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Form **990-PF**

**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 **07/01/09**, and ending **06/30/10**

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 Clifford Foundation, Inc.		A Employer identification number 75-2506394
	Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see page 10 of the instructions) 903-874-4725
	City or town, state, and ZIP code Corsicana TX 75151		C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1 Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 2,846,306	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

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) (see page 11 of the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income <i>N/A</i>	(d) Disbursements for charitable purposes (cash basis only)
Revenue				
1 Contributions, gifts, grants, etc., received (attach schedule)	275,808			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	146,357	146,357		
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	7,332			
b Gross sales price for all assets on line 6a 388,490				
7 Capital gain net income (from Part IV, line 2)		7,332		
8 Net short-term capital gain				
9 Income from annuities				
10a Gross sales less returns & allowances				
b Less: Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total (Add lines 1 through 11)	429,497	153,689		
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc.				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) Stmt 1	1,035	518		517
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions)				
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (att. sch) Stmt 2	1,016	383		633
24 Total operating and administrative expenses. Add lines 13 through 23	2,051	901		1,150
25 Contributions, gifts, grants paid	170,735			170,735
26 Total expenses and disbursements. Add lines 24 and 25	172,786	901		171,885
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	256,711			
b Net investment income (if negative, enter -0-)		152,788		
c Adjusted net income (if negative, enter -0-)				

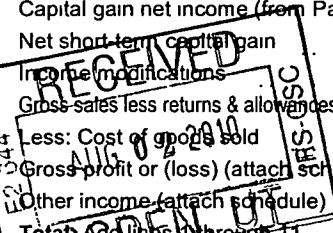
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Form 990-PF (2009)

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Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	300,128	359,483	359,483
	3	Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (att schedule) ▶ Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) See Stmt 3	467,694	457,992	448,422
	c	Investments—corporate bonds (attach schedule) See Stmt 4	348,293	461,534	444,662
	11	Investments—land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch) ▶			
	12	Investments—mortgage loans	1,496,579	1,593,739	1,593,739
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch) ▶			
15	Other assets (describe ▶)				
16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	2,612,694	2,872,748	2,846,306	
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 (attach schedule)			
	22	Other liabilities (describe ▶ See Statement 5)	39,541	42,884	
	23	Total liabilities (add lines 17 through 22)	39,541	42,884	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	2,573,153	2,829,864	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see page 17 of the instructions)	2,573,153	2,829,864		
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	2,612,694	2,872,748		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,573,153
2	Enter amount from Part I, line 27a	2	256,711
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	2,829,864
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	2,829,864

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 See Worksheet				
b				
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				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	7,332
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) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8			3	2,085

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 page 18 of the 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	163,424	2,296,648	0.071158
2007	138,285	2,337,387	0.059162
2006	116,218	2,283,299	0.050899
2005	122,151	1,930,776	0.063265
2004	105,523	1,866,259	0.056543
2 Total of line 1, column (d)			2 0.301027
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 0.060205
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5			4 2,650,995
5 Multiply line 4 by line 3			5 159,603
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,528
7 Add lines 5 and 6			7 161,131
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 on page 18.			8 171,885

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the 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)		
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	1	1,528
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-)	2	0
3	Add lines 1 and 2	3	1,528
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	1,528
6	Credits/Payments:		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	2,105
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	2,105
8	Enter any penalty for underpayment of estimated tax Check here <input 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	577
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 577 Refunded	11	

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
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? 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. \$ _____ (2) On foundation managers. \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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?		N/A
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 page 19 of the instructions) TX		
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 on page 27)? 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 page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	X	
14	The books are in care of ▶ C. L. Brown III 319 West 7th Ave Located at ▶ Corsicana, TX	Telephone no. ▶ 903-874-4725 ZIP+4 ▶ 75110		
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 ▶ <input type="checkbox"/>		

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?	N/A	1c
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20 , 20 , 20 , 20		
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 page 20 of the 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. ▶ 20 , 20 , 20 , 20		
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 X
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 X

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."

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

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

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1 Thirteen scholarships were paid on behalf of individuals during the year.	170,735
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
3 All other program-related investments. See page 24 of the instructions.	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	822,363
b	Average of monthly cash balances	1b	219,645
c	Fair market value of all other assets (see page 24 of the instructions)	1c	1,649,357
d	Total (add lines 1a, b, and c)	1d	2,691,365
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,691,365
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see page 25 of the instructions)	4	40,370
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,650,995
6	Minimum investment return. Enter 5% of line 5	6	132,550

Part XI Distributable Amount (see page 25 of the 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	132,550
2a	Tax on investment income for 2009 from Part VI, line 5	2a	1,528
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1,528
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	131,022
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	131,022
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	131,022

Part XII Qualifying Distributions (see page 25 of the 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	171,885
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	171,885
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	1,528
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	170,357

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 page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				131,022
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004	14,267			
b From 2005	27,818			
c From 2006	4,477			
d From 2007	24,875			
e From 2008	51,342			
f Total of lines 3a through e	122,779			
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 171,885				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
d Applied to 2009 distributable amount				131,022
e Remaining amount distributed out of corpus	40,863			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:	163,642			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b. Taxable amount—see page 27 of the instructions				
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount—see page 27 of the instructions				
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	14,267			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	149,375			
10 Analysis of line 9:				
a Excess from 2005	27,818			
b Excess from 2006	4,477			
c Excess from 2007	24,875			
d Excess from 2008	51,342			
e Excess from 2009	40,863			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test—enter 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 securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2))
See Statement 7

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

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**
Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:
**C. L. Brown, III 903-874-4725
P.O. Box 1001 Corsicana TX 75151**

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

c Any submission deadlines:
APRIL 1

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
See Statement 8

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Statement 9				170,735
Total				170,735
b Approved for future payment See Statement 10				180,500
Total				180,500

Name of the organization **Clifford Foundation, Inc.** Employer identification number **75-2506394**

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 in the heading 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).

Name of organization Clifford Foundation, Inc.	Employer identification number 75-2506394
--	---

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	C.L. Brown III P.O. Box 1001 Corsicana TX 75151	\$ 275,808	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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.)

Capital Gains and Losses for Tax on Investment Income

Form **990-PF**

2009

For calendar year 2009, or tax year beginning **07/01/09**, and ending **06/30/10**

Name
Clifford Foundation, Inc.

Employer Identification Number
75-2506394

(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.)
(1) Gilbraltar Bank	P	07/28/08	07/28/09
(2) Citizens Bank	P	08/28/08	08/28/09
(3) CIT Group Corp	P	02/22/08	12/09/09
(4) Sempre	P	04/05/99	01/22/10
(5) Washington Mutual	P	01/11/06	01/26/10
(6) CIT Group	P	02/22/08	01/26/10
(7) CIT Gropu	P	12/09/09	01/26/10
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

(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)
(1) 100,000		100,004	-4
(2) 60,000		60,004	-4
(3) 51,614		61,853	-10,239
(4) 26,265		9,703	16,562
(5) 98,125		97,980	145
(6) 39,701		40,922	-1,221
(7) 12,785		10,692	2,093
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
(1)			-4
(2)			-4
(3)			-10,239
(4)			16,562
(5)			145
(6)			-1,221
(7)			2,093
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Accounting Fees	\$ 1,035	\$ 518	\$	\$ 517
Total	\$ 1,035	\$ 518	\$ 0	\$ 517

Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
990 PF	\$	\$	\$	\$
Total	\$ 0	\$ 0	\$ 0	\$ 0

Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses	\$	\$	\$	\$
Miscellaneous	670	335	\$	335
College Night	250	\$	\$	250
Postage	96	48	\$	48
Total	\$ 1,016	\$ 383	\$ 0	\$ 633

Federal Statements

Statement 3 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
Southern Co.	\$ 56,203	\$ 56,203	Cost	\$ 133,120
Ameren Corp.	49,186	49,186	Cost	28,524
Pepco Holding, Inc.	54,081	54,081	Cost	39,200
Sempra Energy	9,702		Cost	
Xcel Energy, Inc.	34,783	34,783	Cost	30,915
Alliant Energy Corp.	29,805	29,805	Cost	31,740
CH Energy	46,892	46,892	Cost	39,240
N Star	50,266	50,266	Cost	35,000
Kinder Morgan	23,835	23,835	Cost	32,530
Otter Tail Corp	25,633	25,633	Cost	19,330
General Motors	42,045	42,045	Cost	43
AT&T	23,538	23,538	Cost	24,190
Dupont	21,725	21,725	Cost	34,590
Total	\$ 467,694	\$ 457,992		\$ 448,422

Federal Statements

Statement 4 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
Deere and Company	\$	\$ 131,625	Cost	\$ 133,916
Duke Energy	50,106	50,106	Cost	56,639
Washington Mutual	97,980		Cost	
GE Capital		40,000	Cost	40,003
GE Capital		101,449	Cost	103,947
CIT Group Inc	61,853		Cost	
Genworth Finl	98,361	98,361	Cost	102,440
Lehman Brothers	39,993	39,993	Cost	7,717
Total	\$ <u>348,293</u>	\$ <u>461,534</u>		\$ <u>444,662</u>

Statement 5 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	Beginning of Year	End of Year
Tax escrow	\$ 39,541	\$ 42,884
Total	\$ <u>39,541</u>	\$ <u>42,884</u>

Federal Statements

Statement 6 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Clifford L. Brown, III 319 West 7th Ave. Corsicana TX 75110	President	10.00	0	0	0
Larry Morrison 104 N 7th St. Corsicana TX 75110	Vice Pres	1.00	0	0	0
William S. Maupin 1131 West 7th Ave. Corsicana TX 75110	Sec/treas	1.00	0	0	0
Terry Seth 1302 Oaklawn Dr. Corsicana TX 75110	Schol Comm	7.00	0	0	0
Nellie Carr Thorogood 4310 Pinewood Park Kingwood TX 77345	Schol Comm	3.00	0	0	0
Susan Cason Laird 1440 Wreyhill Dr. Hurst TX 76053	Schol Comm	3.00	0	0	0
Mary E. Brown 1409 Governors Dr. Corsicana TX 75110	Schol Comm	3.00	0	0	0
Lynda Sloan 1720 Sycamore Corsicana TX 75110	Schol Comm	3.00	0	0	0

Federal Statements

Statement 7 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

<u>Name of Manager</u>	<u>Amount</u>
C. L. Brown, III P.O. Box 1001 Corsicana, Texas 75151	\$ 275,808
Total	\$ <u>275,808</u>

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

<u>Description</u>
See attached application

Form 990-PF, Part XV, Line 2c - Submission Deadlines

<u>Description</u>
APRIL 1

Statement 8 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

<u>Description</u>
Limited to Texas, primarily Navarro Co. and need for financial assistance.

Federal Statements

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address	Address	Relationship	Status	Purpose	Amount
Jennifer Grelle		P.O. Box 835			Books and Tuition	10,566
Matson TX 76856		None				
Jennifer Grelle		P.O. Box 835			Room and Board	7,347
Matson TX 76856		None				
Eduardo Castaneda		1519 W 10th Ave			Books and Tuition	2,472
Corsicana TX 75110		None				
Eduardo Castaneda		1519 W 10th Ave			Room and Board	7,347
Corsicana TX 75110		None				
Ashley Washburn		P.O. Box 23			Books and Tuition	10,484
Barry TX 75102		None				
Ashley Washburn		P.O. Box 23			Room and Board	6,870
Barry TX 75102		None				
Emily Mahoney		2412 Morris Drive			Books and Tuition	10,360
Corsicana TX 75110		None				
Emily Mahoney		2412 Morris Drive			Room and Board	7,147
Corsicana TX 75110		None				
Jennifer Patterson		1100 S McKinney #185			Books and Tuition	9,656
Rice TX 75155		None				
Jennifer Patterson		1100 S McKinney #185			Room and Board	8,490
Rice TX 75155		None				
Amanda O'Sullivan		2029 Lake Halbert Rd			Books & Tuition	9,676
Corsicana TX 75109		None				
Amanda O'Sullivan		2029 Lake Halbert Rd			Room and Board	9,517
Corsicana TX 75109		None				
Katherine Sullivan		501 N Overlook			Books & Tuition	4,305
Kerens TX 75144		None				
Katherine Sullivan		501 N Overlook			Room and Board	7,539
Kerens TX 75144		None				
Megan Wilkinson		902 Pecan			Books and Tuition	7,901
Blooming Grove TX 76626		None				
Megan Wilkinson		902 Pecan			Room and Board	5,944
Blooming Grove TX 76626		None				
Erica Mahoney		2412 Morris Drive			Books and Tuition	3,787
Corsicana TX 75110		None				
Erica Mahoney		2412 Morris Drive			Room and Board	7,669
Corsicana TX 75110		None				
Kirby Jackson		P.O. Box 263			Books and Tuition	2,145
Kerens TX 75144		None				

Federal Statements

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the
Year (continued)

Name	Address	Relationship	Status	Purpose	Amount
Kirby Jackson	P.O. Box 263			Room and Board	3,049
Kerens TX 75144	None				
Alexander Kolosta	P.O. Box 1011			Books and Tuition	3,485
Corsicana TX 75151	None				
Alexander Kolosta	P.O. Box 1011			Room and Board	7,296
Corsicana TX 75151	None				
Demitra Phillips	301 S Walker			Books and Tuition	4,563
Blooming Grove TX 76626	None				
Demitra Phillips	301 S Walker			Room and Board	3,435
Blooming Grove TX 76626	None				
Cameron R. Young	4511 W. Highway 22			Books and Tuition	5,295
Corsicana TX 75110	None				
Cameron R. Young	4511 W. Highway 22			Room and Board	4,390
Corsicana TX 75110	None				
Total					<u>170,735</u>

Statement 10 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for
Future Pmt

Name	Address	Relationship	Status	Purpose	Amount
Emily Mahoney	2412 Morris Dr.			Books and Tuition	7,000
Corsicana TX 75110	None				
Emily Mahoney	2412 Morris Dr.			Room and Board	7,500
Corsicana TX 75110	None				
Amanda O'Sullivan	2029 Lake Halert Rd			Books and Tuition	7,000
Corsicana TX 75109	None				
Amanda O'Sullivan	2029 Lake Halbert Rd			Room and Board	7,500
Corsicana TX 75109	None				
Megan Wilkinson	902 Pecan			Books and Tuition	7,000
Blooming Grove TX 76626	None				
Megan Wilkinson	902 Pecan			Room and Board	7,500
Blooming Grove TX 76626	None				
Erica Mahoney	2412 Morris Dr.			Books and Tuition	7,000
Corsicana TX 75110	None				

Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for
Future Pmt (continued)

Name	Address	Address	Relationship	Status	Purpose	Amount
Erica Mahoney	Corsicana TX 75110	2412 Morris Dr.	None		Room and Board	7,500
Barry Hughey	Corsicana TX 75110	2401 Renee St.	None		Books and Tuition	7,000
Barry Hughey	Corsicana TX 75110	2401 Renee St.	None		Room and Board	7,500
Kirby Jackson	Kerens TX 75144	P.O. Box 263	None		Books and Tuition	3,000
Kirby Jackson	Kerens TX 75144	P.O. Box 263	None		Room and Board	3,500
Alexander Kolosta	Corsicana TX 75151	P.O. Box 1011	None		Books and Tuition	7,000
Alexander Kolosta	Corsicana TX 75151	P.O. Box 1011	None		Room and Board	7,500
Cameron R. Young	Corsicana TX 75110	4511 W Highway 22	None		Books and Tuition	7,000
Cameron R. Young	Corsicana TX 75110	4511 W Highway 22	None		Room and Board	7,500
Keith White	Corsicana TX 75110	3986 NECR 0080	None		Books and Tuition	7,000
Keith White	Corsicana TX 75110	3986 NECR 0080	None		Room and Board	7,500
Kati Tibbits	Corsicana TX 75110	250 NWCR 0017	None		Books and Tuition	7,000
Kati Tibbits	Corsicana TX 75110	250 NWCR 0017	None		Room and Board	7,500
Brenna Pelzel	Corsicana TX 75110	3850 NWCR 2004	None		Books and Tuition	7,000
Brenna Pelzel	Corsicana TX 75110	3850 NWCR 2004	None		Room and Board	7,500
Kelly Kormos	Corsicana TX 75110	2512 W. Maplewood	None		Books and Tuition	7,000
Kelly Kormos	Corsicana TX 75110	2512 W. Maplewood	None		Room and Board	7,500
Diana Driver	Corsicana TX 75110	2216 Renee	None		Books and Tuition	7,000
Diana Driver	Corsicana TX 75110	2216 Renee	None		Room and Board	7,500

Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for Future Pmt (continued)

Name	Address	Relationship	Status	Purpose	Amount
					180,500
Total					

INFORMATION SHEET

CLIFFORD FOUNDATION SCHOLARSHIP

Please Read All Information Before Completing Application

PURPOSE

The purpose of the Clifford Foundation is to provide academic scholarships for selected students for postsecondary educational cost. The Clifford Foundation selects qualified applicants who might not be able to attend a college, university or technical college on a full-time basis without this scholarship. A Selection Committee selects scholarship recipients. The decisions of the Selection Committee are final and no explanations of their decisions will be made. Emphasis in the selection process will be placed on financial need, academic performance, and leadership potential.

WHO MAY APPLY?

Any graduating senior of a Navarro County, Texas accredited high school, who has been accepted to attend a Texas state supported public college, university or technical college, and who has demonstrated to the Selection Committee good character and academic skills requisite for continuing his/her education. It is required that each applicant have a minimum total SAT score of 1500 or an ACT minimum composite score of 21.

HOW MANY SCHOLARSHIPS ARE AVAILABLE?

This number will vary from year to year.

WHAT DOES THE SCHOLARSHIP COVER?

The scholarship will cover tuition, fees, required and recommended course textbooks or eBooks, and room and board not paid for by other financial aid resources. The textbooks and eBooks allowance shall not exceed \$1,000 per semester without prior approval from the Clifford Foundation. The room and board allowance per semester will be calculated on the cost of a double occupancy room in a college dormitory and a 15-meal plan for the college, university or technical college attended.

DOES THE SCHOLARSHIP COVER OFF-CAMPUS LIVING?

The student must live in a school dormitory until the student has successfully completed 60 academic hours. If dormitory space is not available, a letter from the educational institution stating this fact will be required in order for the student to receive an off-campus budget for room and board. The student will be required to provide paid housing receipts monthly to the Clifford Foundation.

WHAT ABOUT MARRIED STUDENTS?

The Clifford Foundation will not pay room and board for married students.

WHAT EXPENSES DOES THE SCHOLARSHIP NOT PAY FOR?

The Clifford Foundation does not pay for (1) outside courses or tests; (2) course supplies or equipment, (3) tuition, fees and books to repeat a course previously paid for by the Clifford Foundation that the student has failed or withdrawn from; (4) Internet and/or distance learning classes, without pre-approval from the Clifford Foundation, (5) parking, transportation, extra curricular fees, year books, sport passes, medical fees or any other personal expenses.

WHAT IS THE TERM OF THE SCHOLARSHIP?

The Clifford Foundation scholarships are one-semester scholarships, which can be renewed for a total of eight consecutive semesters. The scholarship will be reviewed each semester to verify that the recipient has fulfilled the requirements of the scholarship.

CAN THE SCHOLARSHIP BE DEFERRED FOR GRADUATE COURSES?

The scholarship is for eight consecutive semesters and can include both undergraduate courses and graduate courses. If a student chooses to attend a college, university or technical school at his/her own expense up to the first four semesters as a full time student and maintains a 2.5 GPA, his/her scholarship with the Clifford Foundation may be deferred up to two years. The student must submit a copy of his/her official transcript within ten days after the end of each semester.

DOES THE SCHOLARSHIP PAY FOR SUMMER SCHOOL?

If a student attends, both Summer 1 and Summer 2 sessions and is enrolled in 12 or more semester hours, these two consecutive summer sessions will count as one of the eight consecutive semesters.

WHAT SCHOOLS MAY A RECIPIENT ATTEND?

Any Texas state supported public college, university or technical school approved by the Clifford Foundation.

WHAT IS REQUIRED TO MAINTAIN THE SCHOLARSHIP?

The undergraduate student will be required to maintain full time status (15 or more semester hours) with a 2.5 or better grade point average on a 4-point system

The graduate student will be required to maintain full time (9 or more semester hours) with a 3.0 or better grade point average on a 4-point system

If the student takes a class that does not receive a grade point, that class will not be included in the full time status (15 or more semester hours) requirement

If the student takes Internet or distance learning classes, those hours will not be included in the full time status (15 or more semester hours) requirement

The student's degree plan must be submitted to the Clifford Foundation during his/her third semester. Any subsequent changes to the established degree plan must be immediately submitted to the Foundation's office

The student will be required to keep the Clifford Foundation updated on their current address, email address and phone numbers

The student must provide (1) his/her colleges' Internet website address, (2) the student's User ID and Password; and (3) any updates or changes to (1) and (2).

The student will be required to submit an official college transcript to the Clifford Foundation within ten days after the semester ends. If grades are not submitted, the Clifford Foundation will not pay for the next semester

Once a Clifford Foundation Scholarship has commenced, and a student does not attend one regular semester as a full time student, the scholarship will be terminated.

WHAT IF THE STUDENT'S OVERALL GRADE POINT AVERAGE FALLS BELOW THE GPA REQUIREMENT OR THE STUDENT'S SEMESTER HOURS FALL BELOW THE HOUR REQUIREMENT?

If the student's GPA or hours fall below the Scholarship's requirements, the student will be allowed a one-time probation period. The probation period will be the semester immediately following the GPA or hour violation. The probation semester will be taken at the student's own expense. The probation semester courses must be pre-approved by the Clifford Foundation. To be reinstated for the Clifford Foundation scholarship, the student must submit his/her official grade report to the Clifford Foundation prior to reinstatement for the next eligible semester. The probation semester attended will not be counted as one of the eight consecutive semesters paid for by the Clifford Foundation.

WHAT ABOUT OTHER SOURCES OF FINANCIAL AID?

The Clifford Foundation must be informed immediately if any additional grants or scholarships are received.

WHAT IF I RECEIVE OTHER SOURCES OF FINANCIAL AID AND FAIL TO INFORM THE CLIFFORD FOUNDATION?

Failure to inform the Clifford Foundation that you have received other grants or scholarships will result in the termination of the Clifford Foundation Scholarship. Failure to inform the Clifford Foundation that you have received other grants or scholarships may also constitute the crime of **Fraud** under Chapter 32 of the Texas Penal Code, as well as other crimes, and may give rise to various civil claims against you, including **Common Law Fraud**. In the event you fail to inform the Clifford Foundation about other grants or scholarships you receive, the Clifford Foundation will pursue all its criminal and civil remedies against you to the full extent of the law.

WHERE CAN I GET AN APPLICATION?

Applications are available from high school counselors or from the Clifford Foundation office, 319 West Seventh Avenue, Corsicana, Texas. Students may call the Clifford Foundation office at 903.874.4725 with any questions

WHAT IS INCLUDED IN THE APPLICATION?

All documents must be current as of March 25, 2010

1. Application
2. Financial Statements
3. Essays
4. Signed Credit Report Application
5. Signed Copies of the Parents' and Stepparent's Current Year and Previous Year Tax Returns including all attachments sent to IRS.
6. Signed Copies of the Student's Current Year and Previous Year Tax Returns, if applicable including all attachments sent to IRS.
7. Sealed Official Copy of High School Transcript including GPA and class rank.
8. Sealed Official Copy of College Transcript
9. Official Copy of SAT or ACT Test Results
10. Copy of official *Student Aid Report (SAR)* including the EFC (Expected Family Contribution)
The SAR is a summary report received three or four weeks after submitting the FAFSA
11. Signed copy of checklist.

An interview with the student may be requested.

WHEN ARE THE APPLICATIONS DUE?

Applications for the 2009 – 2010 academic year are due in the Clifford Foundation's office between **March 25, 2010 and April 1, 2010 by 4:00 p.m.** Late or incomplete applications will not be considered, no exceptions

By my signature below, I acknowledge that I have read and understood the foregoing Information Sheet regarding the Clifford Foundation Scholarship and am signing this document freely and voluntarily. By signing below, I further acknowledge that, before signing this document, I had ample time and opportunity to review the Information Sheet and to have all my questions about the Information Sheet answered.

I also understand that by accepting the Clifford Foundation Scholarship, and by signing below, I have agreed to perform all actions required of me by the Information Sheet and to abide by all provisions of the Information Sheet. Among other things, I have agreed to inform the Clifford Foundation immediately if I receive any other grants or scholarships. I understand that my failure to inform the Clifford Foundation immediately if I receive other grants or scholarships may constitute the crime of **Fraud** under Chapter 32 of the Texas Penal Code, as well as other crimes, and may give rise to various civil claims against me, including a claim for **Common Law Fraud**. I understand that, should I fail to inform the Clifford Foundation immediately if I receive any other grants or scholarships, the Clifford Foundation will terminate my scholarship and pursue both **criminal** and **civil** remedies against me to the full extent of the law.

Signed by Parent / Guardian _____

Date _____

Signed by Parent / Guardian _____

Date _____

Signed by Student _____

Date _____

CLIFFORD FOUNDATION SCHOLARSHIP

2009-2010

CHECK LIST FOR COMPLETED APPLICATION

**Students must insure that the following are included with this application.
Late or incomplete applications will not be considered.**

(Please check)

- _____ 1 Completed Application (Verify that all financial data and financial aid award status are current)
- _____ 2 Completed Financial Statements
- _____ 3 Completed Credit Report Application
- _____ 4 Signed copies of both parents and/or stepparents' previous and current year tax returns including all attachments sent to IRS. If current year tax return is not complete, submit a signed preliminary current return.
- _____ 5 Signed copies of students' previous and current year tax returns including all attachments sent to IRS. If current year tax return is not complete, submit a signed preliminary current return if applicable.
- _____ 6 Sealed Official copy of your high school transcript including your GPA and class rank
- _____ 7 Sealed Official copy of College transcript.
- _____ 8 Official copy of your SAT or ACT test results
- _____ 9 Official copy of Student Aid Report (SAR) including your Estimated Family Contribution (EFC).
- _____ 10 Student essay required by Clifford Foundation Application
- _____ 11 Signed copy of checklist indicating application completed.

Applications are due in the Clifford Foundation's office at 319 W. 7th Ave. Corsicana, TX 75110 between March 25, 2010 and April 1, 2010 by 4:00 p. m. Late or incomplete applications will not be considered.

Parents and/or stepparent application information and financial information must be complete. If the information is not available, an explanation must be provided. If necessary, parent information may be submitted to the Foundation separately. A parent's unwillingness to submit financial information will result in an incomplete application.

Signed by Parent / Guardian _____
Signed by Parent / Guardian _____
Signed by Student _____

Date _____
Date _____
Date _____

17. List College, University or other schools to which you have been accepted.
18. What course of study (major) do you plan to pursue? _____
19. How many years are you required to complete this major _____
20. List jobs you have had in the last three years (Name, address and phone # of employer, length of employment & salary):
- _____
- _____
21. How do you plan to provide the additional funds required for your education that are not covered by this scholarship? _____
22. Do you have income from other sources? If "yes", please list:
- _____
- _____
23. List other scholarships or grants you have applied for. If received, indicate amount and terms: _____
- _____
24. Is any financial assistance for college available from other sources such as grandparents, uncles, aunts, parent's employers, Social Security or Veteran's Administration? If "yes", please list source and amount.
- _____
25. Do you or your parents have any money saved for your education? If "yes" how much?
- _____
26. Do you own your own car? Is or will a car be provided to you for your use by your parents or grandparents? If "yes", give make, model and ownership.
- _____
27. Please attach a copy of your official high school transcript including your official class rank and GPA.
28. Please attach a copy of your official SAT or ACT test results.
29. Please attach a copy of your Student Financial Aid Report (SAR) including your EFC.
30. On a separate piece of paper, please type a 500-word essay answering **one** of the following questions:
- Question 1: What is the best advice you have received, and why, and did you follow that advice?
- Question 2: As you look back on your high school years what advice, would you give to someone beginning high school?
- For Parents:** We do not wish to be unduly inquisitive into your personal affairs. We do feel, however, that the information we are requesting will enable us to make a more objective selection of recipients for our scholarships. Please feel free to make any comments or submit additional information that you feel would be helpful to us*
- Parents and/or stepparents' information must be complete on the application and their required financial information provided. If the information is not available, an explanation must be provided. If necessary, parent's information may be submitted to the Foundation separately. A parent's unwillingness to submit financial information will result in an incomplete application.*
30. Please attach a signed copy of parents and/or stepparent's previous year and current year tax returns including all attachments sent to IRS.
31. Please attach a signed copy of your previous year and current year tax returns, if applicable, including all attachments sent to IRS.

CERTIFICATION AND AUTHORIZATION

(Parent's must complete)

CERTIFICATION

The Undersigned certify the following:

- 1) My/Our son/daughter has applied for a scholarship from **Clifford Foundation**. In applying for the scholarship, I/We have completed a scholarship application containing various information to apply for this scholarship. I/We certify that all of the information is true, current and complete. I/We made no misrepresentations in the scholarship application or other documents, nor did I/We omit any pertinent information.
- 2) I/We understand and agree that **Clifford Foundation** reserves the right to verify the information provided on the application with the school, employer and financial institution.
- 3) I/We fully understand that, knowingly making any false statements when applying for the scholarship will cause my/our child's application to be rejected or loss of the scholarship if awarded.
- 4) I/We further understand that providing false or misleading information on this application, or omitting pertinent information on this application, would constitute the crime of **Fraud** under Chapter 32 of the Texas Penal Code, as well as other crimes, and would give rise to various civil claims against me/us, including **Common Law Fraud**. I/We understand that, in the event I/we have provided false or misleading information on this application, or omitted pertinent information on this application, the Clifford Foundation will pursue both **criminal** and **civil** remedies against me/us to the full extent of the law.

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

- 1) My/Our son/daughter has applied for a scholarship from **Clifford Foundation**. As part of the application process, Clifford Foundation may verify information contained in my/our child's application and in other documents required in connection with the scholarship during the final scholarship selection process.
- 2) I/We authorize you to provide to **Clifford Foundation**, any and all information and documentation that they request, which includes but is not limited to, employment history and income, bank and similar account balances and credit history.
- 3) A copy of this authorization may be accepted as an original.

Father Signature

SSN

Date

Mother Signature

SSN

Date

Stepfather Signature

SSN

Date

Stepmother Signature

SSN

Date

CREDIT APPLICATION

(Parent's must complete)

APPLICANT INFORMATION

1. Relationship to Student _____
2. Name: _____
Last First Middle Suffix
3. Social Security Number: _____
4. Birthdate: _____ 6: Age: _____
- 6: Telephone Number: _____
7. Present Address: _____
Street City State Zip
8. How long at present address: _____
9. Previous Address: _____
Street City State Zip

CO-APPLICANT INFORMATION (If married)

1. Relationship to Student _____
2. Name: _____
Last First Middle Suffix
3. Social Security Number: _____
4. Birthdate: _____ 6: Age: _____
- 6: Telephone Number: _____
7. Present Address: _____
Street City State Zip
8. How long at present address: _____
9. Previous Address: _____
Street City State Zip

Signature Authorization

This information is to be used by the agency collecting it to use during the Clifford Foundation scholarship selection process. It will not be disclosed outside the agency or Clifford Foundation. You do not have to provide this information; however, if you do not your application is incomplete.

Applicant Signature

Date

Co-Applicant Signature

Date