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## Form **990-PF**

Department of the Treasury

**Return of Private Foundation** 

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

foundation may be able to use a convert this return to eatisfy state reporting requirements

2010

OMB No 1545-0052

intern	al Hev	enue Service Note The Touridation may i	be able to use a copy of this	return to satisfy state repor		
For	calen	dar year 2010, or tax year beginning DEC	1, 2010	, and ending	NOV 30, 2011	
G (	heck	all that apply: Initial return		ormer public charity	Final return	
_		Amended return	Address chan		Name change	
Nar	ne of	foundation			A Employer identification	number
			7017		70 0004444	
1111	ab	FENNER FRENCH FOUNDAT		D	72-0984444	<del></del>
Nun	nder ar	nd street (or P O box number if mail is not delivered to street	addréss)	Room/suite	B Telephone number	0.0
		6123 MARQUETTE PL.			504-866-32	
City	or to	own, state, and ZIP code  NEW ORLEANS, LA 7011	Ω		C If exemption application is p D 1. Foreign organizations	
L	,pool,	NEW ORLEANS, LA 7011 type of organization: X Section 501(c)(3) ex			2. Foreign organizations me check here and attach co	
"	_		Other taxable private founda-	ation		
L F		rket value of all assets at end of year J Accounti		Accrual	E If private foundation sta under section 507(b)(1)	
		, ,	ther (specify)	Accidat		
	·\$	669,328. (Part I, colu	mn (d) must be on cash i	basis)	F If the foundation is in a tunder section 507(b)(1)	
_	irt I		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	0.		N/A	
	2	Check X If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	2.	2.		STATEMENT 1
	4	Dividends and interest from securities	11,269.	11,269.		STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)	DEA			
ம்	6a	Net gain or (loss) from sale of assets not on line 10	9,503			
enn	b	Gross sales price for all assets on line 6a 23,353.	1325			
Revenue	7	Capital gain net income (from Part IV, line 2)	JUL 36	၂၄ <b>၅</b> ,503.		
	8	Net short-term capital gain	1-1	1012  8		
	9	Income modifications Gross sales less returns	LON-THE NO			
	l .	and allowances				
	1	Less Cost of goods sold				
	i .	Gross profit or (loss)				<del></del>
	11 12	Other income  Total Add lines 1 through 11	20,774.	20,774.		
	13	Compensation of officers, directors, trustees, etc	20,774.	20,774.		0.
	14	Other employee salaries and wages			~	
		Pension plans, employee benefits				
ses	169	Legal fees				
ens	b	Accounting fees STMT 3	3,934.	0.		3,934.
ΕX	C	Other professional fees STMT 4	7.	7.		0.
<u>×</u>	17	Interest				
Operating and Administrative Expens	18	Taxes STMT 5	517.	0.		0.
nist	19	Depreciation and depletion				
Ē	20	Occupancy				
ΨĔ	21	Travel, conferences, and meetings	3,555.	0.		0.
äğ	22	Printing and publications				
ing	23	Other expenses				
rat	24	Total operating and administrative	0.010	_		2 024
ာ ဇ္ဇီ		expenses Add lines 13 through 23	8,013.	7.	<del></del>	3,934.
<u>`</u>	25	Contributions, gifts, grants paid	21,700.			21,700.
2	26	Total expenses and disbursements.	20 712	7.		25,634.
型である。   	07	Add lines 24 and 25 Subtract line 26 from line 12:	29,713.	<del> </del>		45,034.
Ó	i		<8,939.			
-	ì	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)		20,767.	<del> </del>	
	i	Adjusted net income (if negative, enter -0-)		20,707.	N/A	
0235 12-0	01 7-10	LHA For Paperwork Reduction Act Notice, see	the instructions.	·	aul	Form <b>990-PF</b> (2010)

		-	
Form	390-P	モ /うへ・	ını

FENNER FRENCH FOUNDATION

72-0984444

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Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of ye	
	Balance Sheets 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	163,478.	154,539.	154,539.
3	Accounts receivable ►			
	Less: allowance for doubtful accounts ▶			
4	Pledges receivable ►	].	j	
	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other	r.		
	disqualified persons			
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts ▶			
र्घ   8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
⋖   10	a Investments - U.S. and state government obligations $$ STMT $$ 6 $$ $$	62,653.	62,653.	119,192.
1	b Investments - corporate stock STMT 7	498,289.	498,289.	<u>395,597.</u>
	Investments - corporate bonds		<u>-</u>	
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 ►)			
		504 400	<b>515</b> 404	660 200
$\overline{}$	Total assets (to be completed by all filers)	724,420.	715,481.	669,328.
	Accounts payable and accrued expenses			
18	Grants payable			
Liabilities 02 02 05 05 05 05 05 05 05 05 05 05 05 05 05	Deferred revenue			
± 20	Loans from officers, directors, trustees, and other disqualified persons			
별 21	· · · · · · · · · · · · · · · · · · ·			
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			
8 24	Unrestricted			
	Temporarily restricted	<del></del>		
Ba 26	· · · · · · · · · · · · · · · · · · ·			
P 2	Foundations that do not follow SFAS 117, check here			
교	and complete lines 27 through 31			
Ö 27	Capital stock, trust principal, or current funds	490,630.	490,630.	
28 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balance	Retained earnings, accumulated income, endowment, or other funds	233,790.	224,851.	
호   30	Total net assets or fund balances	724,420.	715,481.	
31	Total liabilities and net assets/fund balances	724,420.	715,481.	
Part	III Analysis of Changes in Net Assets or Fund Ba	alances		
		20		
	il net assets or fund balances at beginning of year - Part II, column (a), line ( st agree with end-of-year figure reported on prior year's return)	OU .		724,420.
	st agree with end-of-year figure reported on prior year's return) er amount from Part I, line 27a		1 2	<8,939.>
	er increases not included in line 2 (itemize)		2	<u> </u>
	lines 1, 2, and 3		3 4	715,481.
	reases not included in line 2 (itemize)		5	713,401.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b) line 30	6	715,481.
<u></u>		107111 (b); iiilo 00		Form <b>990-PF</b> (2010)

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Form 990-PF (2010) <b>FEN</b>	NER F	RENCH FOUND	ATION				7	<u> 2-098</u>	4444	Page 3
Part IV Capital Gains	and Los	ses for Tax on In	vestment	Income						
		d(s) of property sold (e.g. r common stock, 200 shs			( <b>b)</b> I	How acquired - Purchase - Donation		acquired day, yr.)	( <b>d)</b> Date (mo., da	
1a MOTOROLA MOBIL	ITY H	LDGS:MMI		<u> </u>		P	04/0	5/01	01/04	4/11
b MOTOROLA MOBIL						P	04/0	5/01	01/0	5/11
c CHICOS FAS INC						P	08/0	2/02	09/30	0/11
d VISTEON CORP C						P	05/0	9/11	05/09	9/11_
e										
(e) Gross sales price	(f) Do	epreciation allowed (or allowable)		st or other basis xpense of sale				Gain or (loss is (f) minus		
a 16.				2	25.					<9.
b 17.					25.					<8.
c 23,311.				13,80	0.				9	,511.
d 9.										9.
е			-							
Complete only for assets showing	ng gain in c	olumn (h) and owned by t	the foundation	on 12/31/69		-		Col (h) gaın		
(i) F M.V. as of 12/31/69		) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		C	col (k), but Losses	not less tha (from col. (	n -0-) <b>or</b> (h))	
a				-				-		<9 <b>.</b> :
b				<del></del> -						<8.
C									9	,511.
d									-	9.
e				-						
2 Capital gain net income or (net ca	apital loss)	{ if gain, also enter If (loss), enter -0-	in Part I, line	7 7	}	2			9	,503.
. ,	,	•		•	)					
3 Net short-term capital gain or (los			id (6):		)					
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c)	).			P	,		N/A		
Part V Qualification L	Inder Se	ection 4940(e) for	Reduced	Tax on Net	lnv	estment li	ncome			
(For optional use by domestic private							<u> </u>			
(For optional use by domestic private	e iouiluatio	ns subject to the section :	1340(a) lax Uli	i ilet ilivestillelit ii	icom	c. <i>)</i>				
If section 4940(d)(2) applies, leave t	hıs part bla	nk.								
Man the foundation liable for the con	tion 4040 t	ay an the distributeble am	ount of any	oor in the base no	rioda				□ Vac	X No
Was the foundation liable for the sec				•	Hour				163	LAL INU
If "Yes," the foundation does not qua 1 Enter the appropriate amount in					100		·			
<del></del>	each coluir		uctions before	making any enur			—т—		(d)	
(a) Base period years	.	(b) Adjusted qualifying dis	tributions	Met value of no	(C) ancha	) ritable-use asse	ate	Distri	bution ratio vided by col.	(0))
Calendar year (or tax year beginni	ing in)			Net value of the	JIICIIa			(col. (b) al		
2009			6,164.	·		627,50				<u>57632</u>
2008			7,269.			566,56				48131
2007			9,081.			792,52				49312
2006			6,000.		1	,126,10				<u>31969</u>
2005		2	3,798.		<u> </u>	,124,07	4.		.0	<u> 21171</u>
2 Total of line 1, column (d)							2	<u> </u>	.2	<u>08215</u>
3 Average distribution ratio for the	5-year base	e period - divide the total o	on line 2 by 5,	or by the number	r of ye	ears				
the foundation has been in existe	nce if less t	than 5 years					3		.0	<u>41643</u>
4 Enter the net value of noncharital	ble-use ass	ets for 2010 from Part X,	line 5				4		599	,941.
		ŕ								
5 Multiply line 4 by line 3							5		24	,983.
· manapi, into 1 by into 0										1000
6 Enter 1% of net investment incor	ne (1% of F	Part I line 27h)					6			208.
Citter 176 of het investment incom	116 (170 011	arri, mie 275)					-	†	· · · · · · · · · · · · · · · · · · ·	200.
7 Add lippo Food 6							7		<b>2</b> E	,191.
7 Add lines 5 and 6							-	+	45	<u>, 1710</u>
<b>6 F</b> -10 16	- B- · · · · ·	1 A							25	621
8 Enter qualifying distributions from							8		45	<u>,634.</u>
If line 8 is equal to or greater tha	n line 7, che	eck the box in Part VI, line	1b, and comp	olete that part usir	ng a 1	l% tax rate.				
See the Part VI instructions.									- 000	DE (0040)

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	<u>istru</u>	ction	<u>15)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%		2	<u> 80</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			0
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
-	Add lines 1 and 2			08.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			08.
	Credits/Payments:			
	2010 estimated tax payments and 2009 overpayment credited to 2010			
	Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c 490.			
	,			
			1	90.
	Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			<del>50 •</del>
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  9			
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2	82.
	Enter the amount of line 10 to be: Credited to 2011 estimated tax			0.
	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	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			
	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers ▶ \$ 0.			ļ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? $N/A$	4b		<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
	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		17	
_	remain in the governing instrument?	6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year?	7	A	
	If "Yes," complete Part II, col. (c), and Part XV			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	10	<u> </u>	X
	For	m <b>990</b>	)-PF	(2010)

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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?

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:		,			
(1). Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			-	
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	37/3	<u>.</u> .	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		. —		]	
expenditure responsibility for the grant?		1/A ∐ Y∈	s L No	Ì	
If "Yes," attach the statement required by Regulations section 53 4945					1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No		
a personal benefit contract?	are and banefit contract?	+€	S LAL NO	e b	x
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b	- <del>  ^</del>
If "Yes" to 6b, file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax s	holter transportion?	[	s X No	ł	}
		T t	N/A	7b	-
<u>b If "Yes," did the foundation receive any proceeds or have any net income attribu</u>		anagers Highly			
Part VIII Paid Employees, and Contractors	ccs, i candation in	anagers, mgm	•		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense ount, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	all	lowances
SEE STATEMENT 8		0.	0	•	0.
		1			
		Į.	1		
		1 10015 11	l	⊥	
Compensation of five highest-paid employees (other than those inc		, enter "NONE."	(d) Contributions to	(0)	Evnanca
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acci	) Expense ount, other
	devoted to position		compensation	aii	lowances
NONE					
		<del></del>			
	<u> </u>	-		<del> </del>	
	<u> </u>			+	
		<del> </del>		<del></del> -	
	}				
otal number of other employees paid over \$50,000	<u> </u>	J			
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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(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 number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the	Expenses
1 N/A	-,	<del></del>
2		
3		· -
4		
	<del></del>	
Part IX-B   Summary of Program-Related Investments		<del></del>
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount
1 N/A		
	·····	
•		
2		
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 four	idations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	590,604.
	Average of monthly cash balances	1b	590,604. 18,473.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	609,077.
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	609,077.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,136.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	599,941.
6	Minimum investment return Enter 5% of line 5	6	29,997.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	29,997.
2a	Tax on investment income for 2010 from Part VI, line 5 2a208.		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	208.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	29,789.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	29,789.
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	29,789.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	.	05 624
а	(-,,,	1a	<u>25,634.</u>
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	05 604
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	25,634.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	000
	income. Enter 1% of Part I, line 27b	5	208.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	25,426.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	r the section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d)</b> 2010
1 Distributable amount for 2010 from Part XI, line 7				29,789.
2 Undistributed income, if any, as of the end of 2010			-1	
a Enter amount for 2009 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 2,980.				
<b>b</b> From 2006				
<b>c</b> From 2007				
<b>d</b> From 2008				
e From 2009 5,769.				
f Total of lines 3a through e	8,749.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 25,634.				
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				25,634.
e Remaining amount distributed out of corpus	0.			4 455
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	4,155.			4,155.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,594.			
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.	B		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	0.		·	
9 Excess distributions carryover to 2011.	,			
Subtract lines 7 and 8 from line 6a	4,594.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009 4,594.				
e Excess from 2010				Form <b>990-PF</b> (2010)

	FRENCH FOUN				984444 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	or 2010, enter the date of	the ruling	<b>▶</b>	, <del></del> -	
<b>b</b> Check box to indicate whether the found	dation is a private operatii	ng foundation described i		4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	410000	Prior 3 years	(1) 0007	/a) Tatal
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for		•			
each year listed					
<b>b</b> 85% of line 2a		<u> </u>		<del></del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed			· · · · · · · · · · · · · · · · · · ·	ļ	<u> </u>
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			1		
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)		<u> </u>			
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 Info			if the foundatio	n had \$5,000 or n	nore in assets
at any time during t	the year-see the	instructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by th	e foundation before the c	ose of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	section 507(d)(2).)			
FLORA FENNER FRENCH				<del></del>	
<b>b</b> List any managers of the foundation wh			or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation ha	is a 10% or greater intere	St.			
NONE					<u></u>
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		
		to preselected charitable			
the foundation makes gifts, grants, etc	(see instructions) to indi	viduals or organizations u	nder other conditions, o	complete items 2a, b, c, a	nd d 
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
SEE STATEMENT 9					
<b>b</b> The form in which applications should t	be submitted and informa	ition and materials they st	nould include:		
				<del></del>	
c Any submission deadlines:					
		<del></del>			
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	
200004 40 07 40					Form <b>990-PF</b> (2010)
023601 12-07-10					101111 <b>330-FF</b> (2010)

Cappionentary information			·	
3 Grants and Contributions Paid During the Y	ear or Approved for Future I	Payment		
Recipient  Name and address (home or business)	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
	or substantial contributor	recipient		
a Paid during the year				
		<u> </u>		
			•	
SEE STATEMENT 10				
Total			<b>▶</b> 3a	21,700.
b Approved for future payment				
NONE				
Total			<b>▶</b> 3h	0.

023611 12-07-10

Part XVI-A Analysis of Income-Pro	ducina Activitie	S			
			T = 1		
nter gross amounts unless otherwise indicated.  Program service revenue:	(a) Business code	usiness income (b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
a	_				
b	1 1		+		
			+		
1	-		+		
	-		+		<del></del>
g Fees and contracts from government agencies				7	
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments			14	2.	
Dividends and interest from securities			14	11,269.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property Other investment income			<del>                                     </del>	···	
Gain or (loss) from sales of assets other			<del>  </del>		~=
than inventory			18	9,503.	
Net income or (loss) from special events		· · · · · · · · · · · · · · · · · · ·			
Gross profit or (loss) from sales of inventory					
Other revenue:					
a	_				
b		· ·			
C	1 1	<u></u>			
d	_		<del>  </del>		
e Subtotal Add columns (b), (d), and (e)	— <del>  -</del>	0	+ +-	20,774.	
Total Add line 12, columns (b), (d), and (e)	l		•1	13	20,7
e worksheet in line 13 instructions to verify calculation:	: )				
art XVI-B Relationship of Activitie		nplishment of E	Exempt P	urposes	
ne No. Explain below how each activity for which the foundation's exempt purposes (other to be a constant).	income is reported in c	column (e) of Part XVI	-A contributed	importantly to the accomp	olishment of
the foundation's exempt purposes (other t	nan by providing lund:	s for such purposes).		<del></del>	
	,			<del>-</del>	
1					
				-	

023621 12-07-10

1 410 70011	Exempt Organ		and mansactions at	na neiationsinps with nonone	tubic		
1 Did the or		······································	wing with any other organization	n described in section 501(c) of	1	Yes	No
	=	)(3) organizations) or in section					
		ation to a noncharitable exempt	- · · · · · · · · · · · · · · · · ·				
(1) Cash		,	•		1a(1)		_X_
(2) Other					1a(2)	$\neg \neg$	X
b Other tran							
	of assets to a noncharital	ble exempt organization			1b(1)		Х
• •		ncharitable exempt organization	1		1b(2)		X_ X
	al of facilities, equipment,	· -	•		1b(3)	$\neg \neg$	X
	bursement arrangements				1b(4)	$\neg \neg$	X
• •	s or loan guarantees				1b(5)	$\neg \neg$	X
		embership or fundraising solicita	ations		1b(6)	-	X
		uling lists, other assets, or paid			10		X
				ays show the fair market value of the goods,		——— ets	
			` '	e in any transaction or sharing arrangement,		,,,,	
	· ·	other assets, or services receive		on any transaction of sharing arrangement,	311011 111		
(a) Line no	(b) Amount involved		ible exempt organization	(d) Description of transfers, transactions, and			
(4) 2.110 110	(b) runount mirotroa	N/A		(a) Bossiphon of transfers, transcentions, trans			
			<u></u>	<del>                                     </del>	•		
<del></del>			<del></del>				
<del></del>					•		
<del></del>				<u> </u>			
<del></del>							
<del>-</del>							<del>-</del>
			<del> </del>				
			<del></del>				
2a Is the four	ndation directly or indirect	tly affiliated with, or related to, o	one or more tax-exempt organiza	ations described			_
ın section	501(c) of the Code (other	r than section 501(c)(3)) or in s	ection 527?		Yes	LX	No
<b>b</b> If "Yes," co	omplete the following sche	edule.					
	(a) Name of org	janization	(b) Type of organization	(c) Description of relation	ship		
	N/A						
				statements, and to the best of my knowledge and b	elief, it is true	е, сопе	ct,
Sign   and c	complete Declaration of prepa	arer (other than taxpayer or fiduciary) i	s based on all information of which p	reparer has any knowledge			
Here	1/6 1	2 topach	1///9/	PRESIDENT			
	Signature of officer or tru	ustee	Date	Title			
	Print/Type preparer's na			Date Check If PTIN	_		
	BONNIE M.	71	. , //.	self- employed	<b>س</b> د	./	
Paid	JD, LLM	"""   % ) m	ne 11 11/12/20 1	7-18-12 PC	2059	40	011
Preparer	Firm's name ► LAP	ORTE, APAC	- July Man	Firm's EIN ▶			
Use Only	THE DATE	OHILL, MENC	•	Timi S Lin			
<b>y</b>	Firm's address > 1 1	1 VETERANS MEM	MORTAL RIVID	SUITE 600			
	1		005-4958		1)835-	_ 5 5	22
	I ME	THILLE, DA /UU	70J-4330		orm <b>990</b> -		
				r	OHH 330.	- I (	2010)

023622 04-26-11

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CAS	H IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
INTEREST				,		2.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A				2.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM S	SECUE	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
DIVIENDS		11,269.		0.	11,2	69.
TOTAL TO FM 990-PF, PART I, L	N 4	11,269.		0.	11,2	69.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
ACCOUNTING -	3,934.		0.		3,9	34.
TO FORM 990-PF, PG 1, LN 16B	3,934.		0.		3,9	34.
FORM 990-PF C	THER PROFES	SIONAL FE	ES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTEI NET INCOM		
INVESTMENT FEES	7.		7.			0.
TO FORM 990-PF, PG 1, LN 16C	7.		7.			0.

FORM 990-PF	TAX	ES			STATEMENT	5
DESCRIPTION	(A) (B) EXPENSES NET INVES PER BOOKS MENT INCO					
FEDERAL TAXES	517.	0.				0.
TO FORM 990-PF, PG 1, LN 18	517.		0.			0.
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT	6
DESCRIPTION	U.S GOV'		вос	K VALUE	FAIR MARKET	Г
US GOVT SECURITIES	X	-		62,653.	119,19	92.
TOTAL U.S. GOVERNMENT OBLIGA	TIONS	·		62,653.	119,19	92.
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART I	I, LINE 10A	:		62,653.	119,19	92.
FORM 990-PF	CORPORAT	E STOCK		<del></del>	STATEMENT	7
DESCRIPTION			вос	K VALUE	FAIR MARKET	r
SECURITIES		•	•	498,289.	395,59	97.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	•		498,289.	395,59	97.

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI FOUNDATION MANAG		STAT	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
FLORA FENNER FRENCH 6123 MARQUETTE PL NEW ORLEANS, LA 70118	PRESIDENT 0.50	0.	0.	0.
RONALD J. FRENCH 6123 MARQUETTE PL NEW ORLEANS, LA 70118	VICE-PRESIDENT 0.50	0.	0.	0.
RONALD J. FRENCH, JR. (JAY) 6123 MARQUETTE PL NEW ORLEANS, LA 70118	SECRETARY 0.50	0.	0.	0.
JOHN FENNER FRENCH 6123 MARQUETTE PL NEW ORLEANS, LA 70118	TREASURER 0.50	0.	0.	0.
HARDIE C. FRENCH 6123 MARQUETTE PL NEW ORLEANS, LA 70118	NOMINATING CHAI	RMAN 0.	0.	0.
MATTHEW S. FRENCH 6123 MARQUETTE PL NEW ORLEANS, LA 70118	DIRECTOR 0.50	0.	0.	0.
WILLIAM D. FRENCH 6123 MARQUETTE PL NEW ORLEANS, LA 70118	LEGAL ADVISOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

FLORA FENNER FRENCH, PRESIDENT 6123 MARQUETTE PLACE NEW ORLEANS , LA 70118

TELEPHONE NUMBER

504-508-0818

FORM AND CONTENT OF APPLICATIONS

A REQUEST FOR FUNDING SHOULD BE SUBMITTED IN WRITING STATING THE PURPOSE FOR WHICH THE FUNDS WILL BE USED, PROPOSED BUDGET IF APPLICABLE, AND INFORMATION CONCERNING CHARITABLE STATUS.

ANY SUBMISSION DEADLINES

APPLICATIONS ARE ACCEPTED AT ANY TIMES.

RESTRICTIONS AND LIMITATIONS ON AWARDS

PREFERENCE IS GIVEN TO CHARITABLE ORGANIZATIONS IN THE NEW ORLEANS AREA.

STATEMENT 10

FORM 990-PF

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ART IN BLOOM (NOMA) ONE COLLINS DIBOLL CIRCLE, CITY PARK NEW ORELANS, LA 70124	NONE ANNUAL SUPPORT	PUBLIC CHARITY	1,350.
HERMANN-GRIMA/GALLIER HISTORIC HOUSES PO BOX 56836 NEW ORLEANS, LA 70156	NONE ANNUAL SUPPORT	PUBLIC CHARITY	1,000.
HIGHLANDS-CASHIERS HOSPITAL FOUNDATION 190 HOSPITAL DRIVE HIGHLANDS, NC 28741	NONE ANNUAL SUPPORT	PUBLIC CHARITY	2,000.
PRO BONO PUBLICO FOUNDATION PO BOX 50820 NEW ORELANS, LA 70150	NONE ANNUAL SUPPORT	PUBLIC CHARITY	1,000.
THE BASCOM'S ENDOWMENT FUND 323 FRANKLIN RD HIGHLANDS, NC 28741	NONE ANNUAL SUPPORT	PUBLIC CHARITY	1,500.
TULANE UNIVERSITY MEDICAL CENTER 1415 TULANE AVE NEW ORELANS, LA 70112		PUBLIC CHARITY	12,000.
ZOO-TO-DO, AUDUBON NATURE INSTITITE 6500 MAGAZINE STREET NEW ORELANS, LA 70118	NONE ANNUAL SUPPORT	PUBLIC CHARITY	2,050.
HEALTHCORPS 508 8TH AVENUE, STE 1101 NEW YORK, NY 10018	NONE ANNUAL SUPPORT	PUBLIC CHARITY	100.

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

FENNER, FRENCH FOUNDATION			72-0984444
ENGLISH SPEAKING UNION 144 EAST 39TH STREET NEW YORK, NY 10016	NONE ANNUAL SUPPORT	PUBLIC CHARITY	500.
HENLEYFIELD COMMUNITY CENTER PO BOX 1199 PICAYUNE, MS 39466	NONE ANNUAL SUPPORT	PUBLIC CHARITY	200.
TOTAL TO FORM 990-PF, PART XV, L	INE 3A		21,700.

Form **8868** 

(Rev Vanuary 2011)

Department of the Treasury

Internal Revenue Service

## Sydo Acos 4-14-14 Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If you a	re filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box		•	$\mathbf{x}$
-	re filing for an Additional (Not Automatic) 3-Month Ext	-		form)	-	
-	omplete Part II unless you have already been granted a	•			m 8868	
	c filing (e-file). You can electronically file Form 8868 if y		· · · · · · · · · · · · · · · · · · ·			oration
	o file Form 990-T), or an additional (not automatic) 3-mor					
•	file any of the forms listed in Part I or Part II with the exc		•			
	Benefit Contracts, which must be sent to the IRS in pap	•				
	irs gov/efile and click on e-file for Charities & Nonprofits		,			
Part I	Automatic 3-Month Extension of Time		bmit original (no copies needed)			
A corpora	ition required to file Form 990-T and requesting an auton			plete		
Part I only	,				<b>&gt;</b>	
	corporations (including 1120-C filers), partnerships, REM ome tax returns	ICs, and ti	rusts must use Form 7004 to request an	exten.	sion of time	
Type or print	Name of exempt organization			Empl	oyer identification	number
File by the	FENNER FRENCH FOUNDATION			7	2-0984444	
due date for filing your return See	Number, street, and room or suite no. If a P O box, s 6123 MARQUETTE PL.	ee instruc	tions.			
instructions	City, town or post office, state, and ZIP code For a foliation NEW ORLEANS, LA 70118	oreign add	ress, see instructions			
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
Form 990	)	01	Form 990-T (corporation)			07
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
	FLORA FENNER F					
	ooks are in the care of   6123 MARQUETTE	PL -	NEW ORLEANS, LA 701	18		
Teleph	none No ► 504-866-3290		FAX No 🕨		<del></del>	
	organization does not have an office or place of business				•	· 🔲
• If this	is for a Group Return, enter the organization's four digit	1			r the whole group, o	
box 🕨	If it is for part of the group, check this box				ers the extension is	s for
1 I re	quest an automatic 3 month (6 months for a corporation JULY 15, 2012 , to file the exemp	•	to file Form 990-T) extension of time unt tion return for the organization named a		The extension	
is fo	or the organization's return for					
▶[	calendar year or					
<b>▶</b>	X tax year beginning DEC 1, 2010	, an	d ending NOV 30, 2011	-11	<del></del>	
2 If th	ne tax year entered in line 1 is for less than 12 months, c	heck reas	on. Initial return Fina	al retur	n	
	Change in accounting period					
	nis application is for Form 990·BL, 990 PF, 990·T, 4720,	or 6069, e	enter the tentative tax, less any			^
	nrefundable credits. See instructions	anta	refundable gradute cod	3a	\$	0.
	nis application is for Form 990-PF, 990-T, 4720, or 6069,			25	<u> </u>	0.
	imated tax payments made Include any prior year overg			3b	\$	<u> </u>
	lance due. Subtract line 3b from line 3a Include your pausing EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.
	If you are going to make an electronic fund withdrawal				EO for payment ins	
	or Paperwork Reduction Act Notice, see Instructions				Form <b>8868</b> (R	

023841 01-16-12

Form 8868 (Rev. 1-2011)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension o	complete only Part II and check this bo	OX		► X
Note. Only complete Part II if you have already been granted an a				868	,
If you are filing for an Automatic 3-Month Extension, comple					
Part II Additional (Not Automatic) 3-Month E			opies n	eeded)	
ype or Name of exempt organization Employer iden					
print			ļ ",	0001	111
FIGURE FRENCH FOUNDATION				2-098 <b>4</b>	444
Number, street, and room or suite no If a P O box, s due date for filling your	ee instruc	tions			
return See Instructions NEW ORLEANS, LA 70118	oreign add	lress, see instructions			
MEN OKHEANS, DA 70110					
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
ls For	Code	Is For			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	d an autor	<u>natic 3-month extension on a previoι</u>	ışly file	d Form 886	8.
<ul> <li>FLORA FENNER F</li> <li>The books are in the care of ► 6123 MARQUETTE</li> <li>Telephone No ► 504-866-3290</li> <li>If the organization does not have an office or place of busines</li> </ul>	PL -	FAX No. ▶	118		
<ul> <li>If this is for a Group Return, enter the organization's four digit</li> </ul>			ns is foi	the whole	group, check this
box If it is for part of the group, check this box		•			
4 I request an additional 3-month extension of time until		BER 15, 2012			
5 For calendar year, or other tax year beginning			NOV	30, 2	011
6 If the tax year entered in line 5 is for less than 12 months, of			Fınal r		
Change in accounting period  State in detail why you need the extension					
7 State in detail why you need the extension ALL INFORMATION REQUIRED TO P.	REPAR	E A COMPLETE AND ACC	TIRA	те тах	RETURN
HAS NOT YET BEEN RECEIVED.	KDI AIK	E A COMPANIE MAD MC	<u> </u>		
IMD NOT THE BUILD RUCHTVIDE.					
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	enter the tentative tax, less any			
nonrefundable credits See instructions	0. 0000, 0	,	8a	\$	208.
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 al	-				
previously with Form 8868		•	8b	\$	490.
c Balance due. Subtract line 8b from line 8a Include your pa	ayment wi	th this form, if required, by using		^ <u></u>	
EFTPS (Electronic Federal Tax Payment System) See instr		·	8c	\$	0.
		nd Verification			
Under penalties of perjury, I declare that I have examined this form, includit is true, correct, and complete, and that I am authorized to prepare this fe	ding accom orm.	panying schedules and statements, and to th	ne best o	f my knowled	ge and belief,
Signature ▶ Title ▶	PRESI	DENT	Date		

Form 8868 (Rev 1-2011)