

#### 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 Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545 0047



Depa nterr	tment of that Revenue	ne Treasury e Service		► Th	e organizati	ion may have to u	use a copy of	this return to sa	tisfy stat	te reporting	requireme	nts	Οp	erilo Publ	e lingge
	For the 2	2009 calen	dar year,	or tax y	year begi	inning Oct	1	, 20	09, and	d ending	Sep	30	<u> </u>	, 2010	
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May the IRS discuss this return with the preparer shown above? (see instructions)

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Yes

TEEA0101 07/20/09

No

Form **990** (2009)

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Water Care

Form 990 (2009) HORD FOUNDATION INC
Park W Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	,	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		_ <u>X_</u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u> _
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		Х
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII			:
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
12	A Was the organization included in consolidated, independent audited financial statement for the tax  year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional  12 A X			
13	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х

Form 990 (2009) HORD FOUNDATION INC

Rank Checklist of Required Schedules (continued)

		r		
•-			Yes	No
	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		<u>x</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		x
<b>24</b> a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
<b>25</b> a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	5		
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	· ·	X
30	contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		x_
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	х	
BAA		Forn	1 <b>990</b>	(2009)

		-	Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	1a	0		
<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	1c	Х	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a			
2b If at least one is reported on line 2a, did the organization file all required federal employment to	ax returns?	_2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return	,			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year this return?	covered by	3a		<u>x</u>
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature o financial account in a foreign country (such as a bank account, securities account, or other financial)	r other authority over, a ancial account)?	4a		<u>x</u>
<b>b</b> If 'Yes,' enter the name of the foreign country.				
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Formancial Accounts	oreign Bank and			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax y	year <sup>?</sup>	5a		_X_
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	transaction?	5 b		_X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entit Tax Shelter Transaction?	ty Regarding Prohibited	5с		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and solicit any contributions that were not tax deductible?	d did the organization	6a		X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such condeductible?	itributions or gifts were not	6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and part provided to the payor?	rtly for goods and services	7a		Х
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for whi Form 8282?	ch it was required to file	7 c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums benefit contract?		7 e		х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene		7f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as re	•	7 g	1	-
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form		7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, had holdings at any time during the year?	g organizations. Did the ve excess business	8		Х
9 Sponsoring organizations maintaining donor advised funds.			<del>!</del>	
a Did the organization make any taxable distributions under section 4966?		9 a		Х
<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?		96		Х
10 Section 501(c)(7) organizations. Enter		:	Ţ	
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
<b>b</b> Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter				
a Gross income from other members or shareholders	11a			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	116			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	1 1	12 a	1	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			

BAA

Form **990** (2009)

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Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A.	Governing	Body a	nd Ma	nage	∍mer	nt													
		<del></del>																	Yes	No
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ь	Enter the	e number of vot	ling memb	ers that	t are in	ndeper	ndent							1 1	18					
2	Did any officer, o	officer, director lirector, trustee	, trustee, o or key en	or key e iployee	mploye	ee ha	ve a f	family	relati	ionshi	p or a	busine	ss re	lations	ship wit	h any	other	2		X
3	Did the o	organization del rs, directors or	legate con trustees, c	trol ove	r mana mploye	ageme	ent du a ma	ities cu anagen	ustom nent	narily comp	perforr anv or	ned by	or u	nder t	he dıre	ct supe	rvision	3		х
4		organization ma											•					4		Х
		prior Form 99			,	-														
5	Did the d	organization be	come awa	re durın	ig the y	year o	of a m	aterial	dive	ersion	of the	organi	zatıor	n's ass	sets?			5		Х
6	Does the	organization h	nave memb	pers or s	stockh	olders	s?											6		X
7 a	Does the	e organization h ig body?	nave memb	pers, sto	ockholo	ders,	or oth	ier per	sons	who i	may ele	ect one	e or n	nore n	nember	s of the	e	7 a		х
b	Are any	decisions of the	e governin	g body :	subjec	t to a	pprova	al by n	nemb	bers, s	stockho	lders,	or ot	her pe	rsons?			7 t	+	Х
8	Did the o	organization col	ntemporan	eously (	docum	ent th	ne me	etings	held	or wr	itten a	ctions	unde	rtaken	during	the ye	ar by			
	•	erning body?																8 a	X	
Ŀ	Each co	mmittee with au	uthority to	act on t	oehalf (	of the	gove	rning t	body?	7								86	X	
9	organiza	any officer, dire	address? //	f 'Yes,' ¡	provide	e the i	names	s and	addre	esses	ın Sch	edule	0					9	ļ	x
		Policies	(This Se	ection	B rec	quesi	ts ınt	forma	atıon	n abo	ut po	licies	not	requ	ıred b	y the	Interna	al		
Reve	enue Code	e)																	1	
									_										Yes	No
		organization h		•			•											10 a	<u> </u>	<u>X</u>
	and brai	does the organ nches to ensure	their opei	rations a	are co	nsiste	ent wit	th thos	se of t	the or	ganıza	tion?						101		
		organization pr									_	•	-		filing t	ne form	17	11	X	
		ın Schedule O			-	-		-					n 990	)				2.0		
		organization h						-										12 a	¥	X
	to confli																	12t	<u>,                                    </u>	
		e organization r e O how this is							force	comp	liance	with th	he po	licy?	f 'Yes,	descri	be ın	120	:	
		e organization h				,	-											13	ļ	X
14	Does the	e organization h	nave a writ	tten doc	:ument	ı reten	ntion a	and de	struct	tion p	olicy?							14	X	
15	persons	process for dete , comparability	data, and	contem	porane	eous s	substa	antiatio	on of	the de	ude a i elibera	review tion an	and nd dec	appro	val by i	ndeper	ndent	3		,
		anization's CEC					nanag	jement	offic	cial								15 a	<u> </u>	<u>X</u>
ŀ		ficers of key en																151	)	X
	If 'Yes' t	o line 15a or 15	5b, describ	e the p	rocess	; in Sc	chedul	le O (	(See i	ınstru	ctions )	)								
	entity di	organization inv iring the year?								•					•			168	1	Х
ì	',lf 'Yes in joint v status w	has the organize venture arrange with respect to s	zation adop ements und such arrand	pted a v der appl gements	vritten licable s?	policy feder	y or pr ral tax	rocedu (law, a	and ta	equirin aken s	g the o	organız o safeç	zation guard	to ev	aluate rganiza	ts part tion's e	icipation exempt	161		
Sec		Disclosur																, ,	*	
17	List the	states with whi	ch a copy	of this F	Form 9	90 is	requir	red to	be file	led >										
18	Inspecti	6104 requires a on Indicate how website	w you mak	ation to te these nother's	availa	able (	orms 1 Check	all tha	at app	)24 if a ply on requ		ble), 9	990, a	ind 99	0-T (50	1(c)(3)	s only) a	vailable	for pu	ablic
19	Describe	e in Schedule C nts available to	) whether	(and if s			orgar		-	-		rning o	docun	nents,	conflic	t of int	erest pol	icy, and	l financ	cial
20	State th	e name, physic  O. WHITE	al address	s, and te				of the			o poss ERBU									0700
	THIN	7. MIT IC		<u>171</u> A	<u></u> _μ	473.7 T	_= ·			MVT.	יַעַםט		- <b>-</b>	⊃ <u>+</u> _			- <b>-</b> -	(203)	4/0-	0128

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### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

X Check this box if the organization did not compensate any current officer, director, or trustee

(A)	(B)			(0	•			(D)	(E)	(F)
Name and Title	Average hours		_			hat appl		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	adividi al frassee or director	mshluhonel lcustee	Offi ei	Key employee	High est contrensated employee	FORRE	the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
NOEL HORD										
FOUNDER/TRUSTEE	2.00	Х	ļ							
JERRY WALTON										
VICE PRESIDENT	2.00	Х								
MARK O WHITE	_	 					ļ			}
TREASURER	2.00		<u> </u>	Х		<u></u>				
BERNARD MCFADDEN			1							
VICE PRESIDENT	2.00		<u> </u>	Х						
JOHNNY_BARNES	_									
TRUSTEE	2.00	Х		<u> </u>						
PORTIA_SHEPPARD	_									
SECRETARY/TRUSTEE	2.00		L	X	ļ					
SHARON_DANOSKY	_									
TRUSTEE	2.00	Х	L							
DR EDWARD JAMES	_		ļ						1	
TRUSTEE	2.00	Х	_		<u> </u>					
ALECIA_ANDREWS	_									
TRUSTEE	2.00	Х	<u> </u>							
JAMES SCHMOTTER	_		l							
TRUSTEE	2.00	Х	L	<u> </u>						<u> </u>
ANITA RICE	_	ļ		ļ	ļ	ļ				
CHAIRMAN	2.00			Х						
EDWARD_ROBBS	_									
TRUSTEE	2.00	X					上			
LLOYD BARKER	_			ļ			1			
TRUSTEE	2.00	X	L			<u> </u>				
LISA BURGESS, MD	_			1						
TRUSTEE	2.00		<u> </u>							
GEORGE A COLEMAN	_		1							
TRUSTEE	2.00		$\perp$							
MAXINE HARRIS-THOMAS	_									
TRUSTEE	2.00		_							
CREIGHTON LEE, SR										
TRUSTEE	2.00									

(A)	(B)			(6	c)		i	(D)	(E)	(F)
Name and Title	Average hours			check	k all t	hat ap	oply)	Reportable	Reportable	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
OHN SIMS RUSTEE		х								
	-									
	-									
	-									
									_	
									-	
	-									
	-									
	-									
	-									
	-									
1 b Total			'	'	'		<b></b>			
2 Total number of individuals (including but not limited from the organization ►	to thos	e lis	ted	abo	ve)	who	rece	eived more than \$	100,000 in reportal	ole compensation
<ul> <li>3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such if</li> <li>4 For any individual listed on line 1a, is the sum of re</li> </ul>	ndıvıdual		•	•	•	•	J	•	• •	3
the organization and related organizations greater the individual	nan \$150	0,00	02 /	f 'Ye	es' c	omp	olete	Schedule J for su	ich	4
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch	ompensa nedule J	atior for s	n fro such	m a per	ny ι rson	ınrel	ated	organization for	services	5
Complete this table for your five highest compensate compensation from the organization	ed indep	end	ent ·	cont	ract	ors 1	that	received more tha	an \$100,000 of	
(A) Name and business address	ss							Description	of Services	(C) Compensation
						<u></u>				
									-	
2 Total number of independent contractors (including	but not I	lımıt	ed to	o the	ose	lıste	d ab	ove) who receive	d more than	

\$100,000 in compensation from the organization >

Par	t VIII Statement of Revenue					
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
22	1a Federated campaigns 1a					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1b		}			
8 <u>5</u>	c Fundraising events 1c					}
RA	d Related organizations 1 d					1
ਰੁ≦∣	e Government grants (contributions)		1			
SES			1			
Ĕ	f All other contributions, gifts, grants, and similar amounts not included above 1f 183		]			
8E 0		L <b>,</b> 303.	1			
S S	g Noncash contribns included in lns 1a-1f \$					
	h Total. Add lines 1a-1f	<u>►</u>	181,303.			
Ę	Busines	s Code			<del> </del>	
PROGRAM SERVICE REVENUE	2a					
22	b					
힣	С			,		
Ä	d					
ξ	e					
8	f All other program service revenue					
혽	g Total. Add lines 2a-2f	▶				
	3 Investment income (including dividends, interest other similar amounts)	and -	295.	0.	0.	295.
	4 Income from investment of tax-exempt bond prod	eeds ►				250.
	5 Royalties	.ccus ▶				
	*	ersonal			<del> </del>	
	6a Gross Rents	Craoriai		1		
	<b>b</b> Less rental expenses					
	c Rental income or (loss)				<del> </del>	
	d Net rental income or (loss)	•				
	/ a Gross amount from sales of	Other				
	assets other than inventory					
	<b>b</b> Less cost or other basis	İ				
	and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)	<b>&gt;</b>				
NUE	8a Gross income from fundraising events (not including \$					
OTHER REVENU	of contributions reported on line 1c)					]
ž	See Part IV, line 18 a 8	4,511.	!			
물		7,372.	Ì			
0	c Net income or (loss) from fundraising events	<b>&gt;</b>	47,139.	0.	0.	47,139.
	9a Gross income from gaming activities See Part IV, line 19					
	<b>b</b> Less direct expenses <b>b</b>					1
	c Net income or (loss) from gaming activities					1
	10a Gross sales of inventory, less returns and allowances				-	
	b Less: cost of goods sold b				<del></del>	<del> </del>
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue Busine					
	<del></del>	ss Code				ļ
	11a					<del>                                     </del>
	b					
	C			<del>.</del>		<del> </del>
	d All other revenue					-
	e Total. Add lines 11a-11d	•	000			<u> </u>
	12 Total revenue. See instructions	•	228,737.	0.	0.	47,434.

Form 990 (2009) HORD FOUNDATION INC

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	190,500.	190,500.	<del>laterianes</del> erde <del>ente</del> e, en engele.	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)			•	
ā	a Management				
t	Legal				
(	Accounting				
(	Lobbying				
•	Prof fundraising svcs. See Part IV, In 17				
f	Investment management fees				
Ģ	Other				
12	Advertising and promotion	2,719.	0.	2 <b>,</b> 719.	
13	Office expenses	1,241.	0.	1,241.	0.
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	724.	0.	724.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				•
	Payments to affiliates		-		
	Depreciation, depletion, and amortization	. –	<u> </u>		
	Insurance	500.	0.	500.	0.
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
	a CONTRIBUTIONS	750.	0.	750.	0.
	b PROFESSIONAL FEES	25,418.	0.	25,418.	0.
	c MEMBERSHIP FEES	350.	0.	350.	0.
	d PHONE	462.	0.	462.	0.
	e POSTAGE	2,711.	0.	2,711.	0.
	f All other expenses	10,929.	0.	10,929.	0.
_25	Total functional expenses. Add lines 1 through 24f	236,304.	190,500.	45,804.	0.
26 BAA	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				Form 990 (2000)
DAA	1				Form <b>990</b> (2009)

Rart X Balance Sheet (A) Beginning of year (B) End of year Cash - non-interest-bearing 34,033 1 26,466. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis 10 a Complete Part VI of Schedule D 10b b Less: accumulated depreciation. 10c 11 Investments - publicly-traded securities 11 12 Investments – other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets Add lines 1 through 15 (must equal line 34) 34,033. 26,466. 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 0. 26 N E T Organizations that follow SFAS 117, check here > X and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets 34,033. 27 26,466. 28 Temporarily restricted net assets Permanently restricted net assets 29 R

lines 30 through 34. 30 31

and complete

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, and equipment fund

Organizations that do not follow SFAS 117, check here

Retained earnings, endowment, accumulated income, or other funds 33

Total net assets or fund balances Total liabilities and net assets/fund balances

31 32 34,033. 33 26,466. 34,033. 34 26,466.

30

BAA

FUND

Form 990 (2009)

	··· <del></del>	\	Yes	No
1 Ac	counting method used to prepare the Form 990 🛛 Cash 🔲 Accrual 🔲 Other			
	he organization changed its method of accounting from a prior year or checked 'Other,' explain Schedule O			
2a We	ere the organization's financial statements compiled or reviewed by an independent accountant?	2a	Х	
<b>b</b> We	ere the organization's financial statements audited by an independent accountant?	2b	Х	
	Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, view, or compilation of its financial statements and selection of an independent accountant?	2c	х	
	he organization changed either its oversight process or selection process during the tax year, explain Schedule O			
d If '	Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a nsolidated basis, separate basis, or both			
X	Separate basis Consolidated basis Both consolidated and separate basis			
	a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single dit Act and OMB Circular A-133?	3a		х
	Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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Form 990 (2009)

#### **SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

OMB No 1545-0047

aldes of rego

inspection

Department of the Treasury Internal Revenue Service

Total

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number HORD FOUNDATION INC 06-1359296 Partil Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 9 An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I Type II Type III - Other b c | Type III — Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q Yes Νo a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations (i) Name of Supported Organization (iii) Type of organization (IV) Is the (v) Did you notify (vi) is the (vii) Amount of Support (described on lines 1.9 above or IRC section the organization in col (i) of anization in col organization in col (i) listed in your (i) organized in the (see instructions)) governing document? your support? Yes No Yes No Yes Nο

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

Schedule A (Form 990 or 990-EZ) 2009

Par	(Complete only if you checke				b)(1)(A)(iv) and	d 170(b)(1)(.	A)(vi)			
Sec	tion A. Public Support	d the box off line 5	, 7, 01 0 011 att 1.	7						
Caler	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	253,986.	338,045.	231,464.	195,896.	181,301	1,200,692.			
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf		373,733							
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.									
4	Total. Add lines 1-through 3	253,986.	338,045.	231,464.	195,896.	181,30	1,200,692.			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		,							
	Public support. Subtract line 5 from line 4						1,200,692.			
Sec	tion B. Total Support	<del>,</del>								
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
7	Amounts from line 4	253,986.	338,045.	231,464.	195,896.	6. 181,301. 1,200,6				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	3,160.	1,842.	1,842.	388.	29	5. 7,527.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10						1,208,219.			
12	Gross receipts from related activ	ities, etc (see inst	ructions)			1	2			
	First five years. If the Form 990 organization, check this box and	stop here		l, third, fourth, or	fifth tax year as a	section 501(c	)(3) ▶ □			
	tion C. Computation of Pu					<u> </u>				
	Public support percentage for 20		(,	11, column (f)		<u> </u>	99.38%			
15	Public support percentage from 2	2008 Schedule A, F	Part II, line 14			<u> </u>	99.26%			
16 a	a 33-1/3 support test — 2009. If the and stop here. The organization				the line 14 is 33-1,	/3 % or more,	check this box ► X			
ŀ	33-1/3 support test - 2008. If the and stop here. The organization				and line 15 is 33-	1/3% or more,	check this box ►			
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-ar	id-circumstances'	test, check this b	ox and stop here.	. Explain in Pa	rt IV how			
1	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-ar	nd-circumstances'	test, check this b	ox and stop here.	. Explain in Pa	rt IV how the			
18	Private foundation. If the organi		-	•		-	——————————————————————————————————————			
BAA							m 990 or 990-EZ) 2009			

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1. 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, rovalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Pari IV	Supple Part II	e <mark>ment</mark> , line 1	<b>al Info</b> 7a or	rmatio 17b; a	<b>n.</b> Com nd Par	iplete ti t III, lin	his part e 12. Pi	to provi rovide ar	de the e	xplanation addition	ons requi al inform	red by Palation. Se	art II, line e instruct	10; cions.
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Schedule A (Form 990 or 990-EZ) 2009 HORD FOUNDATION INC

06-1359296

Page 4

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

#### **Supplemental Financial Statements**

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions

OMB No 1545-0047

Employer Identification number

2009

Open to Public Inspection

HOF	RD FOUNDATION INC			06-1359296
	Organizations Maintaining Dono	r Advised Funds or Othe	er Similar Funds or Acc	
	the organization answered 'Yes' to	o Form 990, Part IV, line	6.	Journal Complete II
		(a) Donor advised	funds (b)	Funds and other accounts
1	Total number at end of year		_	
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and don funds are the organization's property, subject t	or advisors in writing that the a o the organization's exclusive I	issets held in donor advised egal control?	Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene	he benefit of the donor or dono	g that grant funds may be r advisor or for any other	
)err	Conservation Easements Comple		swared 'Ves' to Form O	
1				90, Fart IV, line 7.
٠	Preservation of land for public use (e.g., re	,	—·· <i>*</i> ·	colly important land area
	Protection of natural habitat	ecreation or pleasure)	Preservation of an historic	•
	Preservation of open space	l		istoric structure
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation	contribution in the form of a	conservation easement on the
		· ·		Held at the End of the Year
á	a Total number of conservation easements		2a	
ŀ	Total acreage restricted by conservation easer	nents	2b	
•	Number of conservation easements on a certif	ied historic structure included i	n (a) <b>2c</b>	
•	d Number of conservation easements included in	n (c) acquired after 8/17/06	2d	
3	Number of conservation easements modified,	transferred, released, extinguis	hed, or terminated by the org	anization during the tax
	year ►			
4	Number of states where property subject to co	nservation easement is located	<b>-</b>	
5	Does the organization have a written policy reand enforcement of the conservation easement	it it holds?	, , ,	ations, Yes No
6	during the year ►			···
,	Amount of expenses incurred in monitoring, in during the year ▶	specting, and enforcing conser	vation easements \$	<del></del>
8	Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the red	quirements of section	Yes No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote t conservation easements	o the organization's financial s	tatements that describes the	organization's accounting for
Pa	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or Other Si , Part IV, line 8.	milar Assets
1:	a If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial stateme	lic exhibition, education, or res	revenue statement and balar earch in furtherance of public	nce sheet works of art, historical service, provide, in Part XIV,
	b If the organization elected, as permitted under treasures, or other similar assets held for pub amounts relating to these items:	SFAS 116, to report in its revel lic exhibition, education, or res	enue statement and balance search in furtherance of public	sheet works of art, historical service, provide the following
	(i) Revenues included in Form 990, Part VIII,	line 1		►\$ ►\$
	(ii) Assets included in Form 990, Part X			
	If the organization received or held works of a amounts required to be reported under SFAS	116 relating to these items:	similar assets for financial g	•
	a Revenues included in Form 990, Part VIII, line	:1		<b>►</b> \$
	<b>b</b> Assets included in Form 990, Part X			<b>-</b> \$

Schedule <b>D</b> (Form 990) 2009 HORD	FOUNDATION I	NC		06-13	59296	Page 2
Paনঃ 🎹 Organizations Mainta	ining Collections	of Art, Historica	al Treasures, or	Other Similar As	sets (contin	ued)
3 Using the organization's acquisition items (check all that apply)	on accession and other	er records, check any	of the following that	at are a significant use	of its collection	n
a Public exhibition		<b>d</b> Loan or ex	change programs			
<b>b</b> Scholarly research		e U Other				
c Preservation for future genera						
4 Provide a description of the organ Part XIV					nı ;	
5 During the year, did the organizal assets to be sold to raise funds ra	ion solicit or receive ather than to be main	donations of art, historiation at the design and the design are designed as part of the design are designed.	orical treasures, or or organization's collection	other similar	Yes	No
Parilly Escrow and Custodia 9, or reported an amo	I Arrangements unt on Form 990,	Complete if orgai Part X, line 21.	nization answer	ed 'Yes' to Form 9	/90, Part IV, 	line
1a is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or oth	er intermediary for co	ontributions or other	assets not	Yes	□No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and comp	lete the following tab	le		☐ 1es	
and the second s	are sare and comp	note the following tac			Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1f		
2a Did the organization include an a	mount on Form 990, F	Part X, line 21?		· · · · · · · · · · · · · · · · · · ·	Yes	No
<b>b</b> If 'Yes,' explain the arrangement					_	_
Pant ♥ Endowment Funds Co	mplete if organiza	ation answered '	Yes' to Form 99	0, Part IV, line 10		
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	ars back
1 a Beginning of year balance						
<b>b</b> Contributions						
<ul> <li>c Net Investment earnings, gains, and losses</li> </ul>		_		i -		
d Grants or scholarships						
<ul> <li>Other expenditures for facilities and programs</li> </ul>				:		
f Administrative expenses						
<b>g</b> End of year balance						
<ol><li>Provide the estimated percentage</li></ol>	of the year end bala	nce held as:				
a Board designated or quasi-endow	ment 🕨	<u></u> %				
<b>b</b> Permanent endowment ►	- %					
c Term endowment ►	<b>%</b>					
3a Are there endowment funds not in organization by	n the possession of th	ne organization that a	re held and adminis	stered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related of	rganizations listed as	required on Schedul	e R?		3b	1
4 Describe in Part XIV the intended	_	3				<del></del>
Pari VI Investments-Land, B				line 10		
	ananigo, ana Eq		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

Part WI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment

(a) Cost or other basis (investment)

(b) Cost or other basis (other)

Depreciation

(d) Book Value

Depreciation

(d) Book Value

Depreciation

Equipment

Equipmen

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) BAA

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Schedule **D** (Form 990) 2009

Schedule <b>D</b> (Form 990) 2009 HORD FOUNDATION	ON INC	06-1359296 Page 3
Part VII Investments—Other Securities S		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
<del></del>	- <del>-</del> - <del>                               </del>	
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<del>-</del>		
Total. (Column (b) must equal Form 990 Part X, col (B) line 12)		
Part VIII Investments—Program Related (	See Form 990 Part X line 1	3)
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) bescription of investment type	(b) Book value	Cost or end-of-year market value
		· · · · · · · · · · · · · · · · · · ·
T-1-1 (0.1 (1) 1 (15 000 D 1) (0.1 (1) 1 (1)		
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)  Part IX Other Assets (See Form 990, Pa	rt Y June 15)	
Tartin   Other Assets (See Form 990, Fa	(a) Description	/h\ Paak value
	(a) Description	(b) Book value
T		
Total. (Column (b) must equal Form 990, Part X, col		<b>&gt;</b>
Part X Other Liabilities (See Form 990,	Part X, line 25)	
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
<del></del>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>&gt;</b>	
2. FIN 48 Footnote In Part XIV, provide the text of the for uncertain tax positions under FIN 48	e footnote to the organization's finan	cial statements that reports the organization's liability

Schedule D (Form 990) 2009 HORD FOUNDATION INC	06-1359296	Page 4
Park Reconciliation of Change in Net Assets from Form 990 to F	inancial Statements	
1 Total revenue (Form 990, Part VIII,column (A), line 12)		228,737.
2 Total expenses (Form 990, Part IX, column (A), line 25)		236,304.
3 Excess or (deficit) for the year Subtract line 2 from line 1		-7,567.
4 Net unrealized gains (losses) on investments		<u> </u>
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net) Add lines 4 through 8		
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	and 9	-7,567.
Part XII Reconciliation of Revenue per Audited Financial Statemen		
1 Total revenue, gains, and other support per audited financial statements	1	228,737.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		-
a Net unrealized gains on investments	2a	
<b>b</b> Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	228,737.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
<b>b</b> Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	228,737.
PartXIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per Return	<del></del>
1 Total expenses and losses per audited financial statements	1	236,304.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2a	
<b>b</b> Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV)	2 d	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	236,304.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		200,0011
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
<b>b</b> Other (Describe in Part XIV)	46	
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	236,304.
Part XIV Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pai line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d ai information	rt III, lines 1a and 4; Part IV, lines 1b and 2t nd 4b Also complete this part to provide an	o; Part V, y additional
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BAA TEEA3304 02/02/10	Schedule <b>D</b>	(Form 990) 2009

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Schedule D (Form 990) 2009 HORD FOUNDATION INC  Part XIV Supplemental Information (continued)	06-1359296	Page <b>5</b>
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#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

প্রার্থিত দেশু© নিজ্ঞান্তর্গতিন

Name of the organization						Employer identifica	tion number
HORD FOUNDATION INC 06-1359296					6		
Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17 Form 990EZ filers are not required to complete this part							
1 Indicate whether the organization ra	aised funds thro	ough any c	of the follow	ving activities Check all	I that ap	ply	
Mail solicitations		,		Solicitation of non-g	-	• •	
Internet and email solicitations				Solicitation of gover			
Phone solicitations				Special fundraising		3141113	
<b>⊢</b>				Special fullulaising	events		
In-person solicitations  2a Did the organization have written o	r oral agreeme	nt with any	undividual	(including officers, dire	otore tr	ustoos or key	
employees listed in Form 990, Part	t VII) or entity in	n connection	on with pro	fessional fundraising se	rvices?	usiees or key	☐ Yes ☐ No
<b>b</b> If 'Yes,' list the ten highest paid incompensated at least \$5,000 by the	dividuals or enti e organization	ties (fundr	aisers) pur	suant to agreements un	nder whi	ch the fundraise	er is to be
					(v) Ar	mount paid to	
(i) Name of Individual	(ii) Activity		fundraiser by or control	(iv) Gross receipts		retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)			ibutions?	from activity	Tunar	aiser listed in col (i)	organization
		Yes	No				
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Total							
3 List all states in which the organiz	ation is register	red or licer	sed to sol	icit funds or has been n	otified it	is exempt from	registration
or licensing							
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Color   Colo		-	reported more than \$15,000 on Fo	orm 990-EZ, line 6a	a. List events with	gross receipts grea	ter than \$5,000.
3 Gross income (line 1 minus line 2)  4 Cash prizes  5 Noncash prizes  6 Rent/facility costs  7 Food and beverages  8 Entertainment  9 Other direct expenses  10 Direct expense summary Add lines 4 -through 9 in column (d)  11 Net income summary Combine lines 3, column (d) and line 10  Passate  (a) Bingo  (b) Pull tabs/instant bingo/forogressive bingo  7 Direct expenses  1 Gross revenue  2 Cash prizes  3 Non-cash prizes  4 Rent/facility costs  5 Other direct expenses  4 Rent/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expenses summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities in each of these states?  9 a light was a l	R			(a) Event #1 BALL	(b) Event #2 SILENT AUCTION	(c) Other Events	(d) Total Events (Add col (a) through
3 Gross income (line 1 minus line 2)  4 Cash prizes  5 Noncash prizes  6 Rent/facility costs  7 Food and beverages  8 Entertainment  9 Other direct expenses  10 Direct expense summary. Add lines 4- through 9 in column (d)  11 Net nocene summary. Combine lines 3, column (d) and line 10  12 Cash prizes  (a) Bingo (b) Pull tabs/instant bingo/forgressive bingo (c) Other gaming. (Add col. (a) through col. (c) (c))  1 Gross revenue  2 Cash prizes  3 Non-cash prizes  4 Rent/facility costs  5 Other direct expenses  4 Rent/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expenses summary. Add lines 2 through 5 in column (d)  8 Net gaming income summary. Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities in each of these states?  b If 'No,' explain:  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	ě	_	2				
3 Gross income (line 1 minus line 2)  4 Cash prizes  5 Noncash prizes  6 Rent/faclity costs  7 Food and beverages  8 Entertainment  9 Other direct expenses  10 Direct expense summary Add lines 4- through 9 in column (d)  11 Net notice summary Combine lines 3, column (d) and line 10  Practical Garning, Complete if the organization answered Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/instant bingo/forogressive bingo  1 Gross revenue  2 Cash prizes  3 Non-cash prizes  4 Rent/faclity costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities a is the organization licensed to operate gaming activities in each of these states?  9 a literation and the state of the column (d) and line 7  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization of these states?  10 a Were any of the organization of the server of these states?  10 a Were any of the organization of the server of these states?  10 a Were any of the organization of the server of the serv	N U E	1	Gross receipts				
4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary Add lines 4- through 9 in column (d) 11 Net income summary Combine lines 3, column (d) and line 10  Facility Gaming, Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (Add col (a) through col. (c)) 1 Gross revenue 1 Gross revenue 2 Cash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? 9 It 'No,' explain:		2	Less: Charitable contributions				
5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses summary Add lines 4- through 9 in column (d) 11 Net income summary Combine lines 3, column (d) and line 10  Partitle  Gaming, Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (Add col (a) through bingo progressive bingo (c) Other gaming (Add col (a) through bingo of the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (Add col (a) through bingo of the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses  5 Other direct expenses  6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  YES IN 9 Enter the state(s) in which the organization operate gaming activities a is the organization licensed to operate gaming activities in each of these states?  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming incenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	_	3	Gross income (line 1 minus line 2)				
6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses summary Add lines 4- through 9 in column (d) 11 Net income summary Combine lines 3, column (d) and line 10  ###################################		4	Cash prizes				
8 Entertainment 9 Other direct expenses 10 Direct expense summary Add lines 4- through 9 in column (d) 11 Net income summary. Combine lines 3, column (d) and line 10  Partitle Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/Instant bingo/progressive bingo (cc) Other gaming (Add col (a) through col. (cf))  1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses  1 Yes		5	Noncash prizes				
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10 Direct expense summary Add lines 4- through 9 in column (d) 11 Net income summary. Combine lines 3, column (d) and line 10  Fig. 12 Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/Instant bingo/progressive bingo (c) Other gaming (Add col (a) through col. (c))  1 Gross revenue  2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses  6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a ls the organization licensed to operate gaming activities in each of these states?  b If 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?		7	Food and beverages				
10 Direct expense summary Add lines 4- through 9 in column (d) 11 Net income summary. Combine lines 3, column (d) and line 10  Fig. 12 Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/Instant bingo/progressive bingo (c) Other gaming (Add col (a) through col. (c))  1 Gross revenue  2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses  6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a ls the organization licensed to operate gaming activities in each of these states?  b If 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	E X P	8	Entertainment				
10 Direct expense summary Add lines 4- through 9 in column (d) 11 Net income summary. Combine lines 3, column (d) and line 10  Fig. 12 Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/Instant bingo/progressive bingo (c) Other gaming (Add col (a) through col. (c))  1 Gross revenue  2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses  6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a ls the organization licensed to operate gaming activities in each of these states?  b If 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	N S	9	Other direct expenses				
Table   Saming   Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization   Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization   Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization   Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization   Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization   Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Complete if the organization   Comp	Š	10	Direct expense summary Add lines 4- th	rough 9 in column (d)		•	
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4 Rent/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states?  9 a  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	Ě	1	Gross revenue				
4 Rent/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states?  9 a  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a	D X	2	Cash prizes				
4 Rent/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? b if 'No,' explain'  10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	REN	3	Non-cash prizes				
7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? b if 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	ŤĒ	4	Rent/facility costs				
7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? b if 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a limit of the state of the second of the se		5	Other direct expenses				
7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states? 9 a  b If 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a		Ť	Other direct expenses	Yes %	Yes %	Yes %	<del> </del>
8 Net gaming income summary Combine lines 1, column (d) and line 7  9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? 9 a  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a		6	Volunteer labor	No	No	No	
9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? b if 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a		7	Direct expense summary Add lines 2 three	ough 5 in column (d)		•	• <u> </u>
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b if 'No,' explain'  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a				• •			
10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a				activities in each of the	ese states?		9a
	•			<b>-</b>	<b></b>		
	10						
				s revoked, suspended o	or terminated during the	tax year	IUa
			· · ·	<b>-</b>			
11 Does the organization operate gaming activities with nonmembers?	11		es the organization operate gaming activities				11
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		ls t	he organization a grantor, beneficiary or tri		mber of a partnership o	r other entity formed to	<b>3</b>

				YES  NO
<b>13</b> In	ndicate the percentage of gaming activity operated in			
аT	he organization's facility	13a	ક	
bΑ	n outside facility	13b	*	
14 E	inter the name and address of the person who prepares the organization's gaming/special eve			
_	was the following and dedicase of the person time property the organization's gaming/special eve	into books and record.		
N	lame ►			
	lame			
Α	ddress· ►			
	radress. F			
<b>15</b> a D	oes the organization have a contact with a third party from whom the organization receives go	aming revenue?	15	
	'Yes,' enter the amount of gaming revenue received by the organization \$			
- ··	f gaming revenue retained by the third party \$	and the amoun		
	'Yes,' enter name and address of the third party			
•	100, onto hame and address of the time party			
N	lame ▶			
	lame		· <del>-</del> -	
Δ	ddress· ►			
, ,	vadress.			
<b>16</b> G	Saming manager information			
	authing theriager information			
N	lame ►			1
'	lame		· <b>-</b> -	
G	Saming manager compensation   \$			:
C	adming manager compensation > 3			
D	Description of services provided >			
U	Description of services provided		· — —	
Г	Director/officer Employee Independent contractor			
Ĺ	Director/officer Employee Independent contractor			
17 N	Applications distributions			:
17 M	Mandatory distributions		-	Marine Services
a Is	s the organization required under state law to make charitable distributions from the gaming p	roceeds to retain the	-	
	tate gaming license?		17	a
	Enter the amount of distributions required under state law to be distributed to other exempt org	janizations or spent in	tne	
	organization's own exempt activities during the tax year   \$	<u> </u>		
BAA	TEEA3703 02/05/10	Schedule G (Fo	orm 990 or '	990-EZ) 2009

06-1359296

Page 3

Schedule G (Form 990 or 990-EZ) 2009 HORD FOUNDATION INC

# SCHEDULE I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

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1	•
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OMB No 1545-0047

Employer identification number Department of the Treasury Internal Revenue Service Name of the organization

	750206	
HORD FOUNDATION INC	1333630	
Rand General Information on Grants and Assistance		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	X Yes	Ŭ □
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States		
	2	

(h) Purpose of grant or assistance Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (g) Description of non cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable 2 Enter total number of section 501(c)(3) and government organizations (b) EIN 1 (a) Name and address of organization or government 11111 1 1 1 1 ı 1 1 1 1 Part II

Schedule I (Form 990) 2009

TEEA3901 02/10/10

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

3 Enter total number of other organizations

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. 06-1359296 HORD FOUNDATION INC Schedule I (Form 990) 2009 Part III

•

Page 2

(f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) PAYMENTS ARE MADE PAYABLE TO THE STUDENT AFTER THEY SHOW EVIDENCE. (d) Amount of non-cash assistance OF COLLEGE ENROLLMENT, SCHEDULE AND TRANSCRIPTS. 190,500 (c) Amount of cash grant 94 (b) Number of recipients (a) Type of grant or assistance COLLEGE SCHOLARSHIPS Pt\_I\_Line\_2\_ Pt\_I\_Line\_2

BAA

Schedule I (Form 990) 2009

#### SCHEDULE O (Form 990)

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#### **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

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HORD FOUNDATION INC	Employer identification number 06-1359296
MONE TOURDATION INC	1333230
Pt_VI-B, Line 11A RETURN IS REVIEWED BY TREASURER BEFORE FILING	
Pt_VI-C, Line 19 INFORMATION AVAILABLE DURING BUSINESS HOURS	
	<b></b>
<del>-</del>	
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### The Hord Foundation, Inc. Scholarship Award October 2009 through September 2010

Memo	Amount	Balance
•	500.00	500.00
	•	1,500.00
	-	2,500.00
•		5,000 00
	_ *	6,500 00
•		9,000.00
		11,500.00
•	•	13,500.00 14,500.00
		16,000 00
		18,500.00
•	·	19,500.00
	-	21,000 0
		23,000.00
		24,500.00
		27,500 0
Carol Crouch	•	32,500.00
Kenneth Crouch		35,000.00
Martina Crouch	2,500.00	37,500.0
Raymond Crouch	2,500.00	40,000 00
Genelle Daniels	1,000.00	41,000 0
Leighton Duncan	2,500.00	43,500.00
CAITLIN EAGLIN	2,500.00	46,000.00
Alycia Easter	3,000.00	49,000 00
Ashleigh Edwards	1,500.00	50,500 00
Chanenca Evuen	2,000.00	52,500.0
Michael Ewel	1,000.00	53,500 0
	•	56,000.0
	•	58,000.00
•		60,000.00
•	· ·	61,000 00
	•	62,500.00
	•	63,500.00
		66,500 00
•		69,000.00
	· · · · · · · · · · · · · · · · · · ·	71,000.00
	•	74,500.00 77,000.00
		78,000.00
	-	80,500.00
· · · · · · · · · · · · · · · · · · ·		81,500.00
•		82,500.00
	·	83,500 00
	·	84,500 00
		86,000 00
		87,000 00
	2,000.00	89,000 00
Terrance Little		90,000.00
Keon Marrero	1,000.00	91,000 00
Marjorie Maxi	2,000.00	93,000.00
Kyle McFarland	2,000.00	95,000.00
Jessica McGee	1,000.00	96,000.00
Chevon Miles	2,500.00	98,500.00
Donald Miller	1,500.00	100,000 00
Andrea Minor	3,000.00	103,000.00
Manuela Moudourou	2,500.00	105,500.0
Vincent Mourning	1,500 00	107,000.00
		108,500.0
Eduardo Nunez	2,500.00	111,000.0
Emmanuel Omokaro	2,000.00	113,000.0
Lynda Omokaro	2,500.00	115,500.0
Dave Osei	1,000.00	116,500.00
RamonePalmer	2,250.00	118,750.00
	2 222 22	404 700 00
Malvyn Paulino Maryoly Paulino	3,000.00 3,000.00	121,750.00 124,750.00
	Kenneth Crouch Martina Crouch Raymond Crouch Genelle Daniels Leighton Duncan CAITLIN EAGLIN Alycia Easter Ashleigh Edwards Chanenica Evuen Michael Ewel Shomara Garcia Charisma Green Teyanna Green Ryan Greenfield Jenniqua Groom Ty' Quesha Gumbs Brianne Guyton Jaleesa Harrigan Soralfi Hernandez Jordan Hewett Jasmine Holmes Malcolm Holmes Eriqua Jackson Rachel Janey Richard Janey III Charles Johnson Alyssa Jones Natalie Jorgensen Doree Kennedy Jodelle Lefranc Terrance Little Keon Marrero Marjorie Maxi Kyle McFarland Jessica McGee Chevon Miles Donald Miller Andrea Minor Manuela Moudourou Vincent Mourming Obiageli Nneji Eduardo Nunez Emmanuel Omokaro Lynda Omokaro Lynda Omokaro Dave Osei	Smone Anderson   1,000.00   Daryl Baptiste   1,000.00   Stephanie Baxter   2,500.00   Julia Beck   1,500.00   Destiny B2ilille   2,500.00   Stephanie Baxter   2,500.00   Destiny B2ilile   2,500.00   Bailey Brown   2,000.00   Channelle Brown   1,000.00   Channelle Brown   1,500.00   Ryan Brown   1,500.00   Ryan Brown   1,500.00   Ryan Brown   1,500.00   Ryan Brown   1,500.00   Chase Caldwell   1,500.00   Chase Caldwell   1,500.00   Chase Caldwell   1,500.00   Chase Caldwell   1,500.00   Christina Conway   3,000.00   Carol Crouch   5,000.00   Christina Conway   3,000.00   Carol Crouch   5,000.00   Raymond Crouch   2,500.00   Raymond Crouch   2,500.00   Raymond Crouch   2,500.00   Raymond Crouch   2,500.00   CAITLIN EAGLIN   2,500.00   Alycia Easter   3,000.00   CAITLIN EAGLIN   2,500.00   Charisma Green   2,000.00   Charisma Green

## The Hord Foundation, Inc. Scholarship Award

October 2009 through September 2010

Date	Memo	Amount	Balance
8/18/2010	Shavonna Person	1,000.00	126,750 00
8/18/2010	Theodore Ramson	2,250.00	129,000.00
8/18/2010	Cındy Reid	3,000.00	132,000.00
8/18/2010	Vanessa Richards	3,000.00	135,000.00
8/18/2010	Rodney Riley	1,500.00	136,500.00
8/18/2010	Cassandra Rogers	1,000.00	137,500.00
8/18/2010	Desmon Rogers	1,000.00	138,500.00
8/18/2010	Chaquél Roye	2,500.00	141,000.00
8/18/2010	Leighton Roye	5,000.00	146,000.00
8/18/2010	Garensha Sanon	4,000.00	150,000.00
8/18/2010	Paige Scails	1,000.00	151,000.00
8/18/2010	Ashley Scott	2,000.00	153,000.00
8/18/2010	lesha Scott	2,000.00	155,000.00
8/18/2010	Ana Serra	2,500.00	157,500 00
8/18/2010	Brianne Shepard	2,500.00	160,000 00
8/18/2010	Jasmine Singleton	2,000.00	162,000 00
8/18/2010	Sayyid Standford	3,000.00	165,000 00
8/18/2010	Kiamesha Stewart	2,000.00	167,000 00
8/18/2010	Lanssa Strobel-Farmer	2,500.00	169,500.00
8/18/2010	Marina Strobel-Farmer	2,500 00	172,000.00
8/18/2010	Anton Taylor	5,000.00	177,000.00
8/18/2010	Marquise Taylor	2,500.00	179,500.00
8/18/2010	Martinique Taylor	1,000.00	180,500.00
8/18/2010	Joshua Thomas	1,500.00	182,000 00
8/18/2010	NicholasTodman	2,500.00	184,500.00
8/18/2010	Anneka Tyndale	5,000.00	189,500.00
8/18/2010	Rohanna Wagener	1,500.00	191,000 00
8/18/2010	Joseph White	1,000.00	192,000.00
8/18/2010	Danielle Williams	1,500.00	193,500.00
8/18/2010	Summer Williams	2,500.00	196,000.00
otal HF-Award		196,000.00	196,000.00
AL		196,000.00	196,000.00

Less: ReFunds - see [5500.00]

Attachel Schedle

190,500.00

### The Hord Foundation, Inc. Scholarship Award Returned October 2009 through September 2010

Date	Memo	Amount	Balance
HF-Award	d Returned		
9/30/2010	Destiny Billie	-2,500.00	-2,500.00
9/30/2010	Cassandra Rogers	-1,000.00	-3,500.00
9/30/2010	Charles Johnson	-1,000.00	-4,500.00
9/30/2010	Jessica McGee	-1,000.00	-5,500.00
Total HF-A	Award Returned	-5,500.00	-5,500.00
TOTAL		-5,500.00	-5,500.00

THE HORD FOUNDATION, INC.
FINANCIAL STATEMENTS
FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2010

#### **TABLE OF CONTENTS**

#### **Independent Auditor's Report**

#### Financial Statements:

Statement of Financial Position Exhibit "A"

Statement of Activities Exhibit "B"

Statement of Functional Expenses Exhibit "C"

Statement of Cash Flows Exhibit "D"

**Notes to Financial Statements** 

# Samuel N. Wilson, Jr. Certified Public Accountant 1000 Lafayette Boulevard, Suite 408 Bridgeport, Connecticut 06604

Member: Connecticut Society of Certified Public Accountants
American Institute of Certified Public Accountants

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#### INDEPENDENT AUDITOR'S REPORT

To The Board of Directors of The Hord Foundation, Inc. Danbury, Connecticut

We have audited the accompanying statement of financial position of The Hord Foundation, Inc. as of September 30, 2010, and the related statements of activities, functional expenses and cash flows for the fiscal year then ended. These financial statements are the responsibility of the organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Hord Foundation, Inc. as of September 30, 2010 and the changes in its net assets and its cash flows for the fiscal year then ended in conformity with accounting principles generally accepted in the United States of

Samuel N. Wilson Jr. CPA

America.

December 17, 2010\

#### THE HORD FOUNDATION, INC. STATEMENT OF FINANCIAL POSITION SEPTEMBER 30, 2010

Assets Current Assets:	
Cash and Cash Equivalents	\$ <u>26,466</u>
Total Current Assets	26,466
Property & Equipment Total Assets	\$ <u>26,466</u>
Liabilities & Net Assets Current Liabilities:	\$
Net Assets: Unrestricted Net Assets Total Liabilities and Net Assets	<u>26,466</u> \$ <u>26,466</u>

<sup>&</sup>quot;See Accompanying Notes to Financial Statements"

# THE HORD FOUNDATION, INC. STATEMENT OF ACTIVITIES FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2010

	Unrestricted
PUBLIC SUPPORT & REVENUE	
Public Support: Contributions Contribution Contribution-Scholarship Gifts Special Events	\$ 3,000 55,000 123,303 <u>84,501</u> <u>265,804</u>
Revenue: Miscellaneous Income Interest Income Total Public Support And Revenue	10 295 266,109
Expenses: Program Services Management and Gen Total Expenses	230,591 43,085 273,676
Change in Net Assets	(7,567)
Net Assets – Beg. Of Year Net Assets – End of Year	34,033 \$ 26,466

<sup>&</sup>quot;See Accompanying Notes to Financial Statements"

#### THE HORD FOUNDATION, INC. STATEMENT OF FUNCTIONAL EXPENSES FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2010

	Program Services	Management and General	Total (Mem- orandum only)
Scholarship Awards	\$ 190,500	\$ -	\$ 190,500
Fundraising Expense	37,372	-	37,372
Advertising	2,719	-	2,719
Contributions	-	750	750
Travel & Entertainment	-	724	724
Professional Fees	-	25,418	25,418
Membership Fees	-	350	350
Supplies	-	479	479
Telephone	-	462	462
Insurance	-	500	500
Postage	-	2,711	2,711
Printing	-	8,570	8,570
Internet Service Fees	-	250	250
Office Expense	-	1,241	1,241
Fees & License	-	1,380	1,380
Miscellaneous Expense	<u> </u>	<u>250</u>	250
•	\$ <u>230,591</u>	\$ <u>43,085</u>	\$ <u>273,676</u>

<sup>&</sup>quot;See Accompanying Notes to Financial Statements"

Exhibit "D"

#### THE HORD FOUNDATION, INC. STATEMENT OF CASH FLOWS FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2010

Cash Flows from Operating Activities:	
Change In Net Assets Adjustments to reconcile change in net assets	\$ (7,567)
to net cash provided by operating activities:	$\frac{1}{(7,567)}$
Net Cash Provided By Operating Activities	(7,507)
Cash Flows from Investing Activities	-
Cash Flows from Financing Activities	<del></del>
Net Increase in Cash	(7,567)
Cash and Cash Equivalents - Beginning of Year	34,033
Cash and Cash Equivalents - End of Year	\$ <u>26,466</u>

<sup>&</sup>quot;See Accompanying Notes to Financial Statements"

# THE HORD FOUNDATION, INC. NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010

#### Note A - Organization and Summary of Significant Accounting Policies

#### Organization and Nature of Activities

The Hord Foundation, Inc. was established in January 1993 by Noel and Cara E. Hord. The purpose of the foundation is to promote education and enhance career opportunities of young minority students by providing post secondary school scholarships or other financial assistance for educational purposes.

#### Public Support and Revenue

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

All donor-restricted support is reported as unrestricted as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. The Hord Foundation, Inc. had no temporarily or permanently restricted net assets during the fiscal year ended September 30, 2010.

#### **Income Tax Exemption**

The organization is exempt from federal income taxes under the provisions of section 501(a) of the Internal Revenue Code as an entity described in section 501(c)(3). Therefore, no provision for income taxes has been made.

#### **Basis of Accounting**

The financial statements have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, and other liabilities.

#### **Basis of Presentation**

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Statement of Financial Accounting Standards (SFAS) No. 117, Financial Statements of Not-for-Profit Organizations. Under SFAS No. 117, the organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

#### THE HORD FOUNDATION, INC NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010

#### Note A - Organization and Summary of Significant Accounting Policies - continued

#### **Contributed Services**

During the fiscal year ended September 30, 2010, the value of contributed services meeting the requirements for recognition in the financial statements was not material and has not been recorded. In addition, many individuals volunteer their time and perform a variety of tasks that assist the organization but these services do not meet the criteria for recognition as contributed services. The organization receives more than 1,000 volunteer hours per year.

#### Cash and Cash Equivalents

The organization considers all certificates of deposits with a maturity of six months or less when purchased to be cash equivalents.

#### Property and Equipment

The organization follows the practice of capitalizing, at cost, all expenditures for fixed assets. Expenditures for maintenance and repairs are charged to expense as incurred; major betterments are capitalized Depreciation is computed on a straight-line basis over the useful lives of the assets. The organization did not have any capitalized property and equipment as of September 30, 2010.

#### **Functional Allocation of Expenses**

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

#### **Estimates**

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### **Subsequent Events**

Date of Management Evaluation- Management has evaluated subsequent events through December 17, 2010, the date on which the financial statements were available to be issued.

Management has not identified any significant subsequent events requiring disclosure.

#### **Advertising**

Advertising costs are expensed as incurred. During the fiscal year ended September 30, 2010 advertising costs amounted to \$2,719.

# THE HORD FOUNDATION, INC. NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010

#### Note A - Organization and Summary of Significant Accounting Policies - continued

#### **Total Columns**

Total columns are presented to facilitate financial analysis. Data in these columns do not present financial position, results of operations and changes in net assets in conformity with generally accepted accounting principles. Neither is such data comparable to a consolidation.

#### Note "B" - Split Interest Agreement

On December 21, 1998, the foundation became the sole beneficiary of The Hord Foundation Endowment Charitable Trust (the "Trust"), which was created exclusively to support the Foundation's mission.

The Trust Agreement requires the Board of Trustees to distribute at least 85 percent of the Trust's annual net income to the Foundation before the end of the year following the year in which the income was earned. The trust distributed \$55,000 to the Foundation during the fiscal year ended September 30, 2010.

Trust principal approximated \$105,499 as of September 30, 2010 and may also be paid to the Foundation, at the discretion of the Board of Trustees of The Hord Foundation Endowment Charitable Trust.