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Form **990-PF**

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

OMB No 1545 0052

2010

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For cal	endar year 2010, or tax year beginning	, 2010	, and ending	,	
G Che	eck all that apply Initial return Initial	al Return of a former p	ublic charity	Fina	al return
	Amended return	Address	change Name o	change	
	——————————————————————————————————————	· 	ı A	Employer identification nur	nber
THE	JONCADE THOMAS CLEMONS MEMOR	IAL		26-0307357	
	LARSHIP FUND		В	Telephone number (see the	instructions)
	1/2 COMMISSION BLVD.			(337) 839-970)2
LAFA	YETTE, LA 70508		c	If exemption application is	
				1 Foreign organizations, chec	·
H C	heck type of organization: X Section 501	(c)(3) exempt private f		2 Foreign organizations meet	
΄΄ Γ	Section 4947(a)(1) nonexempt charitable t		private foundation _	here and attach computation	
I Fa		ounting method X C		If private foundation status	
		Other (specify)	F	under section 507(b)(1)(A) If the foundation is in a 60	•
► \$		column (d) must be on		under section 507(b)(1)(B)	
Part I				1	
<u> </u>	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces-	expenses per beens	111001110	II IOOITIO	purposes
	sarily equal the amounts in column (a) (see the instructions)				(cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	178,752.			
	2 Ck ► ☐ If the foundn is not reg to att Sch B				
	3 Interest on savings and temporary				
	cash investments	1,131.	1,131.	1,131.	
	4 Dividends and interest from securities				
	5a Gross rents b Net rental income			 	
В	b Net rental income or (loss)				
R E V	6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all				
V	assets on line 6a 7 Capital gain net income (from Part IV, line 2)				
Ė	8 Net short-term capital gain				
U	9 Income modifications				
Ε	10 a Gross sales less returns and		••••••••••••••••••		
	allowances			-	
	b Less Cost of goods sold.			-	
	c Gross profit/(loss) (att sch)				
£107	11 Other income (attach schedule)				
	7.1.4.11	170 000			
33	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.	179,883. 0.	1,131.	1,131.	
=	13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages				
	, ,,		-		
À .	15 Pension plans, employee benefits 16a Legal fees (attach schedule)				
MOV WAY	b Accounting fees (attach sch)			RECEIL	ien —
	c Other prof fees (attach sch)			H KECEI	
UNISTRAT	17 Interest			9	3
ZE T	18 Taxes (attach schedule)(see mstr)				9011 PI
SR R	19 Depreciation (attach				E 3/3/1.
דיינוע 🕆	sch) and depletion			12 3	***************************************
Ň V G E	20 Occupancy			i OGDEN	ا ال
_	21 Travel, conferences, and meetings	70			`
A E N X D P	22 Printing and publications23 Other expenses (attach schedule)	78.			
ν P E	23 Other expenses (attach schedule) SEE STATEMENT 1	22,645.			
N S E	24 Total operating and administrative				
S	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid STMT 2	22,723. 44,250.		<u> </u>	44 250
		44,450.			44,250.
	26 Total expenses and disbursements. Add lines 24 and 25	66,973.	0.	0.	44,250.
	27 Subtract line 26 from line 12:	,			,
	a Excess of revenue over expenses	112 010			
	and disbursements	112,910.	1 1 2 1		
	b Net investment income (if negative, enter -0) C Adjusted net income (if negative, enter 0)		1,131.	1,131.	
RAA F	or Paperwork Reduction Act Notice, see the	Instructions			Form 990 PF (2010)
2~~ L	or rapermork reduction Act Notice, See the	manuchons.	TEE.	A0504L 07/23/10	Form 990-PF (2010)

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Par	t II	Balance Sheets	column should be for end-of-year amounts only	beginning of year	· · · · · · · · · · · · · · · · · · ·	or year
		····	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		,	020 507	251 202	251 222
	2	Savings and tempora	ary cash investments	238,507.	351,383	. 351,383.
	3	Accounts receivable				1
	١.,	Less allowance for d	loubtrul accounts		··-	
	4	Pledges receivable				1
	_	Less allowance for di Grants receivable	ioubilul accounts			
	5					-
	6	disqualified persons (attack	ers, directors, trustees, and other h schedule) (see the instructions)			
	7	Other notes and loans rece	· · · · · · · · · · · · · · · · · · ·			
A		Less, allowance for d	loubtful accounts			
Š	8	Inventories for sale o	r use			
A S E T S	9	Prepaid expenses an	d deferred charges			
Ś	10:	a Investments – U.S. a obligations (attach so	and state government chedule)			
	1	o Investments — corporate s	tock (attach schedule)			
	(c Investments — corporate b	onds (attach schedule)			
	11	Investments – land, l equipment: basis	buildings, and			
		Less accumulated deprecia (attach schedule)	▶			
	12	Investments - mortg	age loans			
	•	Investments - other	,			
	14	Land, buildings, and	equipment: basis			
		Less accumulated deprecta (attach schedule)	-			
		Other assets (describ Total assets (to be of see instructions. Also	ompleted by all filers -	238,507.	351,383	351,383.
Ļ	17	Accounts payable and	d accrued expenses			
Å	18	Grants payable				`
В	19	Deferred revenue				_
Ĺ	20	Loans from officers, directo	ors, trustees, & other disqualified persons			_
Ţ	21	Mortgages and other notes	· · · · · · · · · · · · · · · · · · ·			4
<u>i</u>	22	Other liabilities (describ	e ▶)			4
E S	23	Total liabilities (add	lines 17 through 22)	0.	0.	. [
		Foundations that foll and complete lines 2	ow SFAS 117, check here 4 through 26 and lines 30 and 31.			
N F	24	Unrestricted	j			
EU	25	Temporarily restricted	i i			1
D	26	Permanently restricte	-			1
A B S A L T A		Foundations that do and complete lines 2	not follow SFAS 117, check here ► X 7 through 31.			
E L	27	Capital stock, trust pr	rincipal, or current funds			
TA	28		or land, building, and equipment fund		 	1
OE	29	Retained earnings, accumul	lated income, endowment, or other funds	238,507.	351,383	.]
ŘŠ	30	Total net assets or fu	and balances (see the instructions)	238,507.	351,383	.]
	31		net assets/fund balances	220 507	251 202	1
Par	F EDE	(see the instructions)	ges in Net Assets or Fund Balanc	238,507.	351,383	• [
					<u> </u>	T
1	I ota	I net assets or fund ba of-vear figure reported	lances at beginning of year – Part II, colui on prior year's return)	mn (a), line 30 (must aç	gree with	238,507.
2		r amount from Part I, I			2	112,910.
3		increases not included in line		-	3	
4		lines 1, 2, and 3	· · ·		4	351,417.
5	Decre	ases not included in line 2 (i	temize) <u>SEE STATEMENT</u>	3	5	34.
6_	Tota	I net assets or fund ba	lances at end of year (line 4 minus line 5)	 Part II, column (b), II 	ne 30 6	351,383.

ran	(a) List and describ	e the kınd(s) of property sold (e g., r se, or common stock, 200 shares ML	eal estate,	(b) How acquired P — Purchase D — Donate	se (month, day, year)	(d) Date sold (month, day, year)
1a N		· · · · · · · · · · · · · · · · · · ·		D - Donaud	on	
b	·/	· · · · · · · · · · · · · · · · · · ·				
С			 			
d	•					
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa		(h) Gain or (e) plus (f) m	(loss) ınus (g)
а					· · · · · · · · · · · · · · · · · · ·	
b						
С.						
d e						
	complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69			
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		(I) Gains (Coli gain minus column (than -0-) or Losses (fi	k), but not less
а					 	
b						
С						
d						
е	 					
2 C	apital gain net income or (net	capital loss)	enter in Part I, line 7 ter -0 in Part I, line 7		2	
3 N	let short-term capital gain or (l	oss) as defined in sections 1222(5) a	and (6)			
	Part I, line 8	8, column (c) (see the instructions)			3	
Part 1	V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Incom	e N/A	
Was the	the foundation does not quali	ion 4942 tax on the distributable amount fy under section 4940(e) Do not con	nplete this part.	, 	Yes	No
!	······································	each column for each year, see the		any entries		
С	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets	(d) Distributior (column (b) divided	
	2009					
	2008					
	- 2007					
	2006 -	-				· · · · · · · ·
	2005				<u> </u>	<u>.</u>
2 T	otal of line 1, column (d)				2	
		e 5-year base period — divide the total has been in existence if less than 5			3	
4 E	.nter the net value of noncharit	able-use assets for 2010 from Part >	K, line 5	_	4	
5 M	fultiply line 4 by line 3				5	
6 E	nter 1% of net investment inco	ome (1% of Part I, line 27b)			6	
7 A	dd lines 5 and 6				7	
8 E	nter qualifying distributions fro	om Part XII, line 4			8	
If 	line 8 is equal to or greater the	an line 7, check the box in Part VI, I	ine 1b, and complete that p	art using a 1	% tax rate See the	

Form		6-030 <u>7</u>			Р	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see the <u>i</u> r	nstructi	ons)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary – see instr.)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1				23.
	check here ► and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
_	foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				23.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				23.
6	Credits/Payments:					
а	2010 estimated tax pmts and 2009 overpayment credited to 2010 6a					
b	Exempt foreign organizations — tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9				23.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10				
	Enter the amount of line 10 to be Credited to 2011 estimated tax	► 11				
Par	t VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?		_	1a		<u>X</u> _
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes					
	(see the instructions for definition)?		ļ	1ь		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials	publishe	d	- 1		
	or distributed by the foundation in connection with the activities				-	
	Did the foundation file Form 1120-POL for this year?		ļ.	1c	ļ	<u>X</u>
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation (2) On foundation \$\$\Bigsim \\$\$		0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed on	~ 			
	foundation managers ►\$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	2		<u>X</u>
	If 'Yes,' attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, arti	cles				
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		L	3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		L	4a		X
þ	If 'Yes,' has it filed a tax return on Form 990-T for this year?		L	4b	N	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_	5]	X
	If 'Yes,' attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ŀ			
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	t conflict				
_	with the state law remain in the governing instrument?		-	6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		ļ.	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions)	·	- [
	LA		-			
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		-	8ь	х	
_			.	-	^	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' compared to the second section of the section of the second section of the second section of the section of	or 4942(dete Part	J)(5) [9		Х
						
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses	ıı rıames ——	.	10		Х
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Par	t VII-A Statements Regarding Activities (Continued)			,
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► HTTP://WWW.JONCADECLEMONSMEMORIAL.COM/			
14	The books are in care of ► DAWN QUIBODEAUX Telephone no ► (337)	839	-970)2
	Located at ► 107 1/2 COMMISSION BLVD LAFAYETTE LA ZIP + 4 ► 70508	- <u>-</u> -		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A		
	and enter the amount of tax-exempt interest received or accrued during the year		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ▶			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	-,	,	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 8	a During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? $\qquad \qquad \boxed{X}$ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No			
ŀ	o If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here.			
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
á	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? Yes X No			
	If 'Yes,' list the years ▶ 20, 20, 20,			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see the instructions.)	2b	N	/A
•	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► 20, 20, 20			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? X No			
I	b If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010)	3b	N	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		Х
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Form 990-PF (2010) THE JONCADE THOMAS				307357	Page 6
Part VII-B Statements Regarding Activit		n 4/20 May Be Red	juirea (continue)	<u>a) </u>	
5a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	•	on (section 4945(e))?	Yes	X No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?			X No	
(3) Provide a grant to an individual for travel,	•	• •	∐ Yes [X No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instri	uctions)	Yes	X No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	n of cruelty to children	or animals?		X No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	n a current notice regar	ding disaster assistance	tions	5b	N/A
Organizations relying on a current notice rega	irding disaster assistan	ce check here	▶ [」 	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant?	•	N/A Yes [No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes	XNo	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ctly, on a personal bene	fit contract?	6ь	X
7a At any time during the tax year, was the found	dation a party to a proh	nibited tax shelter transa	ction? Yes	XNo	
b If yes, did the foundation receive any proceed	ls or have any net incor	me attributable to the tra	ا سا		1
Part VIII Information About Officers, D				l Employees	,
and Contractors					
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions t employee benefit plans and deferred compensation	other all	
SEE STATEMENT 4			,		
		0.	().	0.
					
2 Compensation of five highest-paid employee	es (other than those inc	cluded on line 1– see ir	structions). If none,	, enter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit plans and deferred compensation	other all	
NONE			componedion		
					
Total number of other employees paid over \$50,000) TEE AD3064		<u> </u>	F	0 0-PF (2010)

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Par	Information About Officers, Directors, Trustees, Four and Contractors (continued)	idation Managers, Highly Paid E	mployees,
3	Five highest-paid independent contractors for professional services (see i enter 'NONE.'	nstructions). If none,	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NON	E		
	•		
	-		
Total	number of others receiving over \$50,000 for professional services	·	0
	IX-A Summary of Direct Charitable Activities		·
	e foundation's four largest direct charitable activities during the tax year. Include relevant statistic	al information such as the number of	
organı	rations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1	<u>N/A</u>	· 	
			_
2			
3			
4			
Par	t IX-B Summary of Program-Related Investments (see instru	ictions)	
	ribe the two largest program-related investments made by the foundation du	uring the tax year on lines 1 and 2.	Amount
1	<u>N/A</u>		
			:
2			
	ther program-related investments. See instructions		
3			

Form **990-PF** (2010)

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign foi	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
a Average monthly fair market value of securities	1a	004 045
b Average of monthly cash balances	1b	294,945.
c Fair market value of all other assets (see instructions)	1c	204 245
d Total (add lines 1a, b, and c)	1 d	294,945.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	1	
(attach detailed explanation) 1e 0.		•
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	294,945.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	4,424.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	290,521.
6 Minimum investment return. Enter 5% of line 5	6	14,526.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	ating fou	ndations
and certain foreign organizations check here ▶ and do not complete this pa	art.)	
1 Minimum investment return from Part X, line 6	1	14,526.
2a Tax on investment income for 2010 from Part VI, line 5		
b Income tax for 2010 (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	23.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	14,503.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	14,503.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	14,503.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	44,250.
b Program-related investments — total from Part IX-B	1b	11/2001
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
	-	
 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	44,250.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	44,250.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Form 990-PF (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		,		14,503.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only	,		0.	
b Total for prior years. 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2010				,
a From 2005				
b From 2006				
c From 2007				
d From 2008 6, 459.				
e From 2009 22,182.			:	
f Total of lines 3a through e	28,641.]		
4 Qualifying distributions for 2010 from Part	,			
XII, line 4 ► \$ 44,250.				
a Applied to 2009, but not more than line 2a			0.	
· ·	,		· · ·	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2010 distributable amount	0.			14,503.
e Remaining amount distributed out of corpus	29,747.			14,303.
5 Excess distributions carryover applied to 2010	0.		-	0.
(If an amount appears in column (d), the	V •			· · · · · · · · · · · · · · · · · · ·
same amount must be shown in column (a))			-	
6 Enter the net total of each column as			-	, , , , , , , , , , , , , , , , , , , ,
Indicated below:	58,388.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	30,300.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.	-	
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable			j	
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
following the disperse for 2010. Continue to the con-				
f Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			
8 Excess distributions carryover from 2005 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	58,388.			
10 Analysis of line 9	30,300.			
a Excess from 2006	-		ŕ	
b Excess from 2007	,			
c Excess from 2008 6, 459.	• •			
d Excess from 2009 22, 182.				
e Excess from 2010 29,747.				
6 EAGGS HOIT 2010 27, 141.	<u> </u>	1		:

Form 990-PF (2010) THE JONCADE THOM				26-0307357	Page 10
Part XIV Private Operating Foundat					N/A
1a If the foundation has received a ruling or is effective for 2010, enter the date of the	ruling	•	-	`` _ _	
b Check box to indicate whether the foundation		rating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a	ļ				
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	<u> </u>				
c 'Support' alternative test – enter.					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	d \$5,000 or more	e in
Information Regarding Foundation Mana List any managers of the foundation who close of any tax year (but only if they have NONE	gers:	··································	total contributions resection 507(d)(2))	eceived by the found	ation before the
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more o foundation has a 10	f the stock of a corp 0% or greater intere	poration (or an equa est	ally large portion of the	ne ownership of
2 Information Regarding Contribution, Gra Check here ► X if the foundation only requests for funds if the foundation mak complete items 2a, b, c, and d	makes contributions es gifts, grants, etc,	to preselected char (see instructions) to	ritable organizations o individuals or orga	anizations under othe	ot unsolicited er conditions,
a The name, address, and telephone numb	er of the person to v	vhom applications s	should be addressed	i :	
SEE STATEMENT 5					
b The form in which applications should be	submitted and infor	mation and materia	ls they should inclu	de:	
SEE STATEMENT FOR LINE 2A				· · · · · · · · · · · · · · · · · · ·	
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A d Any restrictions or limitations on awards,	such as by geograp	hical areas, charital	ble fields, kinds of i	nstitutions, or other f	actors
SEE STATEMENT FOR LINE 2A	, 3 3 -11		,	,	
DEE STATEMENT FOR LINE ZA		_			

Page 11

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
Recipient		Foundation status of recipient		Amount
	substantial contributor	1 COIPIEIIL		
Name and address (home or business) a Paid during the year .	substantial contributor	recipient		
		<u> </u>		
Total			► 3a	
b Approved for future payment Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Form 990-PF (2010)

				1		
Enter gross	amounts unless otherwise indicated	(a) Business code	d business income (b) Amount	(c) Exclu- sion	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (see the instructions)
1 Progra	am service revenue			code		(,
a	•					
b						
d						
f						
g Fees	and contracts from government agencies					
2 Memb	pership dues and assessments					
3 Interest	t on savings and temporary cash investments					1,131.
	ends and interest from securities				-	
5 Net re	ental income or (loss) from real estate:				=	
	financed property					
	ebt-financed property					
	ital income or (loss) from personal property					
	investment income			1		
	(loss) from sales of assets other than inventory			+ +		
	acome or (loss) from special events			+		
	profit or (loss) from sales of inventory			+		
	revenue.	l		 		
		 	· · · · · · · · · · · · · · · · · · ·			<u> </u>
a		 		 		'
		 		- 		
		 	 	+		<u> </u>
		 		 -		
e				ļ		
	4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1				1 1 1 1 1 1
12 Subto	otal Add columns (b), (d), and (e)				10	1,131.
12 Subto	Add line 12, columns (b), (d), and (e)			<u> </u>	13	1,131. 1,131.
12 Subto 13 Total. (See works	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation					
12 Subto 13 Total. (See works	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
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12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
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12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.
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12 Subto 13 Total. (See works Part XVI-	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the	Accomplis			s	1,131.

Form 990-PF (2010) THE JONCADE THOMAS CLEMONS MEMORIAL 26-0307357 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

									Yes	No
1 Did	d the organization directl scribed in section 501(c)	y or indirectly e	engage in any of the	e following wit	th any other	er organizatio	n 507			
rel	ating to political organiz	ations?	ulei ulali section s	our(c)(s) organ	iizalioris) i	or in section :	027,			
a Tra	ansfers from the reportin	a foundation to	a noncharitable ex	xempt organiz	ation of:				"	
	Cash .			-				1a (1)	ľ	Х
	Other assets							1a (2)		X
	ner transactions									
	Sales of assets to a no	oncharitable exe	empt organization					16 (1)		Х
	Purchases of assets from			ızatıon				1b (2)		X
	Rental of facilities, equ		. •	Zation				1b (3)		X
٠,	Reimbursement arrang	•	1 433013					1b (4)		X
` '	(5) Loans or loan guarantees									X
(6) Performance of services or membership or fundraising solicitations								1b (5)		X
	aring of facilities, equipr		•		000			1b (6) 1c		X
C SII	armig or racinities, equipi	nent, maning is	515, 001c1 assets, 0	n paid employ	CCS			10		
d If t	he answer to any of the	above is 'Yes.'	complete the follo	wina schedule	. Column ((b) should alv	vavs show the fair n	narket vali	ue of	
the	goods, other assets, or	services given	by the reporting for	oundation. If th	e foundati	ion received I	ess than fair marke	t value in		
	y transaction or sharing			-						
(a) Line i	no (b) Amount involved	(c) Name	of noncharitable exempt	organization	(a) D	escription of tran	sfers, transactions, and	sharing arrar	ngemen	is
N/A										
					 					
		<u> </u>								
										
							 .			
							•			
		 								
		<u> </u>			ļ					
				 						
	<u> </u>									
		ļ								
						<u></u>				
		<u></u>								
2a ls 1	the foundation directly o	r indirectly affili	ated with, or relate	ed to, one or m	nore tax-ex	xempt organi:	zations			
des	scribed in section 501(c)	of the Code (o	ther than section 5	01(c)(3)) or in	section 5	27?		Yes	X	No
b If '	Yes,' complete the follow	wing schedule								
	(a) Name of organiza	ation	(b) Type o	of organization		(0) Description of rela	ationship		
N/A										
	Inder penalties of penjury, I decl	are that I have exam	ined this return, including	g accompanying so	hedules and s	statements, and to	the best of my knowledge	and belief, i	t is true,	,
	correct, and complète Déclaration	on or preparer (other	than taxpayer or fiduciar	y) is based on all if	ntormation of	wnich preparer ha	is any knowledge			
Sign	Shull)	1					
Here	Jun	O X	M				PRESIDENT			
	Signature of officer or truste		I 6		Date	Data	Title	DTIE		
	Print/Type preparer's n	// / 0 .	Breparer saig			Date / / /	Check if X if	PTIN		
Paid	SPEPER J	ARSEMENT	STEPHEN		MENT	5/11/1	self-employed	N/A		
Prepar	er Firm's name	ARSEMENT I	REDD & MOREL				Firm's EIN. ► N/A	-	_	
Use O		701 ROBLE		TE 200						
		LAFAYETTE,	LA 70503				Phone no (337	984-	7010	
BAA								Form 99	0-PF	(2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

Name of the organization THE JONCADE	THOMAS CLEMONS MEMORIAL	Employer identification number					
SCHOLARSHIP	FUND	26-0307357					
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organiz						
	4947(a)(1) nonexempt charitable trust 527 political organization	not treated as a private foundation					
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust 501(c)(3) taxable private foundation	treated as a private foundation					
Check if your organization is covered to Note. Only a section $501(c)(7)$, (8), or	by the General Rule or a Special Rule . (10) organization can check boxes for both the Gen	eral Rule and a Special Rule. See instructions.					
General Rule							
X For an organization filing Form 990 contributor (Complete Parts I and), 990-EZ, or 990-PF that received, during the year, II.)	\$5,000 or more (in money or property) from any one					
Special Rules							
509(a)(1) and $170(b)(1)(A)(vi)$, and	in filing Form 990 or 990-EZ, that met the 33-1/3% s d received from any one contributor, during the year 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Co	a contribution of the greater of (1) \$5,000 or					
aggregate contributions of more th) organization filing Form 990 or 990-EZ, that receiv ian \$1,000 for use <i>exclusively</i> for religious, charitabl n or animals. Complete Parts I, II, and III	ed from any one contributor, during the year, e, scientific, literary, or educational purposes, or					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc, purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively							
religious, charitable, etc, contributi	ons of \$5,000 or more during the year	> \$					
Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							
BAA For Paperwork Reduction Act N 990EZ, or 990-PF.	Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2010)					

	b (FOIII 990, 990-EZ, 01 990-PF) (2010)	Page Is	
Name of org THE JO	ONCADE THOMAS CLEMONS MEMORIAL	1 '	oyer identification number -0307357
Part I	Contributors (see instructions)	· .	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LINEAR CONTROLS, INC. 107 1/2 COMMISSION BLVD. LAFAYETTE, LA 70508	\$50 <u>,</u> 00	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ANGELLA MEYERS 1404 PRYTORIA ST. APT. H3 NEW ORLEANS, LA 70130	\$ <u>5,50</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) , Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	JEFF DELAHOUSSAYE 1060 MARION DR. BROUSSARD, LA 70518	\$ <u>5,40</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	 	\$	Person Payroll Noncash

(Complete Part II if there is a noncash contribution)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

of 1 of Pa

THE JONCADE THOMAS CLEMONS MEMORIAL <u>26</u>-0307<u>357</u> Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10)

	organizations aggregating more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry						
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of <i>exclusively</i> religious, ch (Enter this information once S	iaritable, etc, ee instructions	s.) • \$ N			
(a) No. from Part I	, (b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	N/A						
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relat	ionship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	Transferee's name, addres	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e)					
	Transferee's name, addres	Relat	ionship of transferor to transferee				
**							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			ionship of transferor to transferee			

2010

FEDERAL STATEMENTS

SCHOLARSHIP FUND

THE JONCADE THOMAS CLEMONS MEMORIAL

PAGE 1

26-0307357

STATEMENT 1. FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A)	(B) NET	(C)	(D)
	EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE
	PER BOOKS	INCOME	NET INCOME	PURPOSES
BANK CHARGES BUSINESS REGISTRATION FEES CONTRACT SERVICES CREDIT CARD FEES FUND RAISING	\$ 65. 5. 800. 965. 20,810. TOTAL \$ 22,645.	\$0.	\$ 0.	<u>\$</u> 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

ORGANIZATIONAL STATUS OF DONEE:

DONEE'S NAME:

RELATIONSHIP OF DONEE:

AMOUNT GIVEN:

DONEE'S ADDRESS:

CLASS OF ACTIVITY:

SCHOLARSHIP

DANIELLE RICHARDELLE 14928 DOVE ROAD

ERATH, LA 70533

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

INDIVIDUAL

SCHOLARSHIP

GAGE RODRIGUEZ 163 RODRIGUEZ LANE FRANKLIN, LA 70538

NONE

INDIVIDUAL

SCHOLARSHIP

MARQUEL BROUSSARD 100 TERRY DRIVE LAFAYETTE, LA 70501

NONE

INDIVIDUAL

SCHOLARSHIP DESMOND SAM

106 BABBLING BROOK DRIVE

LAFAYETTE, LA 70506

NONE

INDIVIDUAL

750.

6,000.

1,500.

Ś

SCHOLARSHIP NICOLE BRISCOE

2532 HWY 93 CARENCRO, LA 70520

NONE

NONE

INDIVIDUAL

750.

2010 FEDERAL STATEMENTS THE JONCADE THOMAS CLEMONS MEMORIAL			 PAGE 2
	S	CHOLARSHIP FUND	26-0307357
STATEMENT 2 (CONTINUI FORM 990-PF, PART I, LIN CONTRIBUTIONS, GIFTS,	IE 25		
AMOUNT GIVEN:			\$ 1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP CHELSEA FLUGENCE P.O. BOX 193 BROUSSARD, LA 70518	
RELATIONSHIP OF DONE ORGANIZATIONAL STATUS AMOUNT GIVEN:	L:	NONE	1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP AARON COULON 1679 IRISH BEND RD FRANKLIN, LA 70538	
RELATIONSHIP OF DONE ORGANIZATIONAL STATU: AMOUNT GIVEN:		NONE INDIVIDUAL	6,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP ANH VAN TA 913 SYDNEY ST. NEW IBERIA, LA 70560	
RELATIONSHIP OF DONE ORGANIZATIONAL STATU: AMOUNT GIVEN:	Ε:	NONE INDIVIDUAL	1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP BLAKE MILSON 314 TEAKWOOD DR YOUNGSVILLE, LA 70592	
RELATIONSHIP OF DONE ORGANIZATIONAL STATU: AMOUNT GIVEN:	E: S OF DONEE:	NONE INDIVIDUAL	1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP CLARA BOUTEE 4608 BULL ISLAND RD. NEW TRERIA LA 70560	
RELATIONSHIP OF DONE ORGANIZATIONAL STATU: AMOUNT GIVEN:	E: S OF DONEE:	NEW IBERIA, LA 70560 NONE INDIVIDUAL	1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP CLAIRE CAILLIER 507 LOUVETEAU RD. CARENCRO LA 70520	
RELATIONSHIP OF DONE ORGANIZATIONAL STATUS	E: S OF DONEE:	NONE INDIVIDUAL	1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP KATIE DOMINGUE 3136 CARDINAL RD EARTH, LA 70533 NONE	
RELATIONSHIP OF DONE ORGANIZATIONAL STATU	E: S OF DONEE:	NONE INDIVIDUAL	

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THE JONG	CADE THOMAS CLEMONS MEMORIAL SCHOLARSHIP FUND	 26-0307357
STATEMENT 2 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANT	rs	
AMOUNT GIVEN:		\$ 1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SCHOLARSHIP MARYAM QAMHIYEH 404 GUILBEAU RD APT 142-H LAFAYETTE, LA 70506	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	6,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SCHOLARSHIP ROSS DUHON 8300 LAKE PEIGNEUR RD NEW IBERIA, LA 70560	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	750.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SCHOLARSHIP DASHONDA LEDET 817 CAROL ST NEW IBERIA, LA 70560	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	750.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SCHOLARSHIP KARYNN VERRETT 126 PEBBLE BEACH DR YOUNGSVILLE, LA 70592	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	750.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SCHOLARSHIP LAUREN LANGE 4025 PICKETT RD ERATH, LA 70533	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	750.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE:	SCHOLARSHIP LAVELL JOHNSON 603 BEACON DR YOUNGSVILLE, LA 70592 NONE	

NONE INDIVIDUAL

750.

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: SCHOLARSHIP

MATTHEW DESHOTEL 15535 W PERSHING RD KAPLAN, LA 70548

NONE

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

010		DERAL STATEMENTS DE THOMAS CLEMONS MEMORIAL		PAGE 4
 	 .	SCHOLARSHIP FUND		26-030735
STATEMENT 2 (CON FORM 990-PF, PART CONTRIBUTIONS, GI	I, LINE 25			
AMOUNT GIVEN:			\$	750.
CLASS OF ACTIVITY DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF I		SCHOLARSHIP RUNIQA DARBY 122 LOU ST FRANKLIN, LA 70538 NONE		
ORGANIZATIONAL ST AMOUNT GIVEN:	TATUS OF DONEE:	INDIVIDUAL		750.
CLASS OF ACTIVITY DONEE'S NAME: DONEE'S ADDRESS:	Y:	SCHOLARSHIP SHAWNTAE BATISTE P O BOX 572		
RELATIONSHIP OF I ORGANIZATIONAL ST AMOUNT GIVEN:		NEW ORLEANS , LA 70122 NONE INDIVIDUAL		750.
CLASS OF ACTIVITY DONEE'S NAME: DONEE'S ADDRESS:	Υ:	SCHOLARSHIP TAYLOR DESORMEAUX 704 N SEVERIN ST ERATH, LA 70533		
RELATIONSHIP OF IORGANIZATIONAL STAMOUNT GIVEN:		NONE INDIVIDUAL		750.
CLASS OF ACTIVITY DONEE'S NAME: DONEE'S ADDRESS:		SCHOLARSHIP TUAN TRAN 917 SANTA CLARA NEW IBERIA, LA 70563		
RELATIONSHIP OF I ORGANIZATIONAL ST AMOUNT GIVEN:	DONEE: FATUS OF DONEE:	NONE INDIVIDUAL		3,000.
CLASS OF ACTIVITY DONEE'S NAME: DONEE'S ADDRESS:	Υ:	SCHOLARSHIP ANDREW LEBLANC 608 WEST CHURCH ST DELCAMBRE , LA 70528		
RELATIONSHIP OF I ORGANIZATIONAL S' AMOUNT GIVEN:		NONE INDIVIDUAL		3,000.
			TOTAL \$	44,250.
				<u>.</u>

FEDERAL INVESTMENT TAXES

TOTAL \$ 34.

2010

FEDERAL STATEMENTS

THE JONCADE THOMAS CLEMONS MEMORIAL SCHOLARSHIP FUND

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26-0307357

STATEMENT 4 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOUR PER WEEK DEVOT		COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
ANDRE' CLEMONS 107 1/2 COMMISSION BLVD LAFAYETTE, LA 70508	PRESIDENT 0	\$	0.	\$ 0.	\$ 0.
DAWN QUIBODEAUX 107 1/2 COMMISSION BLVD LAFAYETTE, LA 70508	TREASURER 0		0.	0.	0.
CAROLYN SUIRE 203 SUWANEE RD. LAFAYETTE, LA 70503	SECRETARY 0		0.	0.	0.
DAHRIE KOENIG 107 1/2 COMMISSION BLVD LAFAYETTE, LA 70508	DIRECTOR 0		0.	0.	0.
SELENA MONTIT 107 1/2 COMMISSION BLVD LAFAYETTE, LA 70508	DIRECTOR 0		0.	0.	0.
DOROTHY DORE 107 1/2 COMMISSION BLVD LAFAYETTE, LA 70508	DIRECTOR 0		0.	0.	0.
	TO	TAL \$	0.	<u>\$ 0.</u>	<u>\$ 0.</u>

STATEMENT 5 FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

THE JONCADE THOMAS CLEMONS MEMORIAL DONNA SIMON

STREET ADDRESS:

107 1/2 COMMISSION BLVD.

CITY, STATE, ZIP CODE:

LAFAYETTE, LA 70508

TELEPHONE:

FORM AND CONTENT:

PRESCRIBED APPLICATION FORM INCLUDING GRADES, ACT SCORES, 2 REFERENCE LETTERS.

SUBMISSION DEADLINES:

2/28

RESTRICTIONS ON AWARDS:

MUST BE ATTENDING COLLEGE IN LOUISIANA, APPLICANTS ARE

WITHIN THE ACADIANA AREA, SOUTH CENTRAL LOUISIANA.