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## SCANNEDOCT 1 0 2016

## ▶ Foim **990-PF**

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052 2010

Section 457(1)  Controllations, gifts, grants, for reserved 2 Consider the control of the cont	For	cale	ndar year 2010, or tax yea	ar beginning		, and er	nding		
Name of foundation	G (	Check	call that apply:	Initial return	Initial return of a fo	rmer public c	harity	Final return	1
HARMONY FOUNDATION  Number and area for FO Daw surfavor if main and advanced to seed address)  1.240 HARMONY STREET  City or town, safe, and 2P code  NEW ORLEANS, LA 70115  Section 4947(a)(1) nonexempt charable trust   Other lassable provate foundation  Is section 4947(a)(1) nonexempt charable trust   Other lassable provate foundation  Is fair marked value of all assets and ord year   Accounting method:   Lik Cash   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting method:   Lik Cash   Accounting the main of year   Accounting the main of year   Accounting method:   Lik Cash   Accounting the year   Lik Cash   Accounting the yea				Amended return	Address chan	ge		Name change	
Telephone number   Total nandation and selection   Total nandation   Total nandati	Na	me o	f foundation			2		A Employer identification	n number
City or Inversion State of Processing State State State State of Processing State			HARMONY FO	OUNDATION				72-1312647	7
Control counts   State , and ZiP code	Nur	nber a	and street (or P O box number	if mail is not delivered to street	address)		Room/suite		
NEW ORLEANS, LA 701.15    Check type of organization: X   Section 501(c)(3) exempt private foundation   Section 4947(a)(1) nonexempt charitable trust   Other toxable private foundation   Fair market value of all assets at end of year   J Accounting method:   X   Continuing of the toxable private foundation   Fair market value of all assets at end of year   J Accounting method:   X   Continuing of the toxable private foundation   Fair market value of all assets at end of year   J Accounting method:   X   Continuing of the toxable private foundation   Fair market value of all assets at end of year   J Accounting method:   X   Continuing of the toxable private foundation   Fair market value of all assets at end of year   J Accounting method:   X   Continuing of the toxable private foundation   Fair market value of the toxable private foundation   Fa			<u>1240 HARMO</u>	ONY STREET				504-895-19	080
Technical type of organization: X   Section 501(s)(3) exempt private foundation   Control type of the stable private foundation   Term market value of all assets at end of year   1 Acounting method:   X   Cash   Accrual   (from Part II, col. (c), line 16)   Term market value of all assets at end of year   1 Acounting method:   X   Cash   Accrual   (from Part II, col. (c), line 16)   Term market value of all assets at end of year   1 Acounting method:   X   Cash   Accrual   (from Part II, col. (c), line 16)   Term market value of all assets at end of year   1 Acounting method:   X   Cash   Accrual   (from Part II, col. (c), line 16)   Term market value of all assets at end of year   1 Acounting method:   X   Cash   Accrual   (from Part II, col. (c), line 16)   Term market value of all assets at end of year   (a) Revenue and Expenses   (b) Revenue and Expenses   (a) Revenue and (b) Revenue and (c) Revenue	Cit	or t						C If exemption application is p	pending, check here
Section 4947(a)(1) nonexempt charitable trust   □ Other travable private foundation   Ell private foundation status was terminated under section 507(b)(1)(A), check here   □   Fair market value of all assests and red year   1 / Countri (off must be on cash basis)   T / 452   □ Other (specify)   Part I, column (off must be on cash basis)   Filt the foundation status was terminated under section 507(b)(1)(B), check here   □   Other (specify)   Part I, column (off must be on cash basis)   If the foundation status was terminated under section 507(b)(1)(B), check here   □   Other (specify)   Part I, column (off must be on cash basis)   If the foundation status was terminated under section 507(b)(1)(B), check here   □   Other (specify)   Part I, column (off must be on cash basis)   If the foundation status was terminated under section 507(b)(1)(B), check here   □   Other (specify)   O	L							D 1. Foreign organization	s, check here
Fair market value of all assets at end of year   J. Accounting method:   Cash   Accrual   Information   Color (s), line 16]   Cash   Accrual   Information   Cash   Cash   Accrual   Information   Cash   Cas	H	_						Z. Foreign organizations me check here and attach co	eeting the 85% test, omputation
Fair market Value of all assets at end of year   1 Accounting method:				<del></del>	<del></del>			E If private foundation sta	itus was terminated
Part   Asiys of Revenue and Expenses (the total of amounts in colourne (a), and the concept beautiful (b) Net investment (c) Adjusted net income (c) (c) Adjusted net in				·   —	•	Accru	ual	under section 507(b)(1	)(A), check here
Part I   Analysis of Revenue and Expenses (new part includes and the second s						<del></del>			
1 Contributions, grifs, grants, etc., received   2 Check   X   3 the foundation and requel to state Sc 8   3 cash investments   4 Dividends and interest from securities   235			L Analysis of Bayerys as	1 , 452   (Part I, colu		oasis.)		under section 507(b)(1	
2 Chack ►	P8	art I	(The total of amounts in colunecessarily equal the amoun	in Expenses imns (b), (c), and (d) may not its in column (a) )					for charitable purposes
Interest consumers and temporary		1						N/A	
A   Dovidends and interest from securities   5a Gross rents		2	Check X If the foundation	on is not required to attach Sch. B					
Sa Gross rents		3	Interest on savings and tempo cash investments	orary					
D Not rental moome or (loss)   C   C   C   C   C   C   C   C   C		4	Dividends and interest fro	om securities	235.		235.		STATEMENT 1
Section   Contract		5a	Gross rents						
Day		b	Net rental income or (loss)						
9 Net snort-term capital gain 9 Income modifications 10a and allowances  b Less Coat of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 235. 235.  13 Compensation of difficers, directors, trustees, etc  4 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes ○ ○ ○ ? ○ ○ ? ○ ○ STMT 2 2 2. 0. 0. 0.  17 Interest 18 Taxes ○ ○ ○ ○ ? ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 8 Excess of revenue over expenses and disbursements N/A	ō	6a	Net gain or (loss) from sale of	assets not on line 10					
9 Net snort-term capital gain 9 Income modifications 10a and allowances  b Less Coat of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 235. 235.  13 Compensation of difficers, directors, trustees, etc  4 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes ○ ○ ○ ? ○ ○ ? ○ ○ STMT 2 2 2. 0. 0. 0.  17 Interest 18 Taxes ○ ○ ○ ○ ? ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 8 Excess of revenue over expenses and disbursements N/A	ē	I _	assets on line 6a						
9 Net snort-term capital gain 9 Income modifications 10a and allowances  b Less Coat of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 235. 235.  13 Compensation of difficers, directors, trustees, etc  4 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes ○ ○ ○ ? ○ ○ ? ○ ○ STMT 2 2 2. 0. 0. 0.  17 Interest 18 Taxes ○ ○ ○ ○ ? ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 8 Excess of revenue over expenses and disbursements N/A	Reve	[	· · ·	•			0.		
10a and allowances   b   Less Cost of goods sold		1	, ,	ın				ļ	
e Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 235. 235.  13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 5. 2.9.9.2 1.1 STMT 2 2.0 Cocupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total expenses STMT 3 25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		1	Gross sales less returns						
11 Other income   12   Total. Add lines 1 through 11   235.   235.       13   Compensation of officers, directors, trustees, etc   0. 0. 0.   0.     14   Other employee salaries and wages       15   Pension plans, employee benefits       16   Legal fees         17   Interest         18   Taxes   0. 0.   0.     19   Depreciation and depletion       10   Occupancy       17   Interest       18   Taxes   0. 0.   0.     19   Depreciation and depletion       10   Occupancy       17   Interest       18   Taxes   0. 0.   0.     19   Depreciation and depletion       10   Occupancy       11   Total operating and administrative       12   Excess Add lines 13 through 23   97.   95.   0.     24   Total operating and administrative       25   Excess Add lines 13 through 23   2,500.   2,500.     27   Subtract line 26 from line 12:       28   Excess of revenue over expenses and disbursements       29   Depreciation and disbursements       20   Occupancy       21   Total operating and administrative       22   Printing and publications       23   Total operating and administrative       24   Total operating and administrative       25   Occupancy       26   Total expenses and disbursements       27   Subtract line 26 from line 12:       3   Excess of revenue over expenses and disbursements       27   Depreciation and depletion       28   Occupancy       29   Occupancy       20   Occupancy       21   Total operating and administrative       20   Occupancy       21   Total operating and administrative       22   Printing and publications       23   Other expenses       24   Total operating and administrative       27   Subtract line 26 from line 12:       3   Excess of revenue over expenses and disbursements       27   Depreciation and depletion       28   Occupancy       29   Occupancy       20   Occupancy       21   Total operating and administrative       20   Occupancy       21   Total operating and administrative       22   Occupancy       3   Occupancy       4   Occupancy       5   Occupancy       5   Occupancy       6		b	Less Cost of goods sold						
12   Total Add lines 1 through 11   235		C	Gross profit or (loss)						
13 Compensation of officers, directors, frustees, etc   14 Other employee salaries and wages   15 Pension plans, employee benefits   16a Legal fees		11	Other income						
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		_							
15 Pension plans, employee benefits   16a Legal fees   b Accounting fees   c Other professional fees   17 Interest   18 Taxes(*)					0.		0.		0.
16a Legal fees   b Accounting fees   c Other professional fees   17 Interest   18 Taxes   7				•					
17 Interest   18 Taxes   20 9 7   11 STMT 2   2	S			Denetits					
17 Interest   18 Taxes   20 9 7   11 STMT 2   2	J.S.		=						
17 Interest   18 Taxes   20 9 7   11 STMT 2   2	×		-						
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A		,	•	• •			<del></del>		
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	ativ	1		ъъ <b>SТМТ</b> 2	2.		0.		-0-
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	istr				2.				<del>                                     </del>
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	ä								<del>                                     </del>
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	Adı			meetings					<del></del>
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	בַּ			=					
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	ig a		= :		95.		95.		0.
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	atir	24	•						1
25 Contributions, girts, grants paid 2,500.  26 Total expenses and disbursements.  Add lines 24 and 25  2,597.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  2,500.  140.  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  N/A	per		expenses. Add lines 13 ti	hrough 23			95.		0.
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	0	25	Contributions, gifts, grant	ts paid	2,500.				2,500.
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A		26	Total expenses and disb	ursements.			"		
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A			Add lines 24 and 25		2,597.		95.		2,500.
b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A		27	Subtract line 26 from line	12:					
c Adjusted net income (if negative, enter -0-)			•		<2,362.	<u> </u>			
C Adjusted net income (if negative, enter -0-)  023501  N/A						······································	140.		
	0235	) C				*		N/A	L

Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	11,646.	9,286.	9,286.
3 Accounts receivable ►			
Less: allowance for doubtful accounts ▶			ŗ
4 Pledges receivable ►			
Less; allowance for doubtful accounts	-		*
5 Grants receivable	2,964.		
6 Receivables due from officers, directors, trustees, and other			····
disqualified persons			
7 Other notes and loans receivable			
Less: allowance for doubtful accounts			
g 8 Inventories for sale or use		, ·	
9 Prepaid expenses and deferred charges			,
10a Investments - U.S. and state government obligations			- <del></del>
b Investments - corporate stock STMT 4	5,423.	5,423.	8,166.
c Investments - corporate bonds		·	
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans		.,,	
13 Investments - other			
14 Land, buildings, and equipment: basis			
Less accumulated depreciation			
15 Other assets (describe ▶ )			
16 Total assets (to be completed by all filers)	20,033.	14,709.	17,452.
17 Accounts payable and accrued expenses			
18 Grants payable			i
g 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			
□ 22 Other liabilities (describe ►)			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted 25 Temporarily restricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			t
and complete lines 27 through 31.			1
Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	28,608.	28,608.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Retained earnings, accumulated income, endowment, or other funds	<8,575.		>
30 Total net assets or fund balances	20,033.	14,709.	
		_	
31 Total liabilities and net assets/fund balances	20,033.	14,709.	
Part III Analysis of Changes in Net Assets or Fund B	alances		
		<del></del>	
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	30		00 000
(must agree with end-of-year figure reported on prior year's return)	•		20,033. <2,362.>
2 Enter amount from Part I, line 27a	•	2	
3 Other increases not included in line 2 (itemize)		3	0.
4 Add lines 1, 2, and 3	ma processions	4	17,671.
	TS RECEIVABLE	5	2,962.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	14,709.

(a) List and describ-	e the kind(s) of property sold (e. nouse; or common stock, 200 sl	.g., real estate,		( <b>b)</b> I	How ac - Purci - Dona	quired ( hase ition	c) Date ac (mo., day	cquired y, yr.)	(d) Date sold (mo., day, yr.)
1a		· · · · ·							
b NON	€								
C	· · · · · · · ·								
d		·							
e	(0.5			<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					n or (loss) (f) minus (g	])
a	<del></del>								
b	***************************************	ļ							
<u>c</u>				_				·- <u>·</u>	
d		-		$\dashv$					
Complete only for assets showing	rain in column (h) and owned by	v the foundation	on 12/21/60	-		(1)	2 (0-	I (h)	
Complete only for assets showing (				$\dashv$		(I) ( col. (	sains (Co k), but no	l. (h) gain r ot less than	ninus -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any					rom col. (h	
a									_
b									
С						·			
d									
e	*****			_					
2 Capital gain net income or (net capit	al loss) { If gain, also enter-			}	2				
Net short-term capital gain or (loss)	•								
If gain, also enter in Part I, line 8, co		(-).		<i>]</i>					
If (loss), enter -0- in Part I, line 8				Д	3				
Part V   Qualification Und						nent Inco	me		
For optional use by domestic private fo	undations subject to the section	1 494U(a) tax on	i net investment in	come	).)				
f section 4940(d)(2) applies, leave this	part blank.								
Was the foundation liable for the section	1 4942 tax on the distributable a	mount of any ve	ear in the hase ner	ınd?					Yes X No
f "Yes," the foundation does not qualify			•	iou:				'	103 [22] 110
1 Enter the appropriate amount in eac				es.					
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying di	istributions	Net value of no	(c) nchar		use assets	(0	Distribu	(d) ition ratio ded by col. (c))
2009		2,998.			2	0,989.		,	.14283
2008		2,994.			2.	5,076.			.11939
2007		2,989.				7,800.			.10751
2006		2,993.			2	8,654.			.10445
2005		2,496.			2	9,901.			.08347
2 Total of line 1, column (d)							2		.557680
3 Average distribution ratio for the 5-y	ear base period - divide the total	l on line 2 by 5.	or by the number	of ve	ars		$\vdash$		
the foundation has been in existence	•			, 0			3		.11153
	•								
4 Enter the net value of noncharitable-	use assets for 2010 from Part X	, line 5					4		19,076
5 Multiply line 4 by line 3							5		2,128
with the state of					•		-		2,120
6 Enter 1% of net investment income (	1% of Part I, line 27b)						6		1
7 Add lines 5 and 6							,		2 120
7 Add lines 5 and 6			-				7		2,129
B Enter qualifying distributions from P	art XII, line 4		•				8		2,500
If line 8 is equal to or greater than lin See the Part VI instructions.	e 7, check the box in Part VI, lin	e 1b, and comp	olete that part using	g a 19	% tax ra	ate.			
123521 12-07-10	<del></del>		<del> </del>					Fo	rm <b>990-PF</b> (2010

19140912 133844 AHPOGA

X

X

N/A

N/A

Yes X No

2b

3b

4a

statement - see instructions.)

during the year?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<b>▶</b> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pro	istical information such as the oduced, etc.	Expenses
1 NONE		
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of a NONE	on lines 1 and 2.	Amount
		0
2		0.
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	•	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
а	Average monthly fair market value of securities	1a	8,001.
Ь		1b	8,001. 11,365.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	19,366.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)   1e   0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	19,366.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	290.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,076.
6	Minimum investment return. Enter 5% of line 5	6	954.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	954.
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	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	953.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	953.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	953.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		0 500
a	, ,	1a	2,500.
b	<b>3</b>	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
_	Cash distribution test (attach the required schedule)	3b	0.500
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		4
_	income. Enter 1% of Part I, line 27b	5	1.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,499.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for t	he section

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,				
line 7	i			953.
2 Undistributed income, if any, as of the end of 2010				·
a Enter amount for 2009 only			0.	
<b>b</b> Total for prior years:			·	
, ,		0.		
3 Excess distributions carryover, if any, to 2010:				
aFrom 2005 1,009.				
bFrom 2006 1,574.				
c From 2007 1,621.				
dFrom 2008 1,752.				
eFrom 2009 1,953.				
f Total of lines 3a through e	7,909.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$2,500.				
a Applied to 2009, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				953.
e Remaining amount distributed out of corpus	1,547.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				:
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,456.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
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)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	1,009.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	8,447.			
10 Analysis of line 9:			•	
a Excess from 2006 1,574.				
<b>b</b> Excess from 2007 1,621.				
c Excess from 2008 1,752.				
dExcess from 2009 1,953.				
e Excess from 2010 1,547.				
<del></del>				Form <b>990-PF</b> (2010)

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Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year 2,500. NONE 501(C)(3) PROVIDE SUPPORT FOR A BEAUREGARD KEYES FOUNDATION HISTORIC MUSEUM 1113 CHARTRES STREET NEW ORLEANS, LA 70116 2,500. **▶** 3a **b** Approved for future payment NONE Total

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Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		Code		
a	-		+		
D	-	<del></del>	+		
<u> </u>	-				
<u> </u>	-		-		<del> </del>
e	-		+		
1	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments			1 1		
3 Interest on savings and temporary cash					
investments .			14		
4 Dividends and interest from securities			14	233.	2.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			1		
b	_				
C	_				
d					· · · · · · · · · · · · · · · · · · ·
e			1		
12 Subtotal. Add columns (b), (d), and (e)	-	0		233.	2.
13 Total. Add line 12, columns (b), (d), and (e)			• 1	13	235.
(See worksheet in line 13 instructions to verify calculations.)				'-	
Part XVI-B Relationship of Activities	•	mplishment of F		t Durnosas	
•					
Line No. Explain below how each activity for which in the foundation's exempt purposes (other that			·A contrib	uted importantly to the accom	plishment of
1 NOT APPLICABLE					
	<del></del>				

Form **990-PF** (2010)

023621 12-07-10

<u> </u>	<u> </u>	, 0 10-401
Part XVII	Information Regarding Transfers To and Transactions and Relationships V	Vith Noncharitable
	Exempt Organizations	

1 Did the	organization directly or indi	rectly engage in any of the follow	ving with any other organizat	tion described in section 501(c) of	Y	es	No
the Co	de (other than section 501(c	)(3) organizations) or in section	527, relating to political orga	anizations?			
a Transfe	ers from the reporting found	ation to a noncharitable exempt	organization of:			_	
(1) Ca	sh			•	1a(1)		<u> </u>
(2) Ot	her assets				1a(2)	_	X
<b>b</b> Other t	ransactions:				1 1		
	les of assets to a noncharita				1b(1)		<u> </u>
<b>(2)</b> Pt	irchases of assets from a no	ncharitable exempt organization	•		1b(2)		X
	ental of facilities, equipment,				1b(3)	_	X
(4) Re	embursement arrangements				1b(4)		X
	ans or loan guarantees				1b(5)		X
٠,		embership or fundraising solicita			1b(6)	_	X
	• • • • •	uling lists, other assets, or paid o	• •		1c		X
				always show the fair market value of the goods, o		s,	
				lue in any transaction or sharing arrangement, s	how in		
		other assets, or services receive					
a)Line no	(b) Amount involved		ble exempt organization	(d) Description of transfers, transactions, and s	sharing arran	gemei	nts
		N/A					
		<u> </u>	<del></del>				
			<del></del>				
		<u> </u>	<del></del>			_	
		<u> </u>					
		ļ					
			<del></del>				
				<del></del>			
	·	tly affiliated with, or related to, o	. •	nizations described	٦.,	TV	٦.,
		r than section 501(c)(3)) or in section	ection 527?		Yes	X	סוא ד
D IT Yes,	complete the following sch (a) Name of org		(b) Type of organization	(c) Description of relationsh	)ID		
I/A	(4) 144110 01 018	<u> </u>	N/A	(b) Description of relations	<u>.</u>		
1/ A			-N/A				
			<del></del>				
			$\wedge$				
	Inder penalties of penury. I declar	e that I have examined this return, inc	uding accompanying schedules a	and statements, and to the best of my knowledge and bel	ef. it is true.	COTTEC	nt .
l a		arer (other than taxpayer or fiduciary)			,		- 1,
Sign Here		1 Da war	9/14	flu x			
	Signature of officer or tri	Nation of the last	Date	Title			
	Print/Type preparer's na		s signature	Date   Check   X   if   PTIN			
	T TIME Type preparer \$ 16	and The palet :	- Jognature	self- employed			
Paid	יי זיייים שמעום	DEDE7 0.1.	11+10	9/12/			
	ROBERT L P		IC XIX	10/12/11			
Prepare		EZ & LETULLE L		Firm's EIN			
Use On		1 DOVIDAG CIM	CIITME 2640		<del></del>		<del></del>
		1 POYDRAS ST.,		J. 75043	717	4	C 1 0
	NE	W ORLEANS, LA	10133		717		
				FOI	rm <b>990-l</b>	- <b>r</b> (2	2010)

FORM 990-PF DIVIDENT	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	)
WELLS FARGO WELLS FARGO	-		233.		0.	2	33. 2.
TOTAL TO FM 990-PF, PART I, I	LN 4		235.		0.	2	35.
FORM 990-PF		TAX	ES			STATEMENT	2
DESCRIPTION	EXPE	NSES	NET INV	EST-	ADJUSTED	(D) CHARITA IE PURPOS	
<del></del> -		2.		0.			0.
EXCISE TAXES							
EXCISE TAXES  TO FORM 990-PF, PG 1, LN 18		2.		0.			0.
TO FORM 990-PF, PG 1, LN 18 =	O <sup>1</sup>	2.	XPENSES	0.		STATEMENT	
TO FORM 990-PF, PG 1, LN 18 =	EXPE	THER E	(B) NET INV	EST-	ADJUSTED	STATEMENT (D) CHARITA	3 BLE
TO FORM 990-PF, PG 1, LN 18 =	EXPE	THER E	(B) NET INV	EST-	ADJUSTED	(D) CHARITA	3 BLE
TO FORM 990-PF, PG 1, LN 18 =  FORM 990-PF  DESCRIPTION	EXPE	THER E A) NSES BOOKS	(B) NET INV	EST-	ADJUSTED	(D) CHARITA	3 BLE ES
TO FORM 990-PF, PG 1, LN 18 =  FORM 990-PF  DESCRIPTION BANK FEES	EXPE	THER E A) NSES BOOKS 95.	(B) NET INV	EST- COME	ADJUSTED	(D) CHARITA	3 BLE ES 0.
TO FORM 990-PF, PG 1, LN 18  FORM 990-PF  DESCRIPTION BANK FEES TO FORM 990-PF, PG 1, LN 23	EXPE	THER E A) NSES BOOKS 95.	(B) NET INV MENT IN	EST- COME 95.	ADJUSTED	(D) CHARITA E PURPOS	3 BLE ES 0.
TO FORM 990-PF, PG 1, LN 18  FORM 990-PF  DESCRIPTION BANK FEES TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	EXPE	THER E A) NSES BOOKS 95.	(B) NET INV MENT IN	EST- COME 95.	ADJUSTED NET INCOM	(D) CHARITA E PURPOS  STATEMENT  FAIR MARKE	BLE ES 0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

5

NAME OF MANAGER

PAUL M. HAYGOOD CHARLOTTE S. HAYGOOD

Form 8868 (Rev. 1-2011)				Page 2				
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box								
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously filed						
If you are filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1).						
Part II' Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).								
Type or Name of exempt organization Employer identification num								
print HARMONY FOUNDATION 72-1312647								
extended Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.						
filing your 1240 TIAMTON'S STREET								
return See City, town or post office, state, and ZIP code. For a foreign address, see instructions.  NEW ORLEANS, LA 70115								
			<del></del>					
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)		0 4				
Application	Return	Application		Return				
Is For	Code	ls For		Code				
Form 990	01	<b>ループを引き継続を指する。</b>	<b>阿尔尔斯</b>	発展語				
Form 990-BL	02	Form 1041-A		08				
Form 990-EZ	03	Form 4720		09				
Form 990-PF	04	Form 5227		10				
Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above)	05 06	Form 6069 Form 8870		11 12				
STOP! Do not complete Part II if you were not already granted		* <del> </del>	sh filed Form 8868	12				
PAUL M. HAYGOOI	<u> </u>	natio o-month extension on a previou	siy illed r Offil 6000.					
• The books are in the care of > 1240 HARMONY ST	REET	- NEW ORLEANS, LA 7	0115					
Telephone No. ► 504-895-1980		FAX No. ▶	<del></del>					
If the organization does not have an office or place of business	in the Ur	nited States, check this box	. •					
If this is for a Group Return, enter the organization's four digit (	Group Exe	emption Number (GEN) If the	is is for the whole group, cl	neck this				
box ▶ . If it is for part of the group, check this box ▶		ch a list with the names and EINs of all	members the extension is	for.				
	OVEM	BER 15, 2011						
5 For calendar year 2010, or other tax year beginning		, and ending	<del></del>	·				
6 If the tax year entered in line 5 is for less than 12 months, cl Change in accounting period	heck reas	on:	Final return					
7 State in detail why you need the extension								
ADDITIONAL TIME IS REQUIRED TO	PREI	PARE A COMPLETE AND	ACCURATE RETU	RN				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, e	nter the tentative tax, less any						
nonrefundable credits. See instructions.			8a \$	0.				
b If this application is for Form 990-PF, 990-T, 4720, or 6069, or								
tax payments made. Include any prior year overpayment alk	owed as a	credit and any amount paid	T. P.	•				
previously with Form 8868.		<del></del>	8b \$	0.				
c Balance due. Subtract line 8b from line 8a. Include your pay	•	h this form, if required, by using	_   _	٥				
EFTPS (Electronic Federal Tax Payment System). See instru		d Verification	8c   \$	0.				
Under penalties of perjury, I declare that I have examined this form, including			heet of my knowledge and he	liaf				
it is true, correct, and complete, and that I am authorized to prepare this for	i <b>m.</b>	anying soliculies and statements, and to the	best of the knowledge allo be	n <b>ci</b> ,				
Signature Robert L. Title	Addas	mel.	Date > 8/3/11					
3			Form 8868 (Re	v. 1-2011)				