

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



# **Return of Private Foundation**

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

2009

OMB No 1545-0052

		nt of the Treasury evenue Service	Note.	The found	dation mav		as a Privat se a copy of this			rting requirements.	<b>ZUU9</b>
	_	ndar year 2009, or					009	and e		JAN 31, 2010	<u> </u>
G	Chec	k all that apply:		al return ended reti	urn	In	itial return of a fo	•	harity	Final return	1
	e the	I.		ND II	ACDI	OLITAL				A Employer identification	
Ut	nerw prin	rise, THE HEI						TON_	Room/suite	64-0601824  B Telephone number	
	r typ	e. 490 EII	BANKC	חדדע			,		110011100110	662-328-27	185
Se	e Spe	City or town	state, and 711	P code	<u> </u>			<del></del>		C If exemption application is p	
Ins	tructi	COLUMBI	JS,, M	s 3	9702					D 1. Foreign organizations	
H	Chec	k type of organizatio				xempt privat	e foundation			Foreign organizations me check here and attach co	
	_] s	ection 4947(a)(1) no					le private founda	ation		E If private foundation sta	
1 F	aır m	arket value of all ass	sets at end of	f year J	Account	ing method:	X Cash	Accr	ual	under section 507(b)(1)	)(A), check here
		Part II, col. (c), line	e 16)			ther (specify				F If the foundation is in a	60-month termination
	<u>-\$</u>				Part I, colu	ımn (d) mu:	st be on cash i	basis.)		under section 507(b)(1	(B), check here
P	art	(The total of amount necessarily equal the	s in columns (b e amounts in co	), (c), and ( olumn (a) )		(a) Re expens	venue and es per books	(b) Net in		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gift					100.			N/A	
<b>©</b>	2	Check X If the		required to at	tach Sch B						
2010	3	Interest on savings ar cash investments			•		25 454	2	- A - A		Cm1 mp1 (m) 4
	4	Dividends and inte Gross rents	rest from se	curities	٠		35,454.	3	<u>5,454.</u>		STATEMENT 1
20	l .	Net rental income or (	loce)	٠							
<u></u>	6	Net gain or (loss) from	· —	not on line	- 10	-1	86,761.				
₹ §	6	Gross sales price for		559,		<del></del>					
ED M/	7	Capital gain net incon							0.		
≝≝	8	Net short-term cap	oital gain								
SCANNED MAY Revenue	9	Income modification			:,						
3	10a	Gross sales less retur and allowances	ns.								
D	1	Less Cost of goods s	1 —		- ł	7					
	I .	Gross profit or (los	YAW 16	25	2010		1,665.		1,665.		CM3 MD34D37M O
	11 12	Total. Add lines 1	w t			-1	49,542.	3			STATEMENT 2
_	13	Compensation of office		trustees	ر آ ل		1,800.		0.		450.
	14	Other employee sa								-	130.
	15	Pension plans, em		-				-			
ses	16a	Legal fees									
pen	b	Accounting fees		STM	Т 3		2,500.		0.		0.
ă	) c	Other professional	fees	STM	Т 4		6,405.	_,	0.		5,500.
tive	17	Interest	• •	·			4.50			<del></del>	
stra	18	Taxes		STM	T 5.	<u> </u>	179.		0.		0.
Ë	19	Depreciation and d	iepietion	-							
Ą	20	Occupancy Travel, conference	c and meetin			<u> </u>					
ē	22	Printing and public	•	iya		٠.					
Operating and Administrative Expenses	23	Other expenses		STM	r 6	<del> </del>	359.		0.	-	0.
atir	24	Total operating an	d administra		_ •		3331				
ber		expenses. Add line				:	11,243.		0.		5,950.
0	25	Contributions, gifts	-		-		37,506.				37,506.
	26	Total expenses an		ents.							
	<u> </u>	Add lines 24 and 2					48,749.		0.		43,456.
	27	Subtract line 26 fro	om line 12:								
	1	Excess of revenue over				-19	98,291.		, , , ,		· · · · · · · · · · · · · · · · · · ·
		Net investment inc			D-)			3'	7,119.	37/3	
0025	<u> </u>	Adjusted net incom	ne (if negative,	enter -0-)						N/A	

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	52,377.	11,641.	11,641.
	3	Accounts receivable ►			
		Less; allowance for doubtful accounts			
	4	Pledges receivable ►		1	
		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	ļ		
		Less; allowance for doubtful accounts			·
şte	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		1,273.	1,273.
•		Investments - U.S. and state government obligations STMT 7	50,000.	0.	0.
	b	Investments - corporate stock STMT 8	654,923.	400,583.	538,906.
	C	Investments - corporate bonds STMT 9	169,676.	75,100.	<u>78,847.</u>
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			<u> </u>
	1	Investments - mortgage loans			
	13	Investments - other STMT 10	0.	240,088.	259,059.
	14	Land, buildings, and equipment: basis ► 4,933.		}	
		Less accumulated depreciation STMT 11 4,933.			·
	15	Other assets (describe ►)			<del> </del>
			006 056	F00 605	222 524
_		Total assets (to be completed by all filers)	926,976.	728,685.	889,726.
		Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20				
Lia	21	Mortgages and other notes payable  Other liabilities (describe			
	22	Other liabilities (describe )			
	22	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here			
	İ	and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted	926,976.	728,685.	
Fund Balances	25	Temporarily restricted	320,370.	720,003.	
Bali	26	Permanently restricted			
힏		Foundations that do not follow SFAS 117, check here			
Ŀ		and complete lines 27 through 31.			
ŏ	27	Capital stock, trust principal, or current funds			
šets		Paid-in or capital surplus, or land, bldg., and equipment fund			
Assets		Retained earnings, accumulated income, endowment, or other funds			
Net	1	Total net assets or fund balances	926,976.	728,685.	
_				,	
	31	Total liabilities and net assets/fund balances	_926,976.	728,685.	
		Analysis of Changes in Net Assets or Fund Ba			
LP	art	Analysis of Changes in Net Assets of Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	(mus	t agree with end-of-year figure reported on prior year's return)		11	926,976.
		amount from Part I, line 27a	• •	2	-198,291.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	728,685.
5	Decre	eases not included in line 2 (itemize)		5	0.
<u>6</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	728,685.

64-0601824

Page 2

Form **990-PF** (2009)

Part IV Capital Gains	and Losses for Tax off in	ivestillen	i ilicome					
(a) List and desc 2-story brick wa	ribe the kınd(s) of property sold (e.g arehouse; or common stock, 200 shs	., real estate, s. MLC Co.)		P - Pur D - Dor	cquired chase lation	(c) Date ac (mo., day	quired , yr.)	(d) Date sold (mo., day, yr.)
1a WELLS FARGO AD	VISORS/WACHOVIA					VARIO	US	02/02/09
b CHARLES SCHWAB						03/16		12/01/09
С								
d								
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gair (e) plus (i	or (loss f) minus (	
a 447,290.			661,81	5.				-214,525.
b 112,135.			84,37	1.				27,764.
c								
d							<del></del>	
<u>e</u>								
Complete only for assets showing	ng gain in column (h) and owned by t	the foundation	on 12/31/69			Gains (Col.		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			(k), but not Losses (fr	om col. (	h)) 
a				-				-214,525.
b								<u>27,764</u> .
_c								
d								
<u>e</u>		<u>.                                    </u>	<del></del>					
2 Capital gain net income or (net ca	$ \begin{cases}     \text{If gain, also enter} \\     \text{If (loss), enter -0-} \end{cases} $	in Part I, line in Part I, line	7 7	} 2				-186,761.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) an	id (6):						
If gain, also enter in Part I, line 8,	column (c).							
If (loss), enter -0- in Part I, line 8	Inder Section 4940(e) for	D	<del>-</del> -	<u> </u>		_	<u> N/A</u>	<del></del>
If "Yes," the foundation does not qual	tion 4942 tax on the distributable am lify under section 4940(e). Do not co	mplete this pa	rt					Yes X No
	each column for each year; see instri	uctions before	making any entries	S				2.0
(a) Base period years Calendar year (or tax year beginnii	ng in) Adjusted qualifying dist	tributions	Net value of non	(c) icharitable	-use assets	(cc	Distrib ol. (b) div	(d) ution ratio ided by col. (c))
2008	5	4,884.		87	9,243	•		.062422
2007		9,745.			5,142			.045012
2006		6,417.	<del></del>		6,293			<u>.04879</u> 1
2005		0,776.			7,073			.043507
2004		<u>5,642.</u>		1,12	2,657	•		.049563
2 Total of line 1, column (d)	-					2		.249295
3 Average distribution ratio for the ! the foundation has been in exister	5-year base period - divide the total o nce if less than 5 years	on line 2 by 5,	or by the number o	of years	_	3		.049859
4 Foter the net value of nonchardah	ele-use assets for 2009 from Part X, I	ine 5				4		804,619.
					••		-	_
5 Multiply line 4 by line 3			•			5		40,117.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		371.
7 Add lines 5 and 6			•			7		40,488.
8 Enter qualifying distributions from				•		8	<del>.</del>	43,456.
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, line	1b, and comp	lete that part using	a 1% tax	rate.			

Page 3

_	1990-PF (2009) THE HERMAN AND HAZEL OWEN FOUNDATION 64-060			Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uctio	ns)
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 here X and enter 1%		3	71.
	of Part I, line 27b			
C	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-)			_0.
3	Add lines 1 and 2		3	71.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		3	71.
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1, 273.			
	Exempt foreign organizations - tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		1,2	73.
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			
10			9	02.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax			0.
	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 participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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.			
c	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ļ :	
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.	1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1	ļ	
	managers. ▶ \$ 0.	ŀ	Ì	
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		i	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u>x</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	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:		l	
	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	İ		
	remain in the governing instrument?	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	1		
	MS			
ь	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	86	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	1	_ <del></del>	
-	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? 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

Form 990-PF (2009) THE' HERMAN' AND HAZEL OWE Part VII-B   Statements Regarding Activities for Which		Required (contin	64-06018 nued)	324 Page 6
<ul> <li>5a During the year did the foundation pay or incur any amount to: <ol> <li>Carry on propaganda, or otherwise attempt to influence legislation (section)</li> <li>Influence the outcome of any specific public election (see section 4955); of any voter registration drive?</li> <li>Provide a grant to an individual for travel, study, or other similar purposes</li> <li>Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?</li> <li>Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals?</li> <li>If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance (see instruorganizations relying on a current notice regarding disaster assistance check in the answer is "Yes" to question 5a(4), does the foundation claim exemption feexpenditure responsibility for the grant?</li> <li>If "Yes," attach the statement required by Regulations section 53.494</li> <li>Did the foundation, during the year, receive any funds, directly or indirectly, to</li> </ol> </li> </ul>	or to carry on, directly or indirectly or educational purposes, or der the exceptions described actions)?  There for the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in the tax because it maintable in tax because it maintable in tax because it maintable	ectly,	N/A ► No	5b
<ul> <li>a personal benefit contract?</li> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a part of the form 8870.</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax of the foundation receive any proceeds or have any net income attribute.</li> </ul>	∟ lve	s X No	6b X	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	·	nagers, Highly	/	
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 12		0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded 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) THE HERMAN AND HAZEL OWEN FOUNDATION		01824	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Main Paid Employees, and Contractors (continued)	nagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE			
		<u> </u>	
Total number of others receiving over \$50,000 for professional services		<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities	<del></del>		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informa	tion such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	don such as the	Expenses	3
1 PROVIDED MEDICAL AND MISC. ASSISTANCE FOR APPROXI	MATELY 125		
INDIVIDUAL INDIGENTS.			
			0.
2 ALL OTHER DISTRIBUTIONS ARE MADE THROUGH OTHER QUA	ALIFIED	<u> </u>	
EXEMPT ORGANIZATIONS.			
			0.
3			
4			
Part IX-B   Summary of Program-Related Investments		****	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	. 1	Amount	
1 NONE			
			0.
2			
			<del></del>
All other program-related investments. See instructions.			
3 NONE			
			^
Table Additions 1 through 2	•		0.
Total. Add lines 1 through 3			<u> </u>

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	784,863.
Ь		1b	32,009.
C		1c	
d	Total (add lines 1a, b, and c)	1d	816,872.
е	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	816,872.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	12,253.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	804,619.
6	Minimum investment return. Enter 5% of line 5	6	40,231.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	40,231.
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.)		
C	Add lines 2a and 2b	2c	371.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	39,860.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	39,860.
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	39,860.
P	art 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	43,456.
þ	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:	ĺ	
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	43,456.
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	371.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	43,085.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies for	the section

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				39,860.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			42,591.	
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.	<del>-</del>		
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 43,456.	Ì			
a Applied to 2008, but not more than line 2a			42,591.	
<b>b</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				<u>865.</u>
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:				
& 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				<u>38,995.</u>
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.			1	
Subtract lines 7 and 8 from line 6a	0.		<del></del>	
O Analysis of line 9:				
a Excess from 2005			j	
b Excess from 2006			1	
c Excess from 2007			1	
d Excess from 2008				
e Excess from 2009		L	<del></del>	Farr 000 DE (0000)

Part XIV Private Operating F	CMAN AND HAZ			N/A	01824 Page 1
1 a If the foundation has received a ruling of	<del></del>			N/A	
foundation, and the ruling is effective fo			' <u> </u>		
b Check box to indicate whether the foun	·	•	t in section	4942(j)(3) or 49	142(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	Touristion describes	Prior 3 years	1 10 12())(0) 01 11 13	7-2()/(3)
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	(4)	(5)	(0) 200	(4) 2000	(0) 10(4)
			į		
each year listed b 85% of line 2a		<u> </u>		<del>                                     </del>	
c Qualifying distributions from Part XII,		<del></del>		<del>                                     </del>	
line 4 for each year listed					
d Amounts included in line 2c not			<del> </del>	<del> </del>	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	İ				
3 Complete 3a, b, or c for the			<del></del>		
alternative test relied upon:  a "Assets" alternative test - enter:		ĺ		1	
(1) Value of all assets					
(2) Value of assets qualifying					-
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on	į				
securities loans (section	1				
512(a)(5)), or royalties)					
(2) Support from general public					-
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	1	A - Al-1 A - I		1 125 222	<del></del>
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	re in assets
	<del></del>	iistructions.)			
1 Information Regarding Foundation	•		A. A. A		
a List any managers of the foundation wh year (but only if they have contributed in			tributions received by the	toundation before the clos	e of any tax
NONE					
b List any managers of the foundation wh other entity) of which the foundation ha	o own 10% or more of th s a 10% or greater interes	e stock of a corporation st.	(or an equally large porte	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift. Loan.	Scholarship, etc., F	rograms		
Check here ▶ ☐ If the foundation o				ot accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations	under other conditions, co	implete items 2a, b, c, and	d.
a The name, address, and telephone num	ber of the person to whon	n applications should be	addressed:		
MRS. MARJORIE ROBERT	SON, 662-32	8-2785			
490 EUBANKS DRIVE, C	<u>OLUMBUS, MS</u>	39702		- <del></del>	
<b>b</b> The form in which applications should b		-			
LETTER WITH BIOGRAPH	ICAL AND FI	NANCIAL IN	FORMATION		
c Any submission deadlines:					
NONE		<del> </del>			
d Any restrictions or limitations on awards					
RESIDENTS OF LOWNDES	COUNTY MIS	SISSIPPI AI	WITHIN 50	MILES OF CO	LUMBUS,

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION					
a Paid during the year	or śubstantial contrîbútor	recipient						
SEE STATEMENT 13			<b>&gt;</b> 20	27 506				
Total b Approved for future payment			. ▶ 3a	37,506.				
NONE								
Total			► 3b	0.				

#### Form 990-PF (2009) Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)		
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue:	COUE	<del> </del>					
a			<del> </del>				
b	<u> </u>		<del> </del>	<u> </u>			
c							
d			├				
e			<del> </del>				
g Fees and contracts from government agencies	ļ		-		<del></del>		
2 Membership dues and assessments	<u> </u>						
3 Interest on savings and temporary cash			}				
investments				25 454			
4 Dividends and interest from securities			14	35,454.			
5 Net rental income or (loss) from real estate:	ļ		ļ				
a Debt-financed property .			ļ		<del>-</del>		
b Not debt-financed property			ļ		<del></del>		
6 Net rental income or (loss) from personal							
property							
7 Other investment income					1,665.		
8 Gain or (loss) from sales of assets other		}					
than inventory			18	-186,761.			
9 Net income or (loss) from special events			<u> </u>				
10 Gross profit or (loss) from sales of inventory			<u> </u>				
1 Other revenue:							
a	-		ļ				
b			L				
C	ļ						
d							
e					<del></del>		
2 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	-151,307.	<u> 1,665.</u>		
3 Total. Add line 12, columns (b), (d), and (e)				13	-149,642.		
See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incon	ne is reported	ın column (e) of Part XVI-A	contrit	outed importantly to the accom	plishment of		
▼ the foundation's exempt purposes (other than b			_		•		
					<del> </del>		
			_		<u></u>		
					<del></del>		
		· · · · · · · · · · · · · · · · · · ·					

1	Did the organization directly or indirectly engage in any of the following	ng with any other organiza	ition described in s	ection 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 52	27, relating to political org	anizations?				
a	Transfers from the reporting foundation to a noncharitable exempt or	ganization of:					
	(1) Cash .				1a(1)		X
	(2) Other assets				1a(2)		X
b	Other transactions:						
	(1) Sales of assets to a noncharitable exempt organization				1b(1)	L	X
	(2) Purchases of assets from a noncharitable exempt organization				1b(2)		X
	(3) Rental of facilities, equipment, or other assets	•			1b(3)		X
	(4) Reimbursement arrangements				1b(4)		X
	(5) Loans or loan guarantees	•			1b(5)		X
	(6) Performance of services or membership or fundraising solicitation	ons			1b(6)		X
	; Sharing of facilities, equipment, mailing lists, other assets, or paid em				1c		X
d	If the answer to any of the above is "Yes," complete the following sche					ets,	
	or services given by the reporting foundation. If the foundation receiv		alue in any transact	ion or sharing arra	ingement, show in		
	column (d) the value of the goods, other assets, or services received.				· ·		
a)	Line no (b) Amount involved (c) Name of noncharitable	e exempt organization	(d) Descrip	tion of transfers, transa	actions, and sharing arr	angeme	nts
	N/A		_				
					<del></del>		
_							
_							
_				<del></del>			
_							
_							
			<del></del>	<del></del>			
					<del></del> -		
_		<del></del>					
2a	Is the foundation directly or indirectly affiliated with, or related to, one		nizations described	i			7
	in section 501(c) of the Code (other than section 501(c)(3)) or in sect	tion 527? <sub>.</sub>	-		Yes	LX_	No
b	If "Yes," complete the following schedule.	(h) Tuna of accompanies		(c) Description o	of relationship		
	(a) Name of organization	(b) Type of organization	<del>'- </del>	(c) Description o	or relationship		
	N/A						
_							
			<del></del>		<del> </del>		
_			-				
Т	Under penalties of pergry, I declare that I have examined this return, including acco	L	ements, and to the bes	at of my knowledge and	d belief, it is true, correc		
1	and complete Declaration of preparer (other than taxpayer or fiduciary) is based on				•		
1	marine Relation	5-19-20,	10 Lee	s of a			
2	Signature of Officer or trustee	Date	Title	- mary			
<u>:</u>	Prenarer's \	Duto	Date	Check if	Preparer's identify	ing numi	ber
5	signature signature			self- employed ▶ □	أ ا	-	
1	Par Companies T. E. LOTT & COMPAN		<u> </u>	EIN >	<del></del>		
ŀ	Signature  Signature  Firm's name (or yours T. E. LOTT & COMPAN of self-employed).  PO BOX 471	I, CIA D		CIN P			
	address, and ZIP code COLUMBUS, MS 39703-	0471		Phone no.	662-328-	5381	7
_	COLOMBON, ED 37703	<u> </u>		[ i none no.		750	

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

Particle Cabineting   Description   Acquired   New Coast Organs   Biss.   Reference   Description		•				 					 		
Pescripton   Acquired   Method   Life   No.   Cost Of Besis   Excl.   Reduction in   Deprecation	Current Year Deduction		0	0.									
Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   Public   P	Current Sec 179				0.	-			<del>-</del> "	-			
Pescripton   Pare   Method   Life   No.   Cast Of Bass   Per   Pescripton   Descripton   Descr	Accumulated Depreciation		34	,836	4,933.						•		
Pescrotion   Acquired   Method   Life   No.   Cost of Bass   Pach	Basis For Depreciation		4	,836	, 933								
Page   Description   Acquired   Method   Life   No.   Cost Of Basis     IFILE CABINET   04 17 97\$SL   7.00   17   963.   2FILE CABINET DOORS   082297\$SL   7.00   17   134.   3.836.   3.836.   3.836.   4.933.   PEPR   PG	Reduction In Basis				0							-	
Pescripton   Pagured   Method   Life   Life   Cost Of Basis	Bus % Excl					-							
TFILE CABINET 041797SL 7.00 1  FILE CABINET DOORS 082297SL 7.00 1  SOFFICE EQUIPMENT 00000SL 7.00 1  * TOTAL 990-PF PG 1  DEPR	Unadjusted Cost Or Basis		34	,836	,933								
Date   Method   Life	S O	1.7		97	- · · ·	,=						 •	
Date Method  1FILE CABINET  2FILE CABINET DOORS  3OFFICE EQUIPMENT  * TOTAL 990-PF PG 1  DEPR  DEPR	Life	ٔ ا	0									•	
Description  Trile Cabiner  Prile Cabiner  * Total 990-PF PG 1 DEPR	Method								·				
Description  Trile Cabiner  Soffice Equipment  * Total 990-PF PG DEPR	Date Acquired	041797	082297	000000								 	
	Description												
	Asset No	<b>~</b> 1	.,,	,			 	·-		· <del></del>			

(D) - Asset disposed

928102 08-24-09

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 990-PF DIVIDEND	S AND	INTER	EST FROI	4 SEC	URITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	)
CHARLES SCHWAB	_		33,250		0.	33,2	
UBS WELLS FARGO/WACHOVIA			1,634 570		0. 0.	1,6 5	34. 70.
TOTAL TO FM 990-PF, PART I, L	N 4 =		35,454		0.	35,4	54.
FORM 990-PF	OT	HER I	NCOME			STATEMENT	2
DESCRIPTION		:	(A) REVENUI PER BOOI		(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
CHARLES SCHWAB PARTNERSHIPS			1	665.	1,665.		_
TOTAL TO FORM 990-PF, PART I,	LINE	11	1	665.	1,665.		
FORM 990-PF	ACC	OUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A EXPEN PER B	SES	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
TAX RETURN & CONSULTATION	2	,500.		0	•		0.
TO FORM 990-PF, PG 1, LN 16B	2	,500.		0	•		0.
FORM 990-PF O	THER P	ROFES	SIONAL E	TEES		STATEMENT	4
FORM 990-PF O	THER P (A EXPEN PER B	.) SES	SIONAL E (B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOME	(D) CHARITA	BLE
	(A EXPEN PER B	.) SES	(B)	EST-	ADJUSTED NET INCOME	(D) CHARITA	BLE ES

FORM 990-PF	TAX	STATEMENT			5		
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-			(D) CHARITA PURPOS	
EXCISE TAX ON INVESTMENTS FOREIGN TAX WITHHELD	167. 12.		0.				0.
TO FORM 990-PF, PG 1, LN 18	179.		0.				0.
FORM 990-PF	OTHER E	XPENSES			STA	TEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVE		ADJUSTEI	)	(D) CHARITA PURPOS	
DUES & SUBSCRIPTIONS OFFICE SUPPLIES BANK CHARGE	305. 44. 10.		0. 0. 0.				0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	359.		0.				0.
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBL	IGATIONS	STA	TEMENT	7
DESCRIPTION	U.S GOV'		вос	OK VALUE		R MARKE VALUE	T
<del></del>	X			0.			0.
TOTAL U.S. GOVERNMENT OBLIGATION	TIONS						
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS		<del></del>			
TOTAL TO FORM 990-PF, PART I	I, LINE 10A			0.			0.

	2002382 08000	<del></del>	
FORM 990-PF COR	RPORATE STOCK		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
		400,583.	538,906
TOTAL TO FORM 990-PF, PART II, LINE	E 10B	400,583.	538,906
FORM 990-PF COR	RPORATE BONDS		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
		75,100.	78,847
TOTAL TO FORM 990-PF, PART II, LINE	E 10C	75,100.	78,847
FORM 990-PF OTHE	ER INVESTMENTS		STATEMENT 1
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
<del></del>	COST	240,088.	259,059
MOMAL MO BODW 000 DE DARM II IINE		240,088.	250 050
TOTAL TO FORM 990-PF, PART 11, LINE	E 13	=======================================	259,059
	:		STATEMENT 1:
FORM 990-PF DEPRECIATION OF ASSET	:		
	S NOT HELD FOR	INVESTMENT	STATEMENT 1

	- LIST OF OFFICERS, D	STAT	EMENT 12	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
W. J. THREADGILL P. O. BOX 1366 COLUMBUS, MS 39703	CHAIRMAN AND P	RESIDENT 0.	0.	0.
B. THREADGILL P. O. BOX 1366 COLUMBUS, MS 39703	VICE-PRESIDENT 0.00	(FIN.) 0.	0.	0.
M. ROBERTSON 490 EUBANKS DRIVE COLUMBUS, MS 39702	SECRETARY AND 5.00	TREASURER 0.	0.	0.
S.A. BRAY P. O. BOX 471 COLUMBUS, MS 39703	VICE-PRESIDENT 1.00	(GOV'T AFF)	0.	0.
R. ROBERTS P. O. BOX 1366 COLUMBUS, MS 39703	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.

+ -	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 13
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
4-COUNTY ELECTRIC POWER 5265 S FRONTAGE RD COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	1,653.
ALABAMA POWER 1534 N TEMPLE AVE FAYETT, AL 35555	NONE INDIGENT CARE	NONE	375.
ATMOS ENERGY MAIN ST COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	427.
BAPTIST INTERNAL MEDICINE 515 WILLOWBROOK ROAD COLUMBUS, MS 39705	NONE INDIGENT CARE	NONE	87.
BETTY ARMISTED FAMILY FUNERAL 10933 NASHVILLE FERRY RD COLUMBUS, MS 39702	NONE INDIGENT CARE	NONE	250.
BRODY'S GASOLINE 4136 HWY 50 E COLUMBUS, MS 39766	NONE INDIGENT CARE	NONE	100.
CADENCE BANK 803 MAIN STREET COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	326.
CITY OF WEST POINT WATER & LIGHT 300 E BROAD WEST POINT, MS 39773	NONE INDIGENT CARE	NONE	2,384.

THE HERMAN AND HAZEL OWEN FOUND	DATION		64-0601824
CLARENCE TRIMBLE, LANDLORD 538 STINSON CREED ROAD COLUMBUS, MS 39702	NONE INDIGENT CARE	NONE	100.
COLUMBUS DENTAL CLINIC 2001 OLD ABERDEEN RD COLUMBUS, MS 39701		NONE	3,550.
COLUMBUS HOUSING AUTHORITY 1515 4TH STREET S COLUMBUS, MS 39701		NONE	118.
COLUMBUS LIGHT & WATER DEPT. 420 4TH AVE S COLUMBUS, MS 39701		NONE	947.
COLUMBUS-LOWNDES FREE MEDICAL CLINIC 520 COLLEGE STREET COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	1,500.
COMMUNITY COUNSELING SERVICE 1001 MAIN ST COLUMBUS, MS 39701		NONE	450.
DANNY HUNT 16 RUBY LAND COLUMBUS, MS 39702	NONE INDIGENT CARE	NONE	200.
DOW PHILLIPS, LANDLORD 320 PHILLIPS HILL ROAD COLUMBUS, MS 39702	NONE INDIGENT CARE	NONE	200.
DOWDLE GAS 2493 HIGHWAY 45 N COLUMBUS, MS 39705	NONE INDIGENT CARE	NONE	249.
DR ADAM B SMITH 2321 5TH STREET NORTH COLUMBUS, MS 39705	NONE INDIGENT CARE	NONE	100.

THE HERMAN AND HAZEL OWEN FOUNT	DATION		64-0601824
DR DON UPTON 110A ALABAMA STREET COLUMBUS, MS 39702	NONE INDIGENT CARE	NONE	72.
DR JAMES A JONES 837 GLOUSTER ST TUPELO, MS 38801	NONE INDIGENT CARE	NONE	200.
DR JAMES HOLZHAUER 505 WILLOWBROOK ROAD COLUMBUS, MS 39705	NONE INDIGENT CARE	NONE	200.
DR RICHARDS, DDS 2401 5TH STREET N COLUMBUS, MS 39705	NONE INDIGENT CARE	NONE	96.
EAST COLUMBUS FAMILY PRACTICE 100B ALABAMA STREET COLUMBUS, MS 39702		NONE	50.
FAMILY PHARMACY, 1245 N LEHMBERG RD COLUMBUS, MS 39702	NONE INDIGENT CARE	NONE	637.
GREATER COLUMBUS LEARNING CENTER 612 MILITARY ROAD COLUMBUS, MS 39701		NONE	1,000.
GREG ANDREWS, TAX ASSESSOR/COLLECTOR 505 2ND AVENUE COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	300.
HELPING HANDS, INC. 215 4TH ST N COLUMBUS, MS 39701	NONE GENERAL FUND	NONE	3,500.
HOME MEDICAL EQUIPMENT 2022 HIGHWAY 45 NORTH COLUMBUS, MS 39705	NONE INDIGENT CARE	NONE	500.

THE HERMAN AND HAZEL OWEN FOUND	DATION	٠.	64-0601824
IMAGING CENTER 2526 5TH STREET N COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	400.
INTERNAL MEDICINE FAMILY PRACTICE 362 PARK CREEKDR COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	395.
JONES READ ESTATE 715 11TH STREET N COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	200.
JUNIOR AUXILIARY MAIN ST COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	500.
LOWE' HOME IMPROVEMENT 2301 WOODMONT DRIVE COLUMBUS, MS 39705		NONE	100.
MIKE SMITH, LANDLORD 140 CO-OP ROAD COLUMBUS, MS 39705		NONE	315.
NATIONAL FIRE SAFETY COUNCIL 205 7TH ST S COLUMBUS, MS 39701		NONE	100.
NEVA LAND, LANDLORD 1209 MAPLE VIEW DRIVE WEST POINT, MS 39773	NONE INDIGENT CARE	NONE	200.
R D FIELDS, DDS 848 S. MADISON TUPELO, MS 38801	NONE INDIGENT CARE	NONE	300.
RE-DIRECT MINISTRIES 803 HWY 45 N. COLUMBUS, MS 39701	NONE GENERAL FUND	NONE	400.

THE HERMAN AND HAZEL OWEN FOUND	ATION		64-0601824
ROBINSON REAL ESTATE 294 CHUBBY DR COLUMBUS, MS 39705	NONE INDIGENT CARE	NONE	300.
ROGER PRICE, LANDLORD 1110 S. ESHMAN AVE WEST POINT, MS 39773	NONE INDIGENT CARE	NONE	150.
S D LEE MIDDLE SCHOOL READING PROGRAM 1815 MILITARY RD COLUMBUS, MS 39701	NONE GENERAL FUND	NONE	400.
SHELIA LONG (FAMILY PHARMACY) 1245 LEHMBERG RD COLUMBUS, MS 39702		NONE	10.
STATE FARM FIRE & CASUALTY CO 1809 7TH AVE N COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	290.
SUNFLOWER LANDING REHAB 2900 HIGHWAY 49 SOUTH DUBLIN, MS 38739	NONE INDIGENT CARE	NONE	209.
THE SALVATION ARMY, 2219 MAIN ST COLUMBUS, MS 39701		NONE	2,000.
TOMMY FRAZIER, LANDLORD 2623 6TH AVE N COLUMBUS, MS 39701	NONE INDIGENT CARE	NONE	300.
UNITED WAY 501 7TH ST N COLUMBUS, MS 39701	NONE GENERAL FUND	NONE	7,500.
VERNON DENTAL CLINIC 121 10TH ST NW VERNON, AL 35592	NONE INDIGENT CARE	NONE	472.

THE HERMAN AND HAZEL OWEN FOUND	ATION		, 4 .	64-0601824
VICTORY CHRISTIAN ACADEMY 100 VICTORY LOOP COLUMBUS, MS 39702	NONE INDIGENT	CARE	NONE	1,750.
WACHOVIA DEALER SERVICES 6000 FREEDON SQUARE DR INDEPENDENCE, OH 44131	NONE INDIGENT	CARE	NONE	210.
WAL-MART HWY 45 N COLUMBUS, MS 39701	NONE INDIGENT	CARE	NONE	984.
WIYGUL DENTAL CLINIC 152 S,MCRARY ROAD COLUMBUS, MS 39702	NONE INDIGENT	CARE	NONE	450.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A			37,506.

# THE HERMAN AND HAZEL OWEN FOUNDATION FINANCIAL STATEMENTS

AND

ACCOUNTANTS' COMPILATION REPORT

JANUARY 31, 2010 AND 2009



QUALITY · INTEGRITY SERVICE · PROFESSIONALISM · SINCE 1926

Alabama Society of Certified Public

Mississippi Society of Certified Public

Registered with Public Company Accounting Oversight Board

American Institute of Certified Public

Member of Center for Public Company Audit Firms

Member of Employee Benefit Plan Audit Quality Center

Member of Governmental Audit Quality Center

Private Companies Practice Section

-

T E LOTE, CPA (1926-1971) TE LOLL IT CPA Charles M Hawkins CPA, CBA John F Prince CPA Nellah F Taylor CPA Jeffry H Read CPA Thomas J Buckley CPA Vivian L Yeatman CPA Bobby G Shaw CPA, CBA Debby H Gray CPA, CPC Clayton H Richardson III CPA CVA 1 Michael Prince CPA Mark A Vickers CPA, CVA Stewart R Greene CPA J H Kennedy Jr CPA Samuel A. Bray CPA Frank F Gray CPA Leslie W Wood CPA Lawrence E Wilson CPA Kristy A Tunnell CPA CITP Louis's L Russell CPA Cheryl G Nelson CPA Julie M Melvin CPA Matthew S Sasser CPA I Mark Ward CPA Jill M Bergin, CPA W Matthew Turner CPA Joshua B Shaw CPA Katherine R Wright, CPA

:

221 North Seventh St PO Box 471 Columbus, MS 39703-0471 - 662 328 5387 - 662 329 4993

106 B South Washington St PO Box 80282 Starkville, MS 39759-0282 5662 323 1234 662 323 1284

6834 Hwy 69 South Tuscaloosa AL 35405 - 205 759 4195 - 205 759 1018

info@telott.com

#### ACCOUNTANTS' COMPILATION REPORT

Board of Directors
The Herman and Hazel Owen Foundation
Columbus, Mississippi

We have compiled the accompanying statements of assets and fund balance arising from cash transactions of The Herman and Hazel Owen Foundation as of January 31, 2010 and 2009, and the related statements of cash receipts and disbursements arising from cash transactions for the years then ended in accordance with *Statements on Standards for Accounting and Review Services* issued by the American Institute of Certified Public Accountants

A compilation is limited to presenting in the form of financial statements information that is the representation of management. We have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or any other form of assurance on them

We are not independent with respect to The Herman and Hazel Owen Foundation

Columbus, Mississippi

of C. Lott + Conspany

April 27, 2010

# STATEMENTS OF ASSETS AND FUND BALANCE ARISING FROM CASH TRANSACTIONS

# **JANUARY 31, 2010 AND 2009**

# See Accountants' Compilation Report

	2010	2009
ASSETS Investments (Note B) - market value approximately \$889,726 and \$679,999 at January 31, 2010		
and 2009, respectively  Office equipment	\$ 728,685 4,933	\$ 926,976 4,933
	<u>\$ 733,618</u>	\$ 931,909
FUND BALANCE	\$ 733,618	\$ 931.909

# STATEMENTS OF CASH RECEIPTS AND DISBURSEMENTS ARISING FROM CASH TRANSACTIONS

# FOR THE YEARS ENDED JANUARY 31, 2010 AND 2009

# See Accountants' Compilation Report

	2010	2009
CASH RECEIPTS	<del></del>	
Contributions	\$ 100	\$ 400
Interest and dividends from investments	35,454	27,491
Return of principal and sale of investments	561,090	509,983
Total cash receipts	596,644	537,874
CASH DISBURSEMENTS		
Assistance to indigents	18,071	34,650
Contributions to qualified charitable organizations	19,435	13,000
Expenses		
Accounting and tax service	2,500	1,893
Directors' fees	1,800	1,200
Investment fees	905	6,649
Office supplies and expenses	5,554	7,346
Dues and subscriptions	305	208
Taxes - estimated excise taxes	167	804
Taxes - foreign income tax on dividends	12	861
Reinvestments and cost of investments sold	<u>746,186</u>	625,805
Total cash disbursements	794,935	692,416
Cash receipts short of cash disbursements	(198,291)	(154,542)
Fund balance, beginning of year	931,909	1.086,451
Fund balance, end of year	<u>\$ 733.618</u>	\$ 931,909

The accompanying notes are an integral part of these statements.

#### NOTES TO FINANCIAL STATEMENTS

#### **JANUARY 31, 2010 AND 2009**

# See Accountants' Compilation Report

#### NATURE OF OPERATIONS

The Herman and Hazel Owen Foundation (Foundation) has been established to provide financial assistance to indigents and other exempt organizations.

# NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The Foundation's policy is to have its financial statements prepared on the basis of cash receipts and disbursements, consequently, certain revenues and the related assets are recognized when received rather than when earned, and certain expenses are recognized when paid rather than when the related obligations are incurred. The Foundation does capitalize the cost of office equipment. Accordingly, the accompanying financial statements are not intended to present financial position and results of operations in conformity with generally accepted accounting principles

### NOTE B - SCHEDULE OF INVESTMENTS, at cost

			2009
Common stocks	\$ 400,583	3 \$	654,923
Corporate bonds	75,100	)	169,676
Miscellaneous cash equivalent funds	222,960	)	52 377
U. S Treasury securities	-		50,000
Publicly-traded partnerships	30,042	<u>:</u>	
Total investments	<u>\$ 728,685</u>	<u>s</u>	<u>926,976</u>

## NOTE C - INCOME TAXES

The Foundation is exempt from federal and state income taxes under Section 501(c)(3) of the Internal Revenue Code

### **NOTE D - SUBSEQUENT EVENTS**

Management has evaluated the effect of subsequent events on these financial statements through April 27, 2010, the date the financial statements were available to be issued