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# 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 calendar year 2010, or tax year beginning JUL 1, 2010, and ending JUN 30, 2011

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name change

Name of foundation <b>MHA HEALTH, RESEARCH AND EDUCATIONAL FOUNDATION</b>		A Employer identification number <b>23-7068714</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>P.O. BOX 1909</b>	Room/suite	B Telephone number <b>601-982-3251</b>
City or town, state, and ZIP code <b>MADISON, MS 39130-1909</b>		C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ <b>2,570,183.</b>	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		3,009,497.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		28,166.	28,166.		
4 Dividends and interest from securities					
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		22,179.			
b Gross sales price for all assets on line 6a					
7 Capital gain net income (from Part IV, line 2)			22,179.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income		331,494.	0.	331,494.	STATEMENT 1
12 Total. Add lines 1 through 11		3,391,336.	50,345.	331,494.	
13 Compensation of officers, directors, trustees, etc		0.	0.	0.	0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees					
c Other professional fees	STMT 2	1,122,854.	0.	0.	1,122,854.
17 Interest					
18 Taxes					
19 Depreciation and depletion		21,585.	0.	0.	
20 Occupancy		12,000.	0.	0.	0.
21 Travel, conferences, and meetings		355,814.	0.	0.	0.
22 Printing and publications					
23 Other expenses	STMT 3	1,007,755.	0.	0.	762,748.
24 Total operating and administrative expenses. Add lines 13 through 23		2,520,008.	0.	0.	1,885,602.
25 Contributions, gifts, grants paid		839,144.			839,144.
26 Total expenses and disbursements. Add lines 24 and 25		3,359,152.	0.	0.	2,724,746.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		32,184.			
b Net investment income (if negative, enter -0-)			50,345.		
c Adjusted net income (if negative, enter -0-)				331,494.	

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<b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing	532,236.	550,887.	550,887.
	2 Savings and temporary cash investments			
	3 Accounts receivable <span style="float:right">632,690.</span>			
	Less: allowance for doubtful accounts <span style="float:right">▶</span>	286,863.	632,690.	632,690.
	4 Pledges receivable <span style="float:right">▶</span>			
	Less: allowance for doubtful accounts <span style="float:right">▶</span>			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable <span style="float:right">▶</span>			
	Less: allowance for doubtful accounts <span style="float:right">▶</span>			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
<b>Liabilities</b>	11 Investments - land, buildings, and equipment basis <span style="float:right">▶</span>			
	Less accumulated depreciation <span style="float:right">▶</span>			
	12 Investments - mortgage loans			
	13 Investments - other <span style="float:right">STMT 4</span>	1,526,645.	1,346,043.	1,346,043.
	14 Land, buildings, and equipment: basis <span style="float:right">STMT 5</span>	174,827.		
	Less accumulated depreciation <span style="float:right">STMT 5</span>	137,027.	59,385.	37,800.
	15 Other assets (describe <span style="float:right">▶ PREPAID EXPENSES</span> )	13,287.	2,763.	2,763.
	16 <b>Total assets</b> (to be completed by all filers)	2,418,416.	2,570,183.	2,570,183.
	17 Accounts payable and accrued expenses	458,048.	704,991.	
	18 Grants payable			
<b>Net Assets or Fund Balances</b>	19 Deferred revenue	341,237.	156,863.	
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe <span style="float:right">▶</span> )			
	23 <b>Total liabilities</b> (add lines 17 through 22)	799,285.	861,854.	
<b>Net Assets or Fund Balances</b>	Foundations that follow SFAS 117, check here <span style="float:right">▶ <input checked="" type="checkbox"/></span> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	1,619,131.	1,708,329.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <span style="float:right">▶ <input type="checkbox"/></span> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 <b>Total net assets or fund balances</b>	1,619,131.	1,708,329.		
31 <b>Total liabilities and net assets/fund balances</b>	2,418,416.	2,570,183.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1,619,131.
2 Enter amount from Part I, line 27a	32,184.
3 Other increases not included in line 2 (itemize) <span style="float:right">▶ UNREALIZED GAIN ON INVESTMENTS</span>	57,014.
4 Add lines 1, 2, and 3	1,708,329.
5 Decreases not included in line 2 (itemize) <span style="float:right">▶</span>	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	1,708,329.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b			
c			
d			
e			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			22,179.
b			
c			
d			
e			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			22,179.
b			
c			
d			
e			

  

2 Capital gain net income or (net capital loss) <span style="float:right;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }</span>	2	22,179.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2009	3,007,598.	2,181,852.	1.378461
2008	2,191,894.	1,919,925.	1.141656
2007	709,984.	2,115,246.	.335651
2006	1,027,580.	2,334,339.	.440202
2005	2,172,443.	2,910,291.	.746469

  

2 Total of line 1, column (d)	2	4.042439
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.808488
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	1,835,421.
5 Multiply line 4 by line 3	5	1,483,916.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	503.
7 Add lines 5 and 6	7	1,484,419.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	2,724,746.

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**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

<p><b>1a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)</p> <p><b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b</p> <p><b>c</b> All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).</p>	1	503.
<b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
<b>3</b> Add lines 1 and 2	3	503.
<b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
<b>5</b> Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	503.
<b>6</b> Credits/Payments:		
<b>a</b> 2010 estimated tax payments and 2009 overpayment credited to 2010	6a	
<b>b</b> Exempt foreign organizations - tax withheld at source	6b	
<b>c</b> Tax paid with application for extension of time to file (Form 8868)	6c	150.
<b>d</b> Backup withholding erroneously withheld	6d	
<b>7</b> Total credits and payments. Add lines 6a through 6d	7	150.
<b>8</b> Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	2.
<b>9</b> Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed <b>SEE STATEMENT 6</b>	9	355.
<b>10</b> Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
<b>11</b> Enter the amount of line 10 to be: Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

<p><b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?</p> <p><b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i></p> <p><b>c</b> Did the foundation file Form 1120-POL for this year?</p> <p><b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.</p> <p><b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0.</p> <p><b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i></p> <p><b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i></p> <p><b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?</p> <p><b>b</b> If "Yes," has it filed a tax return on Form 990-T for this year?</p> <p><b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i></p> <p><b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</p> <p><b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i></p> <p><b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ <u>MS</u></p> <p><b>b</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? <i>If "No," attach explanation</i></p> <p><b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i></p> <p><b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i></p>	<p>1a</p> <p>1b</p> <p>1c</p> <p>2</p> <p>3</p> <p>4a</p> <p>4b</p> <p>5</p> <p>6</p> <p>7</p> <p>8b</p> <p>9</p> <p>10</p>	<p>Yes</p> <p>No</p> <p>X</p> <p>X</p> <p>X</p> <p></p> <p>X</p> <p>X</p> <p></p> <p>X</p> <p>X</p> <p></p> <p>X</p> <p>X</p> <p></p> <p>X</p> <p>X</p> <p></p> <p>X</p> <p>X</p>	<p>No</p> <p>X</p> <p>X</p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p>
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N/A

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**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ► HTTP://WWW.MHAFOUNDATION.ORG

14 The books are in care of ► RICHARD GRIMES Telephone no. ► 601-368-3210  
 Located at ► 116 WOODGREEN CROSSING, MADISON, MS ZIP+4 ► 39110

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year  
 ► 15 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?  
 See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►

16		Yes	No
			X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	1b
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?		1c X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes," list the years ►		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 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.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?		4b X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

**5a** During the year, did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here ☒

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

If "Yes" to 6b, file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

X

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 9		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000

0

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**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

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

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

0

**Part IX-A** Summary of Direct Charitable Activities

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

	Expenses
1 SEE STATEMENT 10	839,144.
2 SEE STATEMENT 11	1,257,292.
3 SEE STATEMENT 12	628,310.
4	

**Part IX-B** Summary of Program-Related Investments

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

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
<b>Total.</b> Add lines 1 through 3	0.

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**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	1,421,318.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	442,054.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	1,863,372.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	1,863,372.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	27,951.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,835,421.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	91,771.

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	91,771.
<b>2a</b>	Tax on investment income for 2010 from Part VI, line 5	<b>2a</b>	503.
<b>b</b>	Income tax for 2010. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	503.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	91,268.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	91,268.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	91,268.

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	2,724,746.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	2,724,746.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	503.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	2,724,243.

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

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				91,268.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005	2,057,422.			
b From 2006	918,097.			
c From 2007	605,847.			
d From 2008	2,097,064.			
e From 2009	3,540,668.			
f Total of lines 3a through e	9,219,098.			
4 Qualifying distributions for 2010 from Part XII, line 4: ► \$	2,724,746.			
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				91,268.
e Remaining amount distributed out of corpus	2,633,478.			
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:	11,852,576.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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	2,057,422.			
9 Excess distributions carryover to 2011 Subtract lines 7 and 8 from line 6a	9,795,154.			
10 Analysis of line 9:				
a Excess from 2006	918,097.			
b Excess from 2007	605,847.			
c Excess from 2008	2,097,064.			
d Excess from 2009	3,540,668.			
e Excess from 2010	2,633,478.			

**MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION**

Form 990-PF (2010)

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**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling

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

	Tax year	Prior 3 years			(e) Total
	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

**1 Information Regarding Foundation Managers:**

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

**NONE**

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

**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

<b>Part XV</b>	<b>Supplementary Information</b> (continued)
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### 3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year HOSPITAL EMERGENCY PREPAREDNESS VARIOUS HOSPITALS STATE OF, MS 39110			EQUIPMENT & EXPENSES	839,144.
Total			► 3a	839,144.
b Approved for future payment  NONE				
Total			► 3b	0.

Enter gross amounts unless otherwise indicated.

(See worksheet in line 13 instructions to verify calculations.)

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12-07-10

## Part XVII

## Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

<p><b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p><b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p><b>b</b> Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p><b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p><b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p>	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)	X	
1b(4)	X	
1b(5)		X
1b(6)		X
1c	X	

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☒ Yes      ☐ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
MISSISSIPPI HOSPITAL ASSOCIATION	501(C)(6)	SEE STATEMENT 14

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

**Sign  
Here**

Marcella L. DeVary  
Signature of officer or trustee

Date \_\_\_\_\_

PRESIDENT

Title

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MELANIE S WOODRICK, CPA</b>	Preparer's signature <b>MELANIE S WOODRIC</b>	Date <b>05/11/12</b>	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶ <b>GRANTHAM POOLE ET AL, PLLC</b>			Firm's EIN ▶	
	Firm's address ▶ <b>1062 HIGHLAND COLONY PARKWAY SUITE 201 RIDGELAND, MS 39157</b>			Phone no. <b>601-499-2400</b>	

Form **990-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

**MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION**

Employer identification number

**23-7068714**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐

501(c)( ) (enter number) organization

☐

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐

527 political organization

Form 990-PF

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

☒

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II

**Special Rules**

☐

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III

☐

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box 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).

**LHA** For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization  
MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION

Employer identification number

23-7068714

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BOWER FOUNDATION 578 HIGHLAND COLONY PARKWAY, SUITE 120 RIDGELAND, MS 39157	\$ 34,883.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	KELLOG FOUNDATION ONE MICHIGAN AVENUE EAST BATTLE CREEK, MI 49017	\$ 365,860.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	MS BOARD OF NURSING 1080 RIVER OAKS DRIVE, SUITE A100 FLOWOOD, MS 39232	\$ 191,340.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	ROBERT WOOD JOHNSON FOUNDATION P.O. BOX 2316 PRINCETON, NJ 08543	\$ 350,345.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	US DEPARTMENT OF HEALTH & HUMAN SERVICES 200 INDEPENDENCE AVENUE, SW WASHINGTON, DC 20201	\$ 1,749,244.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	US DEPARTMENT OF LABOR 200 CONSTITUTION AVENUE, NW WASHINGTON, DC 20210	\$ 169,612.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization

MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION

Employer identification number

23-7068714

**Part II Noncash Property** (see instructions)

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

Name of organization

Employer identification number

**MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION****23-7068714****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 columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$

(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		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

2010 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	FURNITURE AND FIXTURES	06/01/01	SL	3.00		HY16	3,305.				3,305.	3,305.		0.	3,305.
2	CABINET	05/01/02	SL	3.00		HY16	2,641.				2,641.	2,641.		0.	2,641.
3	DESK/COUNTER SPACE	05/01/08	SL	3.00		HY16	1,042.				1,042.	1,042.		0.	1,042.
4	HOTEL & RESTAURANT SUPPLY	12/01/05	SL	3.00		HY16	5,419.				5,419.	5,419.		0.	5,419.
5	MS ART & DESIGN CONSULTANTS	03/01/06	SL	7.00		HY16	5,126.				5,126.	3,051.		732.	3,783.
6	OFFISOURCE - FURNITURE & FIXTURES	03/01/06	SL	7.00		HY16	19,565.				19,565.	11,646.		2,795.	14,441.
7	BAREFIELD & COMPANY	03/01/06	SL	7.00		HY16	61,669.				61,669.	33,646.		8,810.	42,456.
8	SOUND & COMMUNICATION	03/01/06	SL	7.00		HY16	31,040.				31,040.	18,476.		4,434.	22,910.
9	OFFICE PRODUCTS PLUS	03/01/06	SL	7.00		HY16	3,419.				3,419.	2,034.		488.	2,522.
10	SOUND & COMMUNICATION	08/01/07	SL	7.00		HY16	3,944.				3,944.	1,478.		563.	2,041.
11	OFFISOURCE - FURNITURE & FIXTURES	02/01/08	SL	7.00		HY16	2,040.				2,040.	618.		291.	909.
12	CH - DELL COMPUTERS HCC	04/01/03	SL	3.00		HY16	1,672.				1,672.	1,254.		0.	1,254.
13	CH - DELL COMPUTERS	03/01/04	SL	3.00		HY16	1,735.				1,735.	1,157.		0.	1,157.
14	CH - DELL COMPUTERS	06/10/04	SL	3.00		HY16	2,755.				2,755.	1,837.		0.	1,837.
15	CH - DELL MARKETING	02/01/07	SL	3.00		HY16	3,607.				3,607.	3,306.		0.	3,306.
16	CH - DELL MARKETING	04/01/08	SL	3.00		HY16	12,493.				12,493.	9,437.		3,056.	12,493.
17	CS - CDW COMPUTER CENTER HCC	04/01/03	SL	3.00		HY16	1,109.				1,109.	832.		0.	832.
18	CS - CDW COMPUTER CENTER HCC	02/01/05	SL	3.00		HY16	497.				497.	497.		0.	497.

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05-01-10

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2010 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
19	CS - AVANT GARDE CONSULTING SVC EDU	06/01/07	SL	3.00	HY16	HY16	5,109.				5,109.	4,967.		0.	4,967.
20	XEROX PHASER 6200N HCC	08/01/02	SL	3.00	HY16	HY16	2,514.				2,514.	2,514.		0.	2,514.
21	BOWIE AUDIO VISUAL	11/01/02	SL	3.00	HY16	HY16	3,055.				3,055.	2,715.		0.	2,715.
22	LANIER WORLDWIDE	04/01/03	SL	3.00	HY16	HY16	1,071.				1,071.	803.		0.	803.
	* TOTAL 990-PF PG 1 DEPR						174,827.				174,827.	112,675.		21,169.	133,844.

FORM 990-PF	OTHER INCOME		STATEMENT	1
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
REGISTRATION DUES	267,732.	0.	267,732.	
SPONSOR FEES	63,762.	0.	63,762.	
TOTAL TO FORM 990-PF, PART I, LINE 11	331,494.	0.	331,494.	

FORM 990-PF	OTHER PROFESSIONAL FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTING	1,122,854.	0.	0.	1,122,854.
TO FORM 990-PF, PG 1, LN 16C	1,122,854.	0.	0.	1,122,854.

FORM 990-PF	OTHER EXPENSES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE OPERATIONS	165,749.	0.	0.	0.
ADMINISTRATIVE SERVICES	747,643.	0.	0.	747,643.
OTHER	94,363.	0.	0.	15,105.
TO FORM 990-PF, PG 1, LN 23	1,007,755.	0.	0.	762,748.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	4
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
INVESTMENTS	COST	1,346,043.	1,346,043.	
TOTAL TO FORM 990-PF, PART II, LINE 13		1,346,043.	1,346,043.	

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FORM 990-PF      DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT      STATEMENT      5

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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE AND FIXTURES	3,305.	3,305.	0.
CABINET	2,641.	2,641.	0.
DESK/COUNTER SPACE	1,042.	1,042.	0.
HOTEL & RESTAURANT SUPPLY	5,419.	5,419.	0.
MS ART & DESIGN CONSULTANTS	5,126.	3,783.	1,343.
OFFISOURCE - FURNITURE & FIXTURES	19,565.	14,441.	5,124.
BAREFIELD & COMPANY	61,669.	42,456.	19,213.
SOUND & COMMUNICATION	31,040.	22,910.	8,130.
OFFICE PRODUCTS PLUS	3,419.	2,522.	897.
SOUND & COMMUNICATION	3,944.	2,041.	1,903.
OFFISOURCE - FURNITURE & FIXTURES	2,040.	909.	1,131.
CH - DELL COMPUTERS HCC	1,672.	1,254.	418.
CH - DELL COMPUTERS	1,735.	1,157.	578.
CH - DELL COMPUTERS	2,755.	1,837.	918.
CH - DELL MARKETING	3,607.	3,306.	301.
CH - DELL MARKETING	12,493.	12,493.	0.
CS - CDW COMPUTER CENTER HCC	1,109.	832.	277.
CS - CDW COMPUTER CENTER HCC	497.	497.	0.
CS - AVANT GARDE CONSULTING			
SVC EDU	5,109.	4,967.	142.
XEROX PHASER 6200N HCC	2,514.	2,514.	0.
BOWIE AUDIO VISUAL	3,055.	2,715.	340.
LANIER WORLDWIDE	1,071.	803.	268.
TOTAL TO FM 990-PF, PART II, LN 14	174,827.	133,844.	40,983.

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JAMES G. CHASTAIN 3550 HIGHWAY 468 WEST WHITFIELD, MS 39193	BOARD MEMBER 0.00	0.	0.	0.
SAM W. CAMERON P.O. BOX 1909 MADISON, MS 39130	BOARD MEMBER 0.00	0.	0.	0.
HANK WHEELER 149 DRINKWATER ROAD BAY ST LOUIS, MS 39520	BOARD CHAIRMAN 0.00	0.	0.	0.
ELIZABETH MAHAFFEY 1750 CHADWICK DRIVE JACKSON, MS 39204	BOARD MEMBER 0.00	0.	0.	0.
TONYA MOORE 2500 N STATE STREET JACKSON, MS 39216	BOARD MEMBER 0.00	0.	0.	0.

EDWARD L. FOSTER	EX-OFFICIO MEMBER			
P.O. BOX 1909	0.00	0.	0.	0.
MADISON, MS 39130				
MARCELLA MCKAY	BOARD MEMBER			
P.O. BOX 1909	0.00	0.	0.	0.
MADISON, MS 39130				
ALLEN TYRA	BOARD MEMBER			
350 CROSSGATES BLVD	0.00	0.	0.	0.
BRANDON, MS 39042				

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII	0.	0.	0.
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FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT	10
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## ACTIVITY ONE

HOSPITAL EMERGENCY PREPAREDNESS PROGRAM- PROVIDE EDUCATION, COMMUNICATION, EQUIPMENT PROCUREMENT, PLANNING AND SURVEILLANCE/DATA SYSTEMS TO ASSIST HOSPITALS IN PREPARING FOR EMERGENCY/DISASTER SITUATIONS.

## EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

839,144.

FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT	11
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## ACTIVITY TWO

NURSING WORKFORCE PROGRAM- MAINTAIN DATA ON NURSING WORKFORCE SUPPLY AND DEMAND, AS WELL AS NURSING SCHOOL FACULTY SUPPLY AND DEMAND. ADMINISTER STUDENT MENTORSHIP INITIATIVES. CONSULTATION AND PROGRAMS FOR WORKFORCE DEVELOPMENT, WORKPLACE IMPROVEMENT AND JOB SATISFACTION.

## EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

1,257,292.



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FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT 12
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ACTIVITY THREE

RURAL HEALTHCARE PROGRAM- EDUCATION FOR HEALTHCARE PROVIDERS  
SERVING THE NEEDS OF SMALL AND RURAL HOSPITALS IN THE MS  
DELTA REGION. ASSISTANCE WITH EMERGING ISSUES SUCH AS HEALTH  
INFORMATION TECHNOLOGY AND ELECTRONIC HEALTH RECORDS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

628,310.

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990-PF	INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS	STATEMENT 13
	PART XVII, LINE 1, COLUMN (D)	

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NAME OF NONCHARITABLE EXEMPT ORGANIZATION

---

MISSISSIPPI HOSPITAL ASSOCIATION

---

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

---

RENTAL OF SPACE

---

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

---

MISSISSIPPI HOSPITAL ASSOCIATION

---

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

---

REIMBURSEMENT FOR EMPLOYEE SALARIES AND FRINGE BENEFITS

---

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

---

MISSISSIPPI HOSPITAL ASSOCIATION

---

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

---

LEASE OF EMPLOYEES, SPACE, EQUIPMENT

---

990-PF	AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS	STATEMENT 14
	PART XVII, LINE 2, COLUMN (C)	

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NAME OF AFFILIATED OR RELATED ORGANIZATION

---

MISSISSIPPI HOSPITAL ASSOCIATION

---

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

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THE ORGANIZATIONS SHARE TWO BOARD MEMEBERS OUT OF A BOARD OF SEVEN MEMBERS.

Form **4562**Department of the Treasury  
Internal Revenue Service (99)  
Name(s) shown on return**Depreciation and Amortization 990-PF**  
(Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

OMB No 1545-0172

**2010**Attachment  
Sequence No 67**MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION****FORM 990-PF PAGE 1****23-7068714****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	21,169.

**Part III MACRS Depreciation (Do not include listed property) (See instructions)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

**Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System**

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year	/		40 yrs	MM	S/L

**Part IV Summary (See instructions)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	21,169.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION**

Form 4562 (2010)

**23-7068714** Page 2

**Part V Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)

**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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**25** Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

**26** Property used more than 50% in a qualified business use:

		%						
		%						
		%						

**27** Property used 50% or less in a qualified business use

		%			S/L			
		%			S/L			
		%			S/L			

**28** Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 **28**

**29** Add amounts in column (i), line 26 Enter here and on line 7, page 1 **29**

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
<b>30</b> Total business/investment miles driven during the year (do not include commuting miles)												
<b>31</b> Total commuting miles driven during the year												
<b>32</b> Total other personal (noncommuting) miles driven												
<b>33</b> Total miles driven during the year Add lines 30 through 32												
<b>34</b> Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?												
<b>36</b> Is another vehicle available for personal use?												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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**42** Amortization of costs that begins during your 2010 tax year


**43** Amortization of costs that began before your 2010 tax year **43**

**44** Total. Add amounts in column (f) See the instructions for where to report **44**

**BYLAWS OF MHA HEALTH, RESEARCH AND EDUCATIONAL  
FOUNDATION, INC.  
[Restated as of April 28, 2011]**

**PURPOSE:** The general corporate purposes of MHA Health, Research and Educational Foundation, Inc. ("Foundation") are as set forth in Article ~~SIXTH~~ 6 of the Foundation's Amended and Restated Articles of Incorporation dated ~~June 30, 2000~~. April 28, 2011.

**ARTICLE I. OFFICES**

The principal office of the Foundation in the State of Mississippi shall be located in the City of Madison, Mississippi. The Foundation may have such other offices, either within or without the State of Mississippi, as the Board of Directors may designate or as the business of the Foundation may require from time to time.

The registered office of the Foundation, required by the Mississippi ~~Non-Profit~~ Nonprofit Corporation Act to be maintained in the State of Mississippi, may be, but need not be, identical with the principal office in the State of Mississippi, and the address of the registered office may be changed from time to time by the Board of Directors.

**ARTICLE II. NON-MEMBER**

Section 1. Membership. This ~~non-profit~~ nonprofit Foundation shall have no members.

**ARTICLE III. BOARD OF DIRECTORS**

Section 1. General Powers. The business and affairs of the Foundation shall be managed under the authority and direction of its Board of Directors.

Section 2. Number, Tenure and Qualifications. The Board of Directors of the Foundation shall consist of three (3) inside voting Directors, four (4) outside voting Directors and one (1) ex officio, non-voting Director.

The inside Directors shall be the ~~Executive Director~~ President and CEO of the Mississippi Hospital Association, the Immediate Past Chairman of the Board of

Governors of the Mississippi Hospital Association and the President and CEO of MHA Health, Research and Educational Foundation, Inc. The inside Directors shall each serve in their capacity as Directors of the Foundation for as long as they fill the official designated positions with the Mississippi Hospital Association or MHA Health, Research and Educational Foundation, Inc.

The outside Directors shall be chosen and elected as a result of their occupying various official positions with organizations and associations that represent Disciplines of the Health Care Industry with whom the Foundation has contact and working relationships in the conduct of its charitable activities. The outside Directors shall be:

1. The Chairman of the Advisory Committee to the Office of Nursing Workforce;
2. A representative who serves as a Hospital Administrator and CEO within the State of Mississippi; and
3. Two (2) representatives from Health Care Disciplines represented in hospitals and/or Health Care Education or Workforce Development.

The outside Directors shall serve for two (2) year terms which shall be staggered by classes determined according to their year of election. Initially, however, two (2) outside Directors shall each be elected for a two (2) year term, and two outside Directors shall each be elected for a one (1) year term in order to create and implement staggered terms for the outside Directors. When those initial staggered terms expire, the successor Directors shall be elected for two (2) year terms.

Outside Directors shall be eligible to be elected and serve two (2) successive two (2) year terms and then must rotate off the Board of Directors for one (1) year or more before they are eligible for re-election to the Board of Directors. The initial outside Directors who are elected for a one (1) year term shall be eligible to serve a full two (2) year term if re-elected after their initial term.

Outside Directors and the ex-officio, non-voting Director shall be elected by the Board of Directors of the Foundation.

All seven (7) voting Directors shall elect from their number by majority vote each year a Chairman of the Board.

The ex officio, non-voting Director shall be ~~the Chief Operating Officer a President or Vice President~~ of the Mississippi Hospital Association or of a company or entity affiliated with the Mississippi Hospital Association. The ex officio member shall be elected for a two (2) year term and shall be eligible for re-election for one additional two (2) year term after which he/she must rotate off the Board of Directors for one (1) year or more before he/she is eligible for re-election to the Board.

Section 3. Meetings. Regular meetings of the Board of Directors shall be held quarterly without other notice than this Bylaw, with one of the quarterly regular meetings being designated as the annual meeting of Directors. The Board of Directors may provide, by resolution, the time and place, either within or without the State of Mississippi, for the holding of additional regular meetings without other notice than such resolution. Special meetings of the Board of Directors may be called by or at the request of the President and CEO of the Foundation or by any three Directors. Regular or special meetings may be conducted through the use of any means of communication by which all Directors participating may simultaneously hear each other during the meeting.

Section 4. Notice. Notice of any special meeting of Directors shall be given at least two (2) days previously thereto by written notice delivered personally or mailed to each Director at his or her business address, or sent by facsimile or e-mail. If mailed, such notice shall be deemed to be delivered when deposited in the United States mail, so addressed, with postage thereon prepaid. If notice be given by facsimile or e-mail, such notice shall be deemed to be delivered when the facsimile or e-mail is sent. Any Director may waive notice of any meeting. The attendance of a Director at a meeting shall constitute a waiver of notice of such meeting, except where a Director attends a meeting for the express purpose of objecting to the transaction of any business and does not thereafter vote for or assent to action taken at the meeting. Neither the business to be transacted at nor the purpose of any regular or special meeting of the Board of Directors needs to be specified in the notice or waiver of notice of such meeting.



Section 5. Quorum. A majority of the total number of Directors fixed by Section 2 of this Article III shall constitute a quorum for the transaction of business at any meeting of the Board of Directors, but if less than such majority is present at a meeting, a majority of the Directors present may adjourn the meeting from time to time without further notice.

Section 6. Manner of Acting. Except as otherwise provided herein, the act of the majority of the Directors present at a meeting at which a quorum is present shall be the act of the Board of Directors.

Section 7. Action Without a Meeting. Any action required or permitted to be taken by the Board of Directors at a meeting may be taken without a meeting if a consent in writing, setting forth the action so taken, shall be signed by all of the Directors and included in the minutes or filed with the corporate records.

Section 8. Vacancies. Any vacancy occurring in the Board of Directors shall be filled by the affirmative vote of a majority of the Board of Directors. A Director filling a vacancy shall serve for the unexpired term of his or her predecessor in office.

Section 9. Resignation. A Director may resign at any time by delivering written notice to the Board of Directors or to the President and CEO or to the Secretary of the Foundation.

Section 10. Removal. The Board of Directors by majority vote may remove one or more Directors at any time for cause or when a Director's or the Directors' attendance record at meetings of the Board is less than 50% during a twelve-month period; provided, however, any such Director or Directors may be removed by the Board of Directors only at a special meeting called for the purpose of removing the Director or Directors, and the meeting notice must state that the purpose or one of the purposes of the meeting is removal of the Director or Directors.

Section 11. Conflicts of Interest. Officers and Directors are fiduciaries and have an obligation of loyalty to act in the best interest of the Foundation. Officers and Directors have an affirmative duty to disclose conflicts of interest including, but not limited to, fiduciary relationships with other individuals, partnerships, corporations, and other entities engaged in business similar to that of the Foundation. Officers and

Directors also have an obligation to disclose to the Board of Directors any business opportunity which comes to the attention of the Officer or Director which is relevant to the Foundation's present or future business activities.

The Board of Directors shall approve and adopt a written Conflict of Interest Policy which shall be reviewed and approved by the Board of Directors at least annually thereafter. Copies of the Conflict of Interest Policy shall be made available to the Officers, staff and employees of the Foundation.

Section 12. Committees. The Board of Directors may, as allowed by statute, create one or more committees of the Board as the Board deems appropriate, and appoint to each of the committees two (2) or more Directors who serve at the pleasure of the Board of Directors.

Section 13. Rules and Regulations. The Board of Directors may adopt and amend as necessary operating rules and regulations which do not conflict with these Bylaws or the Articles of Incorporation.

#### **ARTICLE IV. CORPORATE OFFICERS**

Section 1. Number. The Officers of the Foundation shall be a President and CEO, and, ~~when deemed necessary by the Board of Directors, a Vice President, a Secretary, and a Treasurer. Such other Officers and assistant officers as may be deemed necessary may be elected or appointed by the Board of Directors. Any two or more offices may be held by the same person~~ a Treasurer and CFO.

Section 2. Election. The Officers of the Foundation shall be elected by the Board of Directors.

Section 3. Resignation; Removal. Any Officer or agent may resign at any time by delivering written notice to the Foundation. Any Officer or agent may be removed at any time with or without cause by the Board of Directors at any time; any Officer or agent may also be removed at any time with or without cause by the Board of Directors pursuant to recommendation of the Executive Director President and CEO of the Mississippi Hospital Association.

Section 4. Vacancies. A vacancy in any office because of death, resignation, removal, disqualification or otherwise, may be filled by the Board of Directors ~~for the unexpired portion of the term. and by action of the Board of Directors pursuant to recommendation of the Executive Director~~ President and CEO of the Mississippi Hospital Association.

Section 5. President and CEO. The President and CEO shall be the principal executive Officer of the Foundation and, subject to the control of the Board of Directors, shall in general supervise and control all the business and affairs of the Foundation. The President and CEO shall appoint all committee members, chairmen of committees and project directors with approval of the Board; shall serve as a voting member of the Board; and shall serve as an ex officio member on all committees except the nominating committee. The President and CEO shall serve a term of two (2) years and may be re-elected biennially without limitation at the pleasure of the Board. ~~The President and CEO of the Foundation or his/her designee~~ Section 6. Vice President. ~~If a Vice President is elected to serve and if the President and CEO is not able to render and perform his or her duties or exercise his or her powers due to absence or otherwise, then the same shall be performed and exercised by the Vice President. If elected, the Vice President shall assist the President and CEO and shall learn the mechanics, organization and operation of the Foundation. If elected, the Vice President shall serve as Vice President for a term of two (2) years and may be re-elected biennially without limitation at the pleasure of the Board.~~

Section 7. Secretary. ~~If a Secretary is elected to serve, the Secretary shall (a) keep the minutes of the Board of Directors in one or more books provided for the purpose electronically and print files according to Foundation policies; (b) see that all notices are duly given in accordance with the provisions of these Bylaws or as required by law; (c) be custodian of the corporate records; (d) be responsible for preparing minutes of the Directors' meetings and for authenticating records of the Foundation; and (e) perform such other duties as from time to time may be assigned to him or her by the President and CEO or by the Board of Directors. If elected, the Secretary shall serve as Secretary for a term of two (2) years and may be re-elected biennially without limitation at the pleasure of the Board.~~

Section 8 or assigned to a designee by the President and CEO of the Foundation.

Section 6. Treasurer and CFO. ~~If a Treasurer and CFO is elected to serve, the~~  
The Treasurer and CFO shall (a) have charge and custody of and be responsible for all funds and securities of the Foundation; (b) receive and give receipts for money due and payable to the Foundation from any source whatsoever, and deposit all such moneys in the name of the Foundation in such banks, trust companies or other depositories as shall be selected in accordance with the provisions of Article VII of these Bylaws; and (c) in general perform all of the duties incident to the office of Treasurer and CFO and such other duties as from time to time may be assigned to him or her by the President and CEO or by the Board of Directors. ~~If elected, the~~ The Treasurer and CFO shall serve ~~as Treasurer and CFO~~ for a term of two (2) years and may be re-elected biennially without limitation at the pleasure of the Board.

## ARTICLE V. COMMITTEES

Section 1. Purposes of Committees. The general purposes of the Committees shall be to direct, manage and supervise the operation of specific activities of the Foundation under the direction of the Board of Directors. The specific purposes and duties of the Committees shall be determined by the President and CEO with the approval of the Board.

## ARTICLE VI. INDEMNIFICATION OF DIRECTORS AND OFFICERS

Each Director and Officer of the Foundation now or hereafter serving as such, shall be indemnified by the Foundation against any and all claims and liabilities to which he or she has or shall become subject by reason of serving or having served as such Director or Officer, or by reason of any alleged action or omission by him or her as such Director or Officer; and the Foundation shall reimburse each such person for all legal expenses, expenses and court costs reasonably incurred by him or her in connection with any such claim or liability; provided, however, that no such person shall be indemnified against, or be reimbursed for any expense incurred in connection with, any claim or liability arising out of his or her failure to discharge his or her duties in accordance with his or her good faith belief that he or she is acting in the best interest of the Foundation.

The right of indemnification hereinabove provided for shall not be exclusive of any rights to which any Director or Officer of the Foundation may otherwise be entitled by law.

## **ARTICLE VII. FINANCE**

Section 1. Contracts. The Board of Directors may authorize any Officer or Officers, agent or agents, to enter into any contract or execute and deliver any instrument in the name of and on behalf of the Foundation, and such authority may be general or confined to specific instances.

Section 2. Loans. No loans shall be contracted on behalf of the Foundation and no evidences of indebtedness shall be issued in its name unless authorized by a resolution of the Board of Directors. Such authority may be general or confined to specific instances.

Section 3. Checks, Drafts, etc. All checks, drafts or other orders for the payment of money, notices or other evidences of indebtedness issued in the name of the Foundation shall be signed by such Officer or Officers, agent or agents of the Foundation and in such manner as shall from time to time be determined by resolution of the Board of Directors.

Section 4. Deposits. All funds of the Foundation not otherwise employed shall be deposited from time to time to the credit of the Foundation in such banks, trust companies or other depositories as the Board may select.

Section 5. Dues and Fees. Dues and fees collected from affiliated entities and groups within the Foundation shall be placed in appropriate accounts and shall be used for operating expenses related to the charitable activities of the Foundation.

Section 6. Grants. The Foundation may make application for and manage grant funds to support the charitable purposes and activities of the Foundation.

Section 7. Emergency Funds. The Foundation may, during any natural disaster or state of emergency, raise or solicit contributions to aid persons in the Health Care Industry who suffer needs due to the disaster or emergency.

## ARTICLE VIII. DISSOLUTION

Section 1. Articles of Dissolution. The Board of Directors by a vote of no less than two-thirds (2/3) of the Directors may adopt certain articles of dissolution recommending the dissolution of the Foundation.

Section 2. Distribution of Assets Upon Dissolution. Upon the dissolution of this Foundation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or corresponding section of any future federal Tax Code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. The residual assets of this Foundation shall not be distributed in any form or amount or under any circumstances to the incorporators, Directors, Officers, employees or agents of the Foundation, or any other individual or entity not qualifying as a tax exempt organization under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.

## ARTICLE IX. MISCELLANEOUS

Section 1. Fiscal Year. The fiscal year of the Foundation shall begin on the first day of ~~May~~ July in each calendar year and end on the thirtieth day of ~~April~~ June in the following calendar year.

Section 2. Waiver of Notice. Whenever any notice is required to be given to any Director of the Foundation under the provisions of these Bylaws or under the provisions of the Articles of Incorporation or under the provisions of the Mississippi ~~Non-Profit~~ Nonprofit Corporation Act, a waiver thereof in writing signed by the person or persons entitled to such notice, whether before or after the time stated therein, and delivered to the Foundation for inclusion in the minutes or filing with the corporate records, shall be deemed equivalent to the giving of such notice.

Section 3. Amendments. Any amendment to these Bylaws must be approved by a majority vote of the Board of Directors.

## ARTICLE X. EMERGENCY BYLAWS

The Emergency Bylaws provided in this Article X shall be operative during any emergency in the conduct of the business of the Foundation resulting from a catastrophic event that prevents a quorum of the Directors from being readily assembled, notwithstanding any different provision in the preceding Articles of the Bylaws or in the Articles of Incorporation of the Foundation or in the Mississippi ~~Non-Profit~~ Nonprofit Corporation Act. To the extent not inconsistent with the provisions of this Article, the Bylaws provided in the preceding Articles shall remain in effect during such emergency, and upon its termination the Emergency Bylaws shall cease to be operative.

During any such emergency:

- a. A meeting of the Board of Directors may be called by any Officer or Director of the Foundation. Notice of the time and place of the meeting shall be given by the person calling the meeting to such of the Directors as it may be feasible to reach by any available means of communication. Such notice shall be given at such time in advance of the meeting as circumstances permit in the judgment of the person calling the meeting.
- b. At any such meeting of the Board of Directors, a quorum shall consist of two.
- c. The Board of Directors, either before or during any such emergency, may provide, from time to time for the modification of the lines of succession in the event that during such an emergency any or all Officers or agents of the Foundation shall for any reason be rendered incapable of discharging their duties.
- d. The Board of Directors, either before or during any such emergency, may change the principal office or designate several alternative principal offices or regional offices, or authorize the Officers so to do.

No Officer, Director or employee acting in accordance with these Emergency Bylaws shall be liable except for willful misconduct.

DRAFT - FOR DISCUSSION PURPOSES ONLY  
April 26, 2011

These Emergency Bylaws shall be subject to repeal or change by further action of the Board of Directors but no such repeal or change shall modify the provisions of the next preceding paragraph with regard to action taken prior to the time of such repeal or change. Any amendment of these Emergency Bylaws may make any further or different provision that may be practical and necessary for the circumstances of the emergency.

ADOPTED BY THE BOARD OF DIRECTORS OF THE FOUNDATION on  
the 28th day of ~~May, 2009~~ April, 2011.

\_\_\_\_\_  
Secretary of the Meeting

CERTIFICATE

I certify that the foregoing Bylaws are the Bylaws of MHA Health, Research and Educational Foundation, Inc.

\_\_\_\_\_  
President and CEO of the Foundation

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# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

**Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on **e-file for Charities & Nonprofits**.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print  File by the due date for filing your return. See instructions.	Name of exempt organization <b>MHA HEALTH, RESEARCH AND EDUCATIONAL FOUNDATION</b>	Employer identification number <b>23-7068714</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P.O. BOX 1909</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>MADISON, MS 39130-1909</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
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)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**RICHARD GRIMES**

- The books are in the care of ► **116 WOODGREEN CROSSING - MADISON, MS 39110**  
Telephone No. ► **601-368-3210** FAX No. ► **601-368-3200**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year \_\_\_\_\_ or
- ☒ tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$ <b>150.</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$ <b>0.</b>
<b>c</b> Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$ <b>150.</b>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**LHA For Paperwork Reduction Act Notice, see Instructions.**

Form **8868** (Rev. 1-2011)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

<b>Part II</b>		<b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed)	
Type or print  File by the extended due date for filing your return See instructions	Name of exempt organization <b>MHA HEALTH, RESEARCH AND EDUCATIONAL FOUNDATION</b>		Employer identification number <b>23-7068714</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P.O. BOX 1909</b>		
	City, town or post office, state, and ZIP code For a foreign address, see instructions. <b>MADISON, MS 39130-1909</b>		

Enter the Return code for the return that this application is for (file a separate application for each return)

**0 4**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**RICHARD GRIMES**

- The books are in the care of **116 WOODGREEN CROSSING - MADISON, MS 39110**

Telephone No. **601-368-3210**

FAX No **601-368-3200**

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **MAY 15, 2012**

5 For calendar year **JUL 1, 2010**, or other tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

**TAXPAYER HAS BEEN UNABLE TO OBTAIN ALL INFORMATION NECESSARY TO COMPLETE THE RETURN AND REQUESTS ADDITIONAL TIME TO FILE.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$	<b>0.</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	<b>8b</b>	\$	<b>0.</b>
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	<b>8c</b>	\$	<b>0.</b>

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐

Title **PRESIDENT**

Date ☐

Form 8868 (Rev. 1-2011)