Adjusted net income (if negative, enter -0-)			N/A	

7600

Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	310.	5,132.	5,132.
	2 Savings and temporary cash investments	161,437.	39,940.	39,940.
	3 Accounts receivable 1,742,632.			
	Less: allowance for doubtful accounts ▶		1,742,632.	1,742,632.
	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 STMT 8	3.	3.	3.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 9	30,319,967.	24,170,868.	24,827,669.
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation ▶			
	15 Other assets (describe ▶ PREPAID TAXES)	56,142.	53,945.	53,945.
	16 Total assets (to be completed by all filers)	30,537,859.	26,012,520.	26,669,321.
Liabilities	17 Accounts payable and accrued expenses			
	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 ▶ STATEMENT 10)	19,300.	0.	
	23 Total liabilities (add lines 17 through 22)	19,300.	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	30,518,559.	26,012,520.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
	30 Total net assets or fund balances	30,518,559.	26,012,520.	
	31 Total liabilities and net assets/fund balances	30,537,859.	26,012,520.	

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	1 30,518,559.
(must agree with end-of-year figure reported on prior year's return)	2 <4,506,039.>
2 Enter amount from Part I, line 27a	3 0.
3 Other increases not included in line 2 (itemize) ▶	4 26,012,520.
4 Add lines 1, 2, and 3	5 0.
5 Decreases not included in line 2 (itemize) ▶	6 26,012,520.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	

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			
b SEE ATTACHED STATEMENTS			
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 12,005,522.		15,248,625.	<3,243,103.>

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			<3,243,103.>

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	<3,243,103.>
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	1,567,262.	31,165,926.	.050288
2007	1,237,995.	33,470,667.	.036987
2006	1,630,872.	30,820,255.	.052916
2005	1,329,981.	28,298,044.	.046999
2004	1,241,849.	27,253,139.	.045567

2 Total of line 1, column (d)	2	.232757
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	.046551
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	24,100,262.
5 Multiply line 4 by line 3	5	1,121,891.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,197.
7 Add lines 5 and 6	7	1,124,088.
8 Enter qualifying distributions from Part XII, line 4 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.	8	1,531,492.

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 <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	2,197.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		2	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		3	2,197.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
3 Add lines 1 and 2		5	2,197.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a 53,623.		
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	53,623.
8 Enter any penalty 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	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	51,426.
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input checked="" type="checkbox"/> 51,426. Refunded <input checked="" type="checkbox"/> 0.		11	0.

Part VII-A Statements Regarding Activities

	Yes	No
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?		X
1b 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.		X
c Did the foundation file Form 1120-POL 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. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 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.		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? If "Yes," attach a conformed copy of the changes		X
4a 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 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.		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? If "Yes," complete Part II, col (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> 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	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)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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>WWW.ELLAWEST.ORG</u>	13	X	
14	The books are in care of ► <u>FIRST LINE SERVICES</u> Telephone no. ► <u>(504) 895-1984</u> Located at ► <u>6028 MAGAZINE STREET, NEW ORLEANS, LA</u> ZIP+4 ► <u>70018</u>			
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.

	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?	<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 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)? Organizations relying on a current notice regarding disaster assistance check here	N/A	1b
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?		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)):		
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? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a 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 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

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?

N/A

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
SEE STATEMENT 11		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

Form 990-PF (2009)

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	24,056,574.
b	Average of monthly cash balances	1b	209,336.
c	Fair market value of all other assets	1c	201,361.
d	Total (add lines 1a, b, and c)	1d	24,467,271.
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	24,467,271.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	367,009.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	24,100,262.
6	Minimum investment return. Enter 5% of line 5	6	1,205,013.

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	1,205,013.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	2,197.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	2,197.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,202,816.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,202,816.
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	1,202,816.

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	1,531,492.
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	1,531,492.
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	2,197.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,529,295.

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				1,202,816.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			1,493,288.	
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				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 1,531,492.				
a Applied to 2008, but not more than line 2a			1,493,288.	
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				38,204.
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))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
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				1,164,612.
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	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Part XV	Supplementary Information (continued)
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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
a Paid during the year FROM PASSTHROUGH K-1'S				75.
SEE ATTACHED SCHEDULE				1500000.
Total				▶ 3a 1500075.
b Approved for future payment NONE				
Total				▶ 3b 0.

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------|-----------|
| <p>1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | | Yes | No |
| | | | |
| | 1a(1) | | X |
| | 1a(2) | | X |
| | | | |
| | 1b(1) | | X |
| | 1b(2) | | X |
| | 1b(3) | | X |
| | 1b(4) | | X |
| | 1b(5) | | X |
| | 1b(6) | | X |
| | 1c | | X |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer or trustee <u>X. Smith - Treema</u>		Date <u>11/10/2011</u>		Title <u>Chairman</u>	
	Preparer's signature <u>R. G. Smith CPA</u>		Date <u>11-11-10</u>		Check if self-employed <input type="checkbox"/>	
Paid Preparer's Use Only	Firm's name (or yours if self-employed), address, and ZIP code <u>ERICKSEN, KRENTL & LAPORTE, LLP</u> <u>4227 CANAL STREET</u> <u>NEW ORLEANS, LOUISIANA 70119</u>		EIN <u>72-054733</u>		Preparer's identifying number <u>800442610</u>	
			Phone no. <u>504-486-7275</u>			

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization

Employer identification number

ELLA WEST FREEMAN FOUNDATION**72-6018322**

Organization type (check one).

Filers of:

Section:

Form 990 or 990-EZ

☐

501(c)() (enter number) organization

☐4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐

527 political organization

Form 990-PF

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions
for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

ELLA WEST FREEMAN FOUNDATION

72-6018322

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CHAR LEAD TRUST U/W MONTINE FREEMAN P.O. BOX 13218 NEW ORLEANS, LA 701853218	\$ 42,000.	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.)
			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.)
			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.)

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

▶ File a separate application for each return.

E-FILE

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- 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 and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization	Employer identification number
	ELLA WEST FREEMAN FOUNDATION	72-6018322
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 13218	
File by the due date for filing your return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW ORLEANS, LA 70185-3218	

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 (sec. 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 |

FIRST LINE SERVICES

- The books are in the care of ▶ **6028 MAGAZINE STREET - NEW ORLEANS, LA 70018**

Telephone No. ▶ **(504) 895-1984**FAX No. ▶ **504-895-1988**

- 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 **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ ☒ calendar year **2009** or
- ▶ ☐ tax year beginning _____, and ending _____

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a 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	\$	13,000.
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	\$	53,623.
c 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 System). See instructions	3c	\$	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.

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

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

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

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

- If 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	Employer identification number
	ELLA WEST FREEMAN FOUNDATION	72-6018322
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 13218	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW ORLEANS, LA 70185-3218	

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.

FIRST LINE SERVICES

- The books are in the care of **6028 MAGAZINE STREET - NEW ORLEANS, LA 70018**

Telephone No. **(504) 895-1984**

FAX No. **504-895-1988**

- 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

TAXPAYER NEEDS ADDITIONAL TIME 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.	8a	\$	13,000.
b	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.	8b	\$	53,623.
c	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.	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 **Gina N Rutledge** Title **CPA**

Date **8/15/10**

Form 8868 (Rev. 4-2009)

ELLA WEST FREEMAN FOUNDATION
TAX YEAR - 2009

Payee Organization <i>Project Title</i>	Amount
City of Pass Christian Recovery Program <i>Cit Planner</i>	20,000.00
Louisiana Museum Foundation <i>Katrina Exhibit</i>	25,000.00
Teach for America, Inc <i>Expansion of NOLA Program</i>	50,000.00
Teaching Responsible Earth Education <i>Sunship Earth Program</i>	2,000.00
Bridge House Corporation <i>Expansion Fund</i>	75,000.00
Bureau of Governmental Research <i>Core Funding</i>	15,000.00
Creative Alliance of New Orleans <i>Studio Funding</i>	15,000.00
Habitat for Humanity <i>Volunteer Services Program</i>	25,000.00
Louisiana Civil Service League <i>Annual Support</i>	2,500.00
Radio for the Blind <i>Save WRBH</i>	39,000.00
Second Harvest Food Bank <i>Emergency Food Distribution Program</i>	10,000.00
St. Martin Episcopal School <i>Character & Leadership Program</i>	5,000.00
Trinity Education Enrichment Program <i>Support for Enrichment Program</i>	3,000.00
Unity of Greater New Orleans <i>A Home for Everyone Program</i>	25,000.00

Volunteers of America <i>Lighthouse After School Program</i>	15,000.00
Oschner Clinic Foundation <i>Neo-Natal Intensive Care Unit</i>	300,000.00
Friends of Danneel Park <i>Danneel Park Refurbishment Program</i>	20,000.00
Culver Educational Foundation <i>Batten Leadership Challenge</i>	100,000.00
Louisiana Landmark Society, Inc. <i>Pitot House Restoration</i>	76,000.00
Public Affairs Research Council of Louisiana <i>Grant</i>	15,000.00
Hermann-Grima/Gallier Historic House <i>Capital Improvements</i>	16,000.00
Bayou District Foundation <i>A Chance to Succeed</i>	100,000.00
Bureau of Government Research <i>75th Anniversary Fund</i>	50,000.00
Committee for a Better New Orleans <i>Citizen Participation Program</i>	1,000.00
First Grace Community Alliance <i>Expansion of Hagar's House</i>	2,500.00
Foundation for Science and Math Education <i>New Facility</i>	5,000.00
Grace Child Center <i>Virtues Project</i>	6,500.00
Holy Cross School <i>Capital Campaign</i>	75,000.00
The Nature Conservancy <i>Restoring Oysters in Louisiana</i>	25,000.00
Preservation Alliance of New Orleans	10,000.00

Atlas Project

St. Andrew's Episcopal School <i>Early Childhood Subsidy</i>	7,000.00
------------------------------------------------------------------------	----------

St. George's Episcopal School <i>Preschool Expansion</i>	50,000.00
--------------------------------------------------------------------	-----------

Start the Adventure in Reading <i>One-on-One Reading Program</i>	5,000.00
----------------------------------------------------------------------------	----------

New Schools for New Orleans <i>Operations Support</i>	75,000.00
-----------------------------------------------------------------	-----------

Providence Community Housing <i>Laffite Redevelopment</i>	100,000.00
---------------------------------------------------------------------	------------

Tulane University <i>Career Management Program</i>	134,500.00
--------------------------------------------------------------	------------

TOTAL CONTRIBUTIONS	<u>1,500,000.00</u>
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**ELLA WEST FREEMAN FOUNDATION
CONTRIBUTION PLEDGES
12/31/09**

PLEDGED TO	TERMS	OUTSTANDING AMOUNT 12/31/08	PLEDGES/ (EXPIRATIONS)	PAYMENTS	OUTSTANDING AMOUNT 12/31/09
Bureau of Governmental Research	\$150,000 payable over 3 years	50,000 PY	-	50,000 D	-
City of Pass Christian Recovery Program	\$60,000 payable over 3 years	20,000	-	20,000	-
Public Affairs Research Council of LA, Inc	\$45,000 starting in 2008 (no mention of payout terms) three years beginning 2008	30,000	-	15,000	15,000
Court Watch	\$45,000 payable over 3 years	15,000	-	-	15,000
Teaching Responsible Earth Education	\$7,000 payable in 3 installments of \$4,000, \$2,000, & \$1,000	3,000	-	2,000	1,000
Louisiana Museum Foundation	\$50,000 payable over 2 years	25,000	-	25,000	-
Providence Community Housing	\$300,000 payable in installments of \$200,000 and \$100,000	100,000	-	100,000	-
Teach for America	\$150,000 payable over 3 years	100,000	-	50,000	50,000
Tulane University	\$1,000,000 payable in 3 equal installments	666,667	-	134,500	532,167
UNITY of Greater New Orleans	\$50,000 payable in 2 equal installments	-	50,000 B	25,000	25,000
The Nature Conservancy	\$50,000 payable in 2 equal installments	-	50,000 B	25,000 D	25,000
		PY			
		<u>1,009,667</u>	<u>100,000</u>	<u>446,500</u>	<u>663,167</u>

B - Traced to Authorization in Board Minutes @ w/p 2750 05-2750 10. Examined grant letters to the recipients

D - Traced To Cash Disbursements Schedule @ w/p 5100 10

PY - Traced to Prior Year Workpapers

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	PIMCO	P	VARIOUS	VARIOUS
b	WCM	P	VARIOUS	VARIOUS
c	WCM	P	VARIOUS	VARIOUS
d	STRALEM	P	VARIOUS	VARIOUS
e	FEDERATED	P	VARIOUS	VARIOUS
f	FEDERATED	P	VARIOUS	VARIOUS
g	WENTWORTH	P	VARIOUS	VARIOUS
h	INVESCO	P	VARIOUS	VARIOUS
i	INVESCO	P	VARIOUS	VARIOUS
j	LAZARD	P	VARIOUS	VARIOUS
k	LAZARD	P	VARIOUS	VARIOUS
l	HORIZON	P	VARIOUS	VARIOUS
m	HORIZON	P	VARIOUS	VARIOUS
n	MERIDIAN DIVERSIFIED FUND	P	VARIOUS	VARIOUS
o	WESTBRIDGE VENTURES, LP	P	VARIOUS	VARIOUS

(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 3,025,702.		3,082,293.	<56,591.>
b 143,027.		131,507.	11,520.
c 299,461.		395,493.	<96,032.>
d 100,181.		80,663.	19,518.
e 375,441.		480,938.	<105,497.>
f 484,275.		762,829.	<278,554.>
g 20,452.		34.	20,418.
h 235,226.		271,786.	<36,560.>
i 339,921.		728,202.	<388,281.>
j 392,558.		462,633.	<70,075.>
k 651,228.		1,063,030.	<411,802.>
l 1,177,073.		1,310,357.	<133,284.>
m 1,811,134.		3,947,221.	<2,136,087.>
n 2,884,127.		2,065,712.	818,415.
o 53,167.		71,272.	<18,105.>

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			<56,591.>
b			11,520.
c			<96,032.>
d			19,518.
e			<105,497.>
f			<278,554.>
g			20,418.
h			<36,560.>
i			<388,281.>
j			<70,075.>
k			<411,802.>
l			<133,284.>
m			<2,136,087.>
n			818,415.
o			<18,105.>

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

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

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 LONG TERM CAPITAL GAINS FROM PASSTHROUGH K-1'S		P	VARIOUS	VARIOUS
b SHORT TERM CAPITAL GAINS FROM PASSTHROUGH K-1'S		P	VARIOUS	VARIOUS
c CAPITAL GAINS DIVIDENDS				
d				
e				
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

(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)
		306,421.	<306,421.>
		88,234.	<88,234.>
12,549.			12,549.
a			
b			
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(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	
			<306,421.>
			<88,234.>
			12,549.
a			
b			
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

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	<3,243,103.>
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

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
CAPITAL ONE	410.
CAPITAL ONE - TAX EXEMPT INCOME	56.
GOLDMAN SACHS	108.
INTEREST INCOME FROM PASSTHROUGH K-1'S	30,217.
TAX-EXEMPT INCOME FROM PASSTHROUGH K-1'S	900.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	31,691.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
CAPITAL ONE	19.	19.	0.
DIVIDEND INCOME FROM PASSTHROUGH K-1'S	38,942.	0.	38,942.
EQUITAS - MGD BY FEDERATED	86,370.	137.	86,233.
EQUITAS - MGD BY HORIZON	26,501.	6.	26,495.
EQUITAS - MGD BY INVESCO	45,158.	6,675.	38,483.
EQUITAS - MGD BY LAZARD	51,444.	0.	51,444.
EQUITAS - MGD BY NATURAL RESOURCES	20,989.	0.	20,989.
EQUITAS - MGD BY STRALEM	27,168.	0.	27,168.
EQUITAS - MGD BY WCM	16,161.	14.	16,147.
EQUITAS - MGD BY WENTWORTH	68,100.	0.	68,100.
EQUITAS - TIPS ACCOUNT	12,500.	0.	12,500.
PERSHING - PIMCO	244,755.	5,698.	239,057.
TOTAL TO FM 990-PF, PART I, LN 4	638,107.	12,549.	625,558.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
RENTAL REAL ESTATE FROM PASSTHROUGH K-1S	<417.>	<417.>	
OTHER RENTAL INCOME FROM PASSTHROUGH K-1S	476.	476.	
ORDINARY INCOME FROM PASSTHROUGH K-1S	<4,889.>	<4,889.>	

OTHER PORTFOLIO INCOME FROM PASSTHROUGH K-1S	4,673.	4,673.
UBTI INCOME FROM PASSTHROUGH K-1S	<51,309.>	<51,309.>
ROYALTY INCOME FROM PASSTHROUGH K-1'S	1,237.	1,237.
NET SECTION 1231 GAIN FROM PASSTHROUGH K-1'S	<823.>	<823.>
OTHER INCOME FROM PASSTHROUGH K-1S	<1,858.>	<1,858.>
SECTION 1256 CONTRACTS FROM PASSTHROUGH K-1'S	<2,278.>	<2,278.>
CANCELLATION OF DEBT INCOME FROM PASSTHROUGH K-1'S	2,402.	2,402.
GUARANTEED PAYMENTS FROM PASSTHROUGH K-1'S	30.	30.
LITIGATION PROCEEDS	9,168.	9,168.
TOTAL TO FORM 990-PF, PART I, LINE 11	<43,588.>	<43,588.>

FORM 990-PF	ACCOUNTING FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ERICKSEN, KRENTTEL, & LAPORTE	17,387.	0.		28,488.	
FIRST LINE SERVICES	11,101.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	28,488.	0.		28,488.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROFESSIONAL FEES	105,747.	105,747.		0.	
TO FORM 990-PF, PG 1, LN 16C	105,747.	105,747.		0.	

FORM 990-PF	TAXES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES PAID FROM PASSTHROUGH K-1'S	2,110.	2,110.		0.	
FOREIGN TAXES	12,080.	12,080.		0.	
2009 FEDERAL EXCISE TAX	2,197.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	16,387.	14,190.		0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK CHARGES	414.	414.		0.	
COMPUTER EXPENSES	1,780.	0.		1,780.	
PORTFOLIO DEDUCTIONS FROM PASSTHROUGH K-1'S	189,011.	189,011.		0.	
OTHER DEDUCTIONS FROM PASSTHROUGH K-1'S	654.	654.		0.	
INTEREST EXPENSE FROM PASSTHROUGH K-1'S	31,628.	31,628.		0.	
NONDEDUCTIBLE EXPENSE FROM PASSTHROUGH K-1'S	538.	0.		0.	
SECTION 59(E)(2) EXPENDITURES FROM PASSTHROUGHS	5,197.	5,197.		0.	
SECTION 179 DEDUCTION FROM PASSTHROUGHS	23.	0.		0.	
MISCELLANEOUS	322.	0.		322.	
OIL & GAS COST DEPLETION FROM PASSTHROUGH K-1'S	37,028.	37,028.		0.	
ROYALTY DEDUCTIONS FROM PASSTHROUGH K-1'S	447.	447.		0.	
OFFICE SUPPLIES	827.	0.		827.	
INVESTMENT INTEREST EXPENSE	31.	31.		0.	
TO FORM 990-PF, PG 1, LN 23	267,900.	264,410.		2,929.	

FORM 990-PF CORPORATE STOCK STATEMENT 8

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
LOU-ALA INVEST CO	1.	1.
MISSOURI LEASING CO INC	1.	1.
PINE HARBOR COMPANY	1.	1.
TOTAL TO FORM 990-PF, PART II, LINE 10B	3.	3.

FORM 990-PF OTHER INVESTMENTS STATEMENT 9

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
EQUITAS EVERGREEN FUND	COST	2,012,195.	1,992,913.
FEDERATED	COST	1,484,670.	1,484,742.
GS PRIVATE EQUITY PARTNERS II, LP	COST	337,138.	246,557.
HORIZON	COST	1,050.	1,050.
INVESCO	COST	819,155.	936,722.
LAZARD	COST	2,060,313.	2,526,584.
MERIDIAN DIVERSIFIED FUND	COST	0.	0.
NATURAL GAS PARTNERS IX, L.P	COST	217,970.	241,734.
NGP MIDSTREAM & RESOURCES, LP	COST	532,504.	680,077.
OLD WESTBURY VENTURE CAPITAL FUND II, LLC	COST	460,910.	450,402.
PERSHING	COST	401,476.	401,476.
PIMCO (PTTRX)	COST	2,489,959.	2,572,146.
TIFF PARTNERS, I	COST	<158,178.>	43,517.
TIFF PARTNERS, II	COST	<12,570.>	46,112.
TIFF PARTNERS, IV	COST	507,128.	619,490.
TIFF PARTNERS, V - INTERNATIONAL	COST	191,043.	165,350.
TIFF PARTNERS, V - US	COST	504,272.	647,102.
TIFF PRIVATE EQUITY PARTNERS, 2005	COST	417,202.	431,440.
TIFF PRIVATE EQUITY PARTNERS, 2007	COST	163,482.	174,707.
TIFF REALTY & RESOURCES 2008	COST	179,033.	192,710.
WCM	COST	1,317,226.	1,233,438.
WENTWORTH	COST	5,176,196.	4,556,640.
WESTBRIDGE VENTURES LP	COST	0.	0.
CAPITAL ONE INVESTMENTS	COST	200,672.	200,672.
STRALEM	COST	1,954,712.	2,369,070.
NATURAL RESOURCES	COST	1,113,449.	1,300,182.
TIPS MUTUAL FUNDS	COST	729,617.	763,094.
LOOMIS SAYLES INVESTMENT GRADE	COST	495,749.	547,352.
MERIDIAN SEGREGATED PORTFOLIO	COST	574,495.	2,390.
TOTAL TO FORM 990-PF, PART II, LINE 13		24,170,868.	24,827,669.

FORM 990-PF	OTHER LIABILITIES	STATEMENT 10
DESCRIPTION	BOY AMOUNT	EOY AMOUNT
UNSETTLED TRANSACTIONS PAYABLE	19,300.	0.
TOTAL TO FORM 990-PF, PART II, LINE 22	19,300.	0.

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT 11
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LOUIS M. FREEMAN P.O. BOX 13218 NEW ORLEANS, LA 701853218	CHAIRMAN 0.00	0.	0.	0.
R. WEST FREEMAN, III 714 FERN STREET NEW ORLEANS, LA 70118	TRUSTEE 0.00	0.	0.	0.
VIRGINA FREEMAN ROWAN 1727 ARABELLA NEW ORLEANS, LA 70115	TRUSTEE 0.00	0.	0.	0.
PHILIP WOOLLAM 295 WALNUT STREET NEW ORLEANS, LA 70118	TRUSTEE 0.00	0.	0.	0.
RICHARD W. FREEMAN, JR. P.O. BOX 13218 NEW ORLEANS, LA 701853218	VICE-CHAIRMAN 0.00	0.	0.	0.
TINA FREEMAN WOOLLAM 295 WALNUT STREET NEW ORLEANS, LA 70118	TRUSTEE 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

The Ella West Freeman Foundation

Our History

The Foundation supports grant seekers from the southeast Louisiana area. Within this area, highest priority is given to grants in the following categories.

Our Mission

Grants

- Education with an emphasis on private education
- Arts, both performing and applied
- Community improvement and governmental oversight
- Human service organizations with an emphasis on capital projects for established agencies.

Application

Contacts

Links

Home

Grant seekers for capital projects will need to demonstrate a history of operational stability and the financial capacity to maintain the new facilities. Capital grants require evidence of broad support for the project and are usually made contingent upon the agencies entering into a contract to begin the project.

Operational support for health and human service agencies participating in combined campaigns such as United Way and the Archbishop's Community Appeal are usually avoided. We welcome capital appeals for these agencies.

The Foundation is very selective in its support of endowment appeals. To be considered, the grant seeker must demonstrate strong, effective management of their existing endowment and strict controls on the spending of the endowment.

Grant seekers should pay strict attention to proposal requirements. Failure to do so may cause your grant to be denied without review.

The board never entertains any presentation in person at its meetings. Your proposal must speak for itself. Every proposal to be considered by the board is assigned a board member to be the go-between and provide a preliminary recommendation. In many cases, this board member may contact the agency to answer questions or seek a site visit.

The board meets twice each year to review grants. Deadlines for receipt of proposals are March 1st and October 15th. Please make every attempt to submit your proposal before the deadline as we will be able to consider it with more care.

ELLA WEST FREEMAN FOUNDATION APPLICATION FORM

In evaluating requests, the Ella West Freeman Foundation gives special consideration to organizations in the Greater New Orleans area. Within the New Orleans area, the Ella West Freeman Foundation supports a variety of programs in the fields of civic affairs, community development, the arts, education and human resources. Priority is given to funding for specific projects or programs incorporating well-defined objectives and timetables and promising broad public benefits. They are usually given for a period of time not exceeding two years. Longer term projects will usually require evaluation for further funding.

Capital projects are considered for organizations with strong records of community service. They must demonstrate true need for the proposed facility and they must also provide a credible fund-raising plan as well as demonstrate the capacity to maintain the building and facilities once they are in place.

Sustaining grants to organizations are given a lower priority. Ordinarily, no operating support is considered for organizations supported by community giving campaigns such as the United Way and the Archbishop's Community Appeal.

Proposals are accepted and reviewed throughout the year. Interviews will be conducted only at the initiation of the Foundation. Decisions regarding grants will be made only at regularly scheduled meetings of the trustees which are usually held twice a year in the spring and fall. Deadlines for submitting proposals prior to the scheduled meetings are March 1 and October 15 respectively. Proposals must physically be in our possession on the deadline day, but the earlier we receive them the more carefully we can review them.

GENERAL INSTRUCTIONS

- ◆ Please type and single-space all proposals.
- ◆ Please answer all of the questions in the order listed.
- ◆ Please use the headings, subheadings, and numbers provided.
- ◆ Please submit two copies.
- ◆ Please do not include any materials other than those specifically requested at this time.
- ◆ Please do not send videotapes, DVD's, or CD's.
- ◆ Please do not bind or staple your application.

Proposals should be sent to:

Louis M. Freeman, Chairman
The Ella West Freeman Foundation
P.O. Box 13218, New Orleans, LA 70185-3218
(Tel) 504-895-1984; (Fax) 504-895-1988

**ELLA WEST FREEMAN FOUNDATION
GRANT PROPOSAL SUMMARY SHEET**

Name and Address of Organization		Date Telephone
Names and Titles of Individuals Submitting Request	Email Address	United Way/ACA/Gov't. Support
Amount Requested \$	Total This Project/Program \$	Total Organizational Annual Budget \$
Brief title (One Sentence)		Dates of Project/Program
<p>Please summarize in a short paragraph the purpose of your agency. Briefly explain why your agency is requesting this grant, what outcomes you hope to achieve, and how you will spend the funds if a grant is made.</p>		
Others being solicited for this project/program.	Amount Requested	Amount Received
Subject Focus (Program Area)	Group Served (refer to LA.4. of Grant Proposal Format)	Type of Support Requested (i.e. Operating, Capital, Start-Up, etc.)
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Signature of Board Chairman</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Print Name</div>		<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Signature of Executive Officer</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Print name</div>
For Grantmaker Use		
Date Received	Proposal Identification Number	

**Ella West Freeman Foundation
Grant Proposal Format
Program and Operating Support**

I. PROPOSAL SUMMARY - The attached Proposal Summary Sheet must be completed.

II. PROPOSAL NARRATIVE - *Please do not use more than three pages*

A) Background - Describe the work of your agency, addressing each of the following topics:

1. A brief description of its history and mission.
2. The issue(s) that your organization works to address.
3. Current programs and accomplishments. Please emphasize the achievements of the past year.
4. The group that your agency reaches, including geographic location, socio-economic status, race, ethnicity, gender, age, and physical or mental abilities.
5. Overview of organization structure including board, staff and volunteer involvement.
6. Your organization's relationships - both formal and informal - with other organizations working to meet the same needs or providing similar services. Please explain the differences from and similarities to these other agencies.

B) Description - Please describe the program for which you seek funding.

1. If applying for *general operating support*, briefly describe how this grant would be used.
2. If your request is for a *specific project/program*, please describe in detail:
 - A statement of its primary purpose and the issue that you are seeking to address.
 - The group that you plan to reach, how they will be involved and how they will benefit from the project/program.
 - Strategies that you will use to implement your project/program.
 - The names and qualifications of the individuals who will direct the project/program.
 - Anticipated length of the project/program.
 - How the project/program contributes to your organization's overall mission. How it will benefit our community.
 - Any collaboration/interaction with other groups.

C) Evaluation - Please explain how you will measure the effectiveness of your activities.

1. Describe your criteria for a successful program.
2. What are the results you expect to have achieved by the end of the funding period?
3. What are your plans for future funding?
4. Explain how evaluation results will be used and/or disseminated and, if applicable, how the project/program can be replicated.

**Ella West Freeman Foundation
Grant Proposal Format
Program and Operating Support**

III. STATUS CERTIFICATION FORM - Please complete and sign the attached Status Certification Form

- If your organization is classified by the IRS as described in either sections 509(a)(1) and 170(b)(1)(a)(vi) or section 509(a)(2), please send a copy of the IRS form 990 for the most recent two years.
- If your organization is not required to file a form with the IRS, please provide a summary of all support for the past three years. Indicate sources of any support that may have exceeded 10% of total support in any individual year. We are requesting this information to determine if you are a publicly supported charity as defined by the Internal Revenue Service.

IV. ATTACHMENTS - Please label all attachments.

A) Financial Information - Overall Organization

1. Organization's current and prior year operating budget, including expenses and revenue; list sources of revenue received and those pending, including in-kind.
2. Most recent annual financial statement (audited, if available).

B) Financial Information - Project/Program (if applicable)

1. A budget for the project/program and amount you are seeking from this foundation.
2. List each staff separately and include % of time spent on project.
3. List names and amounts requested of other foundations, corporations, and other funding sources to which this proposal has been submitted.
4. Indicate the specific uses of the requested grant.
5. List in-kind support.

C) Other supporting materials

1. A list of your board of directors and their principal affiliations. Please include criteria for board selection.
2. One-paragraph resumes of key organizational staff including key project/program Staff.
3. A copy of the current IRS determination letter indicating 501(c)(3) and 509(a) tax exempt status or that of your fiscal agent.
4. Your most recent annual report, if available.
5. Agency affiliation with federated funds or public agencies.

**Ella West Freeman Foundation
Grant Proposal Format
Capital Grants**

I. PROGRAM NARRATIVE - *Please do not use more than three pages*

A. Background - Describe the work of your agency, addressing each of the following topics:

1. A brief description of its history and mission.
2. The issue(s) that your organization works to address.
3. Current programs and accomplishments. Please emphasize the achievements of the past year.
4. The group that your agency reaches, including geographic location, socio-economic status, race, ethnicity, gender, age, and physical or mental abilities.
5. Overview of organization structure including board, staff and volunteer involvement.
6. Your organization's relationships - both formal and informal - with other organizations working to meet the same needs or providing similar services. Please explain the differences from and similarities to these other agencies.

II. CAPITAL PROJECT NARRATIVE

Please answer all questions under Question Set A. Depending on the nature of your capital request (bricks and mortar, equipment, or endowment), please answer the appropriate set of questions under Question Set B. Please answer ALL the questions for the capital project narrative (question sets A and B) in a *maximum of 3 pages*. The items in parenthesis in each of the question sets are indicative of the types of information we need to make a decision. Address only those that apply to your project.

Question Set A: All requests for capital projects

1. State the budget for the project.
2. What are the designated purposes or goals of the capital project?
3. How will this capital project enhance the mission and/or operations of your organization?
4. Describe how those you serve will benefit if this project is accomplished.

Question Set B: Choose based on type of request – bricks and mortar OR equipment OR endowment.

1. Bricks and Mortar (Building purchase, construction, or renovation, or land purchase)

a. Describe the land, building or planned building.

(For example: location, general condition, acreage or square footage, cost, age, historic value, parking. Are there any pre-existing environmental issues? Are there zoning issues? What is the stage of permitting processes and regulatory approvals? At what stage are the architectural plans? What are the costs of planning?)

b. Describe the intended uses and impacts.

(Include all planned activities to be carried out in the building or on the land, and the program spaces to be accommodated. What are the neighborhood and environmental impacts of purchase or construction? What are the neighborhood and environmental impacts of the intended use? Will there be costs for dislocated staff during renovations?)

c. What is the basis for the cost of the land, building and/or renovations?

(Was this a bid process or are the costs an estimate? If an estimate, what is the basis for the estimate? Have you researched comparable sales or renovation projects? What were your results? Attach site and floor plans in sufficient detail to justify cost estimates.)

d. Describe in detail your fundraising plan for your current capital effort.

e. Describe your capacity to manage this building or property.

(What plans have you made to ensure that your organization is able to maintain the building or land? Cite staff capabilities to manage similar projects and/or facilities.)

f. What will be the impact of the operation of the building or property on your organizations' operating budget?

(Include explanation of planned use of any space vacated when the new facility is occupied.)

g. Is there any relationship between the seller or principle vendors and any member of the Board of Directors or paid staff?

h. Complete budget information sheet that follows (for all projects greater than \$1,000,000.00)

2. Equipment

a. Describe the equipment to be purchased.

b. What is the basis for the cost of the equipment?

(Have you secured at least two bids or was the cost negotiated? If estimated, what is the basis for the estimate? Is installation included? If not, what is the cost of installation?)

c. How will you operate and maintain the equipment. What will be the impact of the operation of the equipment on your organization's operating budget?

(What is the life expectancy and/or warranty on the equipment? Include the cost of any maintenance or service contract. Does the equipment require your staff to be trained, and if so, how will you secure this training? Are there ancillary needs and/or costs associated with the use of this equipment, e.g., access to power sources and/or internet access? How will you safeguard the equipment?)

d. If this is a purchase of technology-related equipment, how have you assessed the need for this technology?

e. What plans have you made for eventual replacement of this equipment?

f. If this equipment is actually replacing old equipment due to wear, loss or obsolescence, describe the equipment that is being replaced. How old is it? Why does it require replacement? How will the old equipment be disposed of?

If this will be a new equipment purchase, have you researched alternatives to purchase, such as leasing, outsourcing, or sharing with another organization? Why do you believe that purchasing is cost effective?

3. Endowment

- a. What are the uses of the funds that you seek? Will they be restricted or unrestricted?
- b. What was the market value of the endowment for the last three years? Please break out by restricted, non-restricted and total.
- c. Detail the payout for those three years and attach a copy of your spending policy.
- d. Who manages the investments? Is the manager overseen by a board or volunteer committee?
- e. Does this manager have any association with your organization (other than professional)?
- f. What has been your time weighted total rate of return for each of the last 5 years, 3 years, 1 year? Please state the beginning and ending dates of the time periods.
- g. Please attach a copy of the agency's Investment Policy Statement.

III. PROPOSAL SUMMARY - The attached grant proposal summary sheet must be completed.

IV. STATUS CERTIFICATION FORM - Please complete and sign the attached Status Certification Form

- If your organization is classified by the IRS as described in either sections 509(a)(1) and 170(b)(1)(a)(vi) or section 509(a)(2), please send a copy of the IRS form 990 for the most recent two years.
- If your organization is not required to file a form with the IRS, please provide a summary of all support for the past three years. Indicate sources of any support that may have exceeded 10% of total support in any individual year. We are requesting this information to determine if you are a publicly supported charity as defined by the Internal Revenue Service.

V. ATTACHMENTS - Please label all attachments.

A. Financial Information - Overall Organization

1. Organization's current and prior year operating budget, including expenses and revenue; list sources of revenue received and those pending, including in-kind.
2. Most recent annual financial statement (audited, if available).
3. List names and amounts requested of other foundations, corporations, and other funding sources to which this proposal has been submitted.

C. Other supporting materials

1. A list of your board of directors and their principal affiliations. Please include criteria for board selection.
2. One-paragraph resumes of key organizational staff including key project/program Staff.
3. A copy of the current IRS determination letter indicating 501(c)(3) and 509(a) tax exempt status or that of your fiscal agent.
4. Agency affiliation with federated funds or public agencies.

CAPITAL PROJECTS: BUDGET INFORMATION SHEET – For Bricks & Mortar requests

Name of Organization:

Date:

Financial Information

Show changes in net assets for Unrestricted and Temporarily Restricted funds with budget information for your current fiscal year and actual data for three prior fiscal years. Prior year statements should reconcile with your Audited Financial statement.

FY ☐
FY ☐
FY ☐
FY ☐

Revenue

Expense

Net

Campaign Goals

Project Timetable mo/yr

Building purchase
Land purchase
Building construction
Building renovation
Equipment purchase: new
Equipment purchase: replacement
Furnishings
Fees
Contingency
Fundraising expense
Interest
Other (identify)
Other (identify)

Subtotal
Annual/Program (if applicable)
Endowment (if applicable)

General construction contract was/will be signed:
Project start:
Project completion:
Building purchase:
Land purchase:
Equipment purchase:

Total campaign goal

Funds Available

Show only formal commitments below. Please attach a complete list of sources approached, amounts requested, amounts received.

Private funds
Government
Long-term financing
Organizational funds
Bequests
Other: (identify)
Other: (identify)

Total funds available
Balance remaining
Amount requested
from this foundation

STATUS CERTIFICATION

In submitting this grant application, the Applicant certifies as follows:

1. The Applicant was recognized by the Internal Revenue Service by letter dated _____ as an organization described in the following category (check appropriate box):
 - ☐ Sections 509(a)(1) and 170(b)(1)(a)(vi)
 - ☐ Section 509(a)(2)
 - ☐ Section 509(a)(1), other than Section 170(b)(1)(a)(vi)
 - ☐ Section 509(a)(3)
 - ☐ Section 509(a)(4)
2. A copy of the most recent letter from the Internal Revenue Service referred to in item 1 above has been attached to this grant application, and no revocation of or change in the determination set forth in that letter has been received by the Applicant from the Internal Revenue Service.
3. To the best of the knowledge of the officers and directors or trustees of the Applicant, there has been no proposal, threat or suggestion by the Internal Revenue Service to the Applicant that the determination referred to in paragraph 1 above should be revoked or modified.
4. None of the officers, directors, trustees or other managers of the Foundation to which this grant application is submitted is, or is expected to become, a founder, creator, officer, director, trustee or other manager of the applicant. (If this is not accurate, the details of such a relationship must be fully described elsewhere in this application.)
5. The Applicant commits to the Foundation to which this application is submitted that it will advise the Foundation of any change in the certifications contained in any of paragraphs 1 through 4 above which occur while this grant application is pending.

Name

Title: _____

The Ella West Freeman Foundation
K-1 Summary
12/31/2009

		GS Private		TIFF Partners V		Equitas		Old Westbury		Westbridge		TIFF Private		TIFF Private		Natural Gas		NGP Midstream		TIFF Realty &		TOTAL																				
		Equity Partners	II, LP	TIFF Partners	III, LLC	TIFF Partners	V - US, LLC	Evergreen	Fund II, LLC	Ventures, LP	Equity Partners	2005, LLC	Equity Partners	2007, LLC	Partners IV	20-0632609	20-8283214	20-8283214	20-0833052	K-1's		K-1's																				
1	Ordinary Income	(3)		(112)	(4)	(609)	(3)	(4,746)	(1,361)				(1)	(4,404)	(1,860)	3,469	2,496		(1,519)	(4,889)		X																				
2	Income from Rental R/E	(39)		(161)	(9)			(222)							14	(15,711)	(17,497)		(859)			X																				
3	Income from other Rental						2	156	16								304		(24)			X																				
4	Guaranteed Payments							30														X																				
5	Interest Income	2,961		216	199	8,246	1,961		2,326			8,526	2,254	6	493	672			1,017			X																				
6A	Total Ordinary Dividends	742		1	129	1,776	498	22,758	1,641	125		3,967	172	8	576	5,183			157	38,942		X																				
6B	UBTI																					Sum of																				
6B	Qualified Dividends	668		129	300	472						3,588	89			21																										
7	Royalty Income				176	182	19					48	322	48	353	1,237					6,243	(51,309)																				
8	Net short-term capital gain	36			8,511		538	(98,896)	(914)			258	499		(17)	573			1,050	(88,234)		X																				
8	UBTI						(30)												7			X																				
9A	Net long-term capital gain	(12,038)		(19,740)	3,962	31,409	(11,413)	(184,939)	7,530	(109,886)		5,036	(3,506)		17	844			2	(306,421)		X																				
9B	UBTI																																									
9B	Collectibles (28%) gain/(loss)																																									
9C	Unrecaptured sec 1250 Gain						(2)	(542)	87			15	(4)		(28)				(2)	(830)	7																					
10	Net Sec 1231 gain	(172)			17		(5)	203				(57)	(6)																													
11A	Other portfolio income	927		1,964	331	(2,016)	316	1,256	71				9						133	4,673		X																				
11B	UBTI																																									
11C	Section 1256 Contract						1	(2,291)						2		10																										
11E	Cancellation of Debt						79	2,323																																		
11F	Other income	4			28	(1,583)	1,887		102			(518)	(883)		(63)	(827)			(5)	(1,858)	2,402																					
12	Section 179 deduction						(9)						(14)																													
13A	Charitable Contributions (50%)				(2)		(5)	(2)				(9)	(2)		(27)	(23)				(23)	(75)	X																				
13B	Charitable Contributions (30%)																																									
13H	Investment Interest Expense	(23)			(29)	(16)	(192)	(30,870)	(1)			(162)	(38)			(265)			(32)	(31,628)		X																				
13I	UBTI				(77)	(3)	(77)					(7)	(7)																													
13J	Deductions - Royalty Income				(13)	(12)	(247)					(4)	(21)		(139)				(11)	(447)		X																				
13J	Section 59(e)(2) expenditures				(2)		(414)	(97)				(15)	(7)		(3,228)	(917)			(517)	(5,197)		X																				
13K	UBTI	(7,258)		(2,449)	(1,295)	(11,692)	(17,123)	(37,931)	(21,696)	(414)		(3,235)	(9,976)		(18,874)	(22,873)			(948)	(186,828)		X																				
13K	Deductions (Portfolio) (2% Floor)																																									
13L	UBTI	(5)				(37)	(35)	(612)	(193)			(1,332)							(6)	(2,183)		X																				
13S	Deductions (Portfolio) (Other)																																									
13W	Reforestation expense deduction																																									
13W	Other deductions				(3)		(192)		(20)			(1)	(26)		(255)					(1)	(653)	X																				
16L	Foreign Taxes Paid																																									
16M	Foreign Taxes Accrued			(801)			(79)	(714)	(9)			(125)	(251)						(21)	(1,806)		X																				
18A	Tax-exempt interest income							(93)				(108)	(30)			(73)																										
18B	Other tax-exempt income							32	1							1																										
18C	Non-deductible expenses											866																														
18C	Cost Depletion	(3)			(7)	(1,193)	(141)	(12)	(4)			(113)	(19)		(84)	(143)			(10)	(538)		X																				
Total Income/(Loss)																						(34,150)	(37,028)	(51,863)	(644,063)																	
																						4150 10																				

Note: Amounts obtained from K-1s received directly by EKL (with the exception of GS Private Equity Partners, Westbridge Ventures, Natural Gas Partners IX, and TIFF Realty & Resources 2008 which were received from the client due to lack of confirmation request response from third party). See binder section 4150 15 for corresponding K-1s.

WORKPAPER WAS REVIEWED BY GREG BOOTH OF EKL'S TAX DEPARTMENT
Reviewed by R. Mueller - corrected Equitas Evergreen other deduction to Dm, STCL, LTCL, & ord loss