

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052

Intern	al Rev	enue Service NOTE. The Tourndation may t		return to sati	sty state tepo				Open to pub	lic Inspe	ction
For c	alen	dar year 2012 or tax year beginning OCT	1, 2012	, and e	nding	SEP :	30	, 2013			
Nan	ne of	foundation				A Emplo	yer i	dentification	number		
\mathbf{L}	A-l	MS-W. TN DISTRICT FOUND	ATION, INC.								
D	IS:	TRICT FOUNDATION				72-	-09	905792			
Num	ber ar	nd street (or P O box number if mail is not delivered to street	address)		Room/suite	B Teleph	one	number			
5	319	9-B DIDESSE DRIVE				22!	5 – '	769-92	33		
City	or to	wn, state, and ZIP code		_		C If exemp	otion :	epplication is p	ending, check he	re 🕨	
_		ON ROUGE, LA 70808-640	1						U .		
		all that apply Initial return	Initial return of a fo	rmer public o	harity	D 1. Fore	eian (organizations	s, check here	>	
		Final return	Amended return		,		-	_			
		Address change	Name change			2. Fore	ign or	ganizations me	eting the 85% teamputation	st,	
H C	hack	type of organization X Section 501(c)(3) ex				1					
	_		Other taxable private founda	tion					tus was termin (A), check her		
1 52		rket value of all assets at end of year J Accounts		Accr	ual						
		·	her (specify)	ACC	uai				60-month term (B), check her		
(II		Part II, col. (c), line 16) 0 0 0 0 0 0 0 0 0 0		nasis)		under	36011	011 307 (0)(1)	(L), check her		
			·	•		(-)	٠		(d) Disbu	reement	
Pa	rt I	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		vestment ome	(0)	nco Inco	sted net me	for chantable (cash bas	ses	
	_	· 	39,981.			<u> </u>	N/		(cash bas	only)	
		Contributions, gifts, grants, etc., received	39,301.	·····		ļ	.7 / /		 		•••••
		Check X if the foundation is not required to attach Sch. B Interest on savings and temporary	256.		256.	 			 	 -	
	3	Interest on savings and temporary cash investments	8,052.		8,052.	 			STATEM	יוינאים	<u>1</u>
	4	Dividends and interest from securities	6,032.		0,052.	 			SIALER	EdN T	- 1
	5a	Gross rents							ļ		
	b	Net rental income or (loss)			142 444	 			<u></u>		
<u>•</u>	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all						REC	EIVED-		·
enc	b	assets on line 6a	,,			 				~ Q	
Revenue	7	Capital gain net income (from Part IV, line 2)			0.		\sim		A A AALA	18	
,	8	Net short-term capital gain		, , , , , ,			302		2 9 2014	40	<u>ś</u>
į	9	Income modifications Gross sales less returns		·····	·····		,,,			100	<u> </u>
•	10a	and allowances .	·			ļ		OGD	EN. UT	, !	<u> </u>
1	b	Less Cost of goods sold				ļ	<u></u>				·
	C	Gross profit or (loss)									
	11	Other income .	6,820.		0.				STATEM	ENT,	2
<u> </u>	12	Total. Add lines 1 through 11	55,109.		8,308.	ļ <u> </u>					
D	13	Compensation of officers, directors, trustees, etc	0.		0.				ļ		0.
	14	Other employee salaries and wages									
,	15	Pension plans, employee benefits									
Ş	16a	Legal fees .				ļ					
Jen	b	Accounting fees STMT 3	1,003.		0.	 					0.
ă	c	Other professional fees									
Operating and Administrative Expenses	17	Interest							<u> </u>		
rat	18	Taxes STMT 4	181.		0.						0.
ıist	19	Depreciation and depletion .		_		<u> </u>					
Ē	20	Occupancy	2,500.		0.				ļ		0.
Ad	21	Travel, conferences, and meetings	303.		0.						0.
Ē	22	Printing and publications									
ğ	23	Other expenses STMT 5	9,594.		0.						0.
atir		Total operating and administrative									
per	1	expenses. Add lines 13 through 23	13,581.		0.						0.
Ō	25	Contributions, gifts, grants paid	22,995.						2	2,9	95.
		Total expenses and disbursements.									
		Add lines 24 and 25	36,576.). 2				2,995.		
	27										
	l	Excess of revenue over expenses and disbursements	18,533.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ļ					
	1	Net investment income (if negative, enter -0-)			8,308.				1		
	1	Adjusted net income (if negative, enter -0-)					N/	A			
2235									- 00/	O DE	10010

561,829.

5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains	and Lo	sses for Tax on in	vestment	Income							
		nd(s) of property sold (e g or common stock, 200 shs		` P	How acquired - Purchase - Donation		o , day, yr)	(d) Date sold (mo , day, yr)			
1a											
b NC	NE						<u> </u>		<u></u>		
С											
_d					ļ	<u></u>	ļ				
е	1		 .		<u> </u>		<u> </u>				
(e) Gross sales price	(f) I	Depreciation allowed (or allowable)		t or other basis xpense of sale		(h) Gain or (loss) (e) plus (f) minus (g)					
<u>a</u>							_				
b											
<u>C</u>	<u> </u>					_					
<u>d</u>	<u> </u>	 				 »					
Complete only for assets show	00 0010 10	column (h) and owned by	the foundation	on 12/31/60			(I) Coir				
Complete only for assets shown	, , , , , , , , , , , , , , , , , , , 	- `, ' '				c		is (Col. (h) gain but not less thai			
(i) F M V as of 12/31/69	-	(j) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), if any			Los	sses (from col (h))		
<u>a</u>											
b											
<u>C</u>	<u> </u>										
d	 										
e					_	· · · · · · · · · · · · · · · · · · ·					
2 Capital gain net income or (net c	apital loss	If gain, also enter If (loss), enter -0			}	2					
3 Net short-term capital gain or (lo	ss) as defi	ned in sections 1222(5) ar	nd (6)								
If gain, also enter in Part I, line 8					<u>}</u>						
If (loss), enter -0- in Part I, line 8				<u> </u>	\bot	3					
Part V Qualification l	Jnder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estment Ir	ncom	<u>e</u>			
(For optional use by domestic private	te foundati	ons subject to the section 4	4940(a) tax on	net investment in	icome	∍)					
If section 4940/d\/2\ applies leave	thic part hi	ank									
If section 4940(d)(2) applies, leave	uus part or	allk									
Was the foundation liable for the se	ction 4942	tax on the distributable am	nount of any ye	ear in the base per	nod?				Yes X No		
If "Yes," the foundation does not qua											
1 Enter the appropriate amount in	each colu		nstructions be	fore making any e	ntries	3			73\		
(a) Base period years	. 1	(b)	tributions	Not value of no	(c)	ritable-use asse	,,,	Distrit	(d) outlon ratio		
Calendar year (or tax year beginn	ing in)	Adjusted qualifying dis		Net value of no	nicha			(col (b) divided by col. (c))			
2011			2,233.	-		381,43					
2010	-		0,434.			372,55			.135373		
2009			6,750. 1,475.			414,36			.088689		
2008			6,398.			382,89		_	.108321		
2007	J	4	0,390.			264,59	72.		.175357		
2 Total of line 1, column (d)				-				2	.592246		
3 Average distribution ratio for the	-	•	on line 2 by 5,	or by the number	of ye	ars					
the foundation has been in exist	ence if less	than 5 years					-	3	.118449		
4 Enter the net value of nonchanta	ible-use as	sets for 2012 from Part X,	line 5					4	445,058.		
F. Marikania kan dibar 0								_	52,717.		
5 Multiply line 4 by line 3								5	32,717.		
6 Enter 1% of net investment income (1% of Part I, line 27b)							-	6	83.		
7 Add lines 5 and 6				-	7	52,800.					
8 Enter qualifying distributions fro	m Part XII	, line 4				•-		8	22,995		
If line 8 is equal to or greater tha			tb, and com	olete that part usin	ng a 1	% tax rate	_				
See the Part VI instructions	·	· · · · · · · · · · · · · · · · · · ·	·								
									000 DE (0010		

orm	990-PF(2012) DISTRICT FOUNDATION		-0905			Page 4
Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see i	nstru	ctior	าร)
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%	1	ļ	,	1	<u>66.</u>
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) 💚					_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
_	Add lines 1 and 2	3	ļ		<u> </u>	66.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	. 5	ļ		<u> 1</u>	66.
	Credits/Payments:					
а	2012 estimated tax payments and 2011 overpayment credited to 2012					
b	Exempt foreign organizations - tax withheld at source . 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld . 6d 6d	}				^
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9	-			66.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	_			
	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶	11	J			
	rt VII-A Statements Regarding Activities			7	V	NI.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	
	any political campaign?			1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		Λ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ea or				
	distributed by the foundation in connection with the activities.					Х
	Did the foundation file Form 1120-POL for this year?			10		Λ
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\bigsim \$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exititt{\$\text{\$\text{\$\texi\\$\$\text{\$\text{\$\text{\$\text{\$\text{					
_	(1) on the foundation 1 4	-				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.					
•				2	1	Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		-	- -		
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	٦r		l		
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,,		3	•	Х
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	-	X
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		† -
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	• "	5		X
·	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
•	By language in the governing instrument, or			1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stat	e law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	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)					
	LA					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar				
	year 2012 or the taxable year beginning in 2012 (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

223531 12-05-12 Form **990-PF** (2012)

X

Х

3ь

4a

4b

N/A

Form 4720, to determine if the foundation had excess business holdings in 2012.)

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

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

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

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

Page 7

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	8	(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 KIWANIS DISTRICTS SCHOLARSHIPS		
TRIMANID DIDIRICID DENOMINONIID		
	\neg	7,245.
2 KEY CLUB LEADERSHIP TRAINING FOR KEY CLUB MEMBERS		
		3,000.
3 CIRCLE K LEADERSHIP		
	_	1 000
		1,000.
4	\dashv	
	\dashv	
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		
		_
		0.
2		
All other program-related investments See instructions		
3		
	_	
Total. Add lines 1 through 3	>	0.
	For	m 990-PF (2012)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	., .,	
а	Average monthly fair market value of securities	1a	423,579.
b	Average of monthly cash balances	1b	423,579. 28,257.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	451,836.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	451,836.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,778.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	445,058.
6	Minimum investment return. Enter 5% of line 5	6	22,253.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	22,253.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	166.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	22,087.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,087.
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	22,087.
P	art XII Qualifying Distributions (see instructions)	······	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		22 005
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	22,995.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	22 005
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	22,995.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	^
_	income Enter 1% of Part I, line 27b	5	22,995.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualities for	the section
	4940(e) reduction of tax in those years		

DISTRICT FOUNDATION

Part XIII Undistributed Income (see	instructions)			
	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				22,087.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	······································
b Total for prior years				
		0.		. <u></u>
3 Excess distributions carryover, if any, to 2012.				
a From 2007 33, 254.				
b From 2008 22,461.				
c From 2009 16,697.				
d From 2010 31,969.				
e From 2011 13, 332.	117 712			
f Total of lines 3a through e	117,713.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 ► \$ 22,995.			0.	
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				щ ши шин
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				22,087.
d Applied to 2012 distributable amount	908.			22,007.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	118,621.			
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 2011 Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2013		<u>. </u>		
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2007	33,254.			
not applied on line 5 or line 7 .	337234.			
9 Excess distributions carryover to 2013.	85,367.			
Subtract lines 7 and 8 from line 6a	03/00/0			
10 Analysis of line 9 a Excess from 2008 22,461.				
b Excess from 2009 16,697.				
c Excess from 2010 31,969.				
d Excess from 2011 13,332.				
e Excess from 2012 908.				
				Form QQQ-DE (2012)

7	2 –	O	9	O	5	7	9	2
•	_	v	_	v	_		_	_

ח	^-	• •	4	•
	21			

Part XIV Private Operating F	oundations (see ins	tructions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2012, enter the date of ti	ne ruling	>		
b Check box to indicate whether the found	dation is a private operatin	g foundation described	ın section	4942(J)(3) or 494	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed	}		}		
b 85% of line 2a			T		
c Qualifying distributions from Part XII,					
line 4 for each year listed	1		1		
d Amounts included in line 2c not					
used directly for active conduct of	İ				
exempt activities	{		İ		
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)	J]		
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)	ļ 				
(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	(0		if the afermulation	h-d 65 000	
Part XV Supplementary Info			it the foundation	nad \$5,000 or mo	re in assets
		uctions.j			
1 Information Regarding Foundation	-	00/ -fab.aaaalaaa	4	faadabaa bafa-a bba alaa	f t
a List any managers of the foundation where year (but only if they have contributed in the contributed in			tributions received by the	ioungation before the clos	e of any tax
NONE	11010 (11411 \$5,000) (000 30	3011011 307 (4)(2) /			
	a own 100/ or more of the	n stock of a corporation	/or an aqually large portio	n of the ownership of a pa	daarahin ar
b List any managers of the foundation whether entity) of which the foundation had			(or an equany large portio	ir or the ownership of a pa	iuicisinp vi
NONE					
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. B	rograms:		
Check here ► X if the foundation				of accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc	(see instructions) to indiv	iduals or organizations	under other conditions, co	mplete items 2a, b, c, and	d
a The name, address, and telephone num	`			······································	
KEY CLUB & CIRCLE K				. 225-769-93	233
5319 DIDESSE DRIVE,				,	
b The form in which applications should					
APPLICATION FORM - I	NCLUDE HIGH	SCHOOL / 0	COLLEGE TRAN	SCRIPTS	
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields	, kınds of institutions, or o	ther factors	
LIMITED TO KEY CLUB	- CIRCLE K	MEMBERS			

Page 11

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year CIRCLE K LEADERSHIP civic GRANT 5319-B DIDESSE DRIVE BATON ROUGE, LA 70808 1,000. KEY CLUB LEADERSHIP civic GRANT 5319-B DIDESSE DRIVE 3,000. BATON ROUGE, LA 70808 civic GRANTS KIWANIS DISTRICTS 5319-B DIDESSE DRIVE BATON ROUGE, LA 70808 7,245. EDUCATIONAL SCHOLARSHIP TEXAS CHRISTIAN UNIVERSITY INSTITUTION 2800 S. UNIVERSITY DRIVE FORT WORTH, TX 76129 3,500. UNIVERSITY OF ALABAMA EDUCATIONAL SCHOLARSHIP INSTITUTION 106 STUDENT SERVICES CENTER 1,500. TUSCALOOSA, AL 35487 SEE CONTINUATION SHEET(S) **▶** 3a 22,995. Total b Approved for future payment NONE **▶** 3b Total

72-0905792 Page 12

Part XVI-A	Analysis of	Income-F	Producina	Activities
Fallation	MIIdivolo UI	IIICOINE-F	- rouuciiiu	ACUVILLES

Enter gross amounts unless otherwise indicated	Unrelated	ousiness income		y section 512, 513, or 514	(e)		
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue	code		- Lode				
<u> </u>							
b			 				
<u> </u>			+				
<u> </u>	 		+				
e			+				
<u> </u>			+				
g Fees and contracts from government agencies	 		+				
2 Membership dues and assessments							
3 Interest on savings and temporary cash			1 4	256			
investments	 		14	256.			
4 Dividends and interest from securities			14	8,052.			
5 Net rental income or (loss) from real estate			-		<u></u>		
a Debt-financed property	J]		+				
b Not debt-financed property	 		+		·		
6 Net rental income or (loss) from personal							
property				- <u>-</u>	·		
7 Other investment income							
8 Gain or (loss) from sales of assets other							
than inventory							
9 Net income or (loss) from special events			03	6,820.			
10 Gross profit or (loss) from sales of inventory							
11 Other revenue [.]							
a			ļ				
b			<u> </u>				
C			1 1 -				
d			<u> </u>				
e					······································		
12 Subtotal Add columns (b), (d), and (e)		0	•	15,128.	0.		
13 Total. Add line 12, columns (b), (d), and (e)				. 13	15,128.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities t	to the Accon	nplishment of E	xempt Pı	urposes			
Line No. Explain below how each activity for which inco	me is reported in o	column (e) of Part XVI-	A contributed	importantly to the accomp	lishment of		
the foundation's exempt purposes (other than							
			<u> </u>				
							
							
				· · · · · · · · · · · · · · · · · · ·			

Form 990	-PF (20	DISTR	IC	r F	OUN	DATI	ON						72	<u>2-0905</u>	<u> </u>	Pa	age 13
Part)	(VII	Information Re Exempt Organ				nsfers	To a	nd T	ransact	ions a	nd Rela	tions	hips With N	lonchai	ritable	•	
1 Did	the org	anization directly or indi	rectly	engaç	je in an	y of the f	ollowing	with a	any other o	rganizatio	on described	d in secti	on 501(c) of			Yes	No
the	Code (d	other than section 501(c))(3) o	rganiz	ations)	or in sec	tion 527	7, relati	ing to politi	cal organ	nzations?						
a Trai	nsfers f	rom the reporting found:	ation	to a ne	oncharil	table exe	mpt org	anızatı	on of	-							
	Cash												_		1a(1)		X
	Other	assets			•								•		1a(2)		X
• •		sactions.											•		1-1-1		
		of assets to a noncharita	hla a	vemnt	organia	zation									1b(1)	•	X
		ases of assets from a no		-	•		ation .	•	•			•			1b(2)		X
		ases of assets from a no of facilities, equipment,				. Urgainza	ation			• ••	•		•	•	1b(3)		X
				iei as:	2012	-		• •		•			•		1b(4)		X
, ,		oursement arrangements	•		•					•	•	•	•	•	1b(5)	_	X
		or loan guarantees															X
		mance of services or me													1b(6)	Х	<u> </u>
		facilities, equipment, ma												L d	10		
		er to any of the above is														ets,	
		given by the reporting for						d less	than fair ma	arket valu	ue in any tra	nsaction	or snaring arra	ngement, s	now in		
		the value of the goods,	other								(4)						
(a) Line no	<u> </u>	(b) Amount involved	<u> </u>						ot organizati				of transfers, trans		shanng an	rangem	ents
							TE	NN,	DIST	RICT	SEE	STP	TEMENT	8			
<u>C</u>		8,500.	OF	<u>KI</u>	<u>WAN</u>	<u> </u>											
			<u> </u>														
											_						
		<u> </u>					·										
			1														
			 			-											
		·	T											-		-	
														-			
			\vdash			-											
			-			-											
<u> </u>		4.444	<u> </u>				<u> </u>			nt organi	rations dos	oribad					
		dation directly or indirec								pt organi	izations des	cribed		Г	X Yes		□No
		501(c) of the Code (othe			ขก อบ เ	(c)(3)) or	iii secu	1011 527						1.4	EFT 162		
<u> </u>	res, co	mplete the following sch (a) Name of ord						(b) Ti	ype of orga	nization	1		(c) Description	of relations	hin		
	MTC				ID T.C	T OF	,		IAL		SEE		· /	9			
	MIS			191	RIC	1 OF					SEE	SIA	LEMENT .				
KIWA	NIS							MET	FARE								
																	
											ļ						
											<u> </u>						
	Under	penalties of penjury, I declare	that i	have ex Beck	cam≀ned t €ation of	this return, preparer (, including other than	g accom	npanying sch ren is based o	edules and on all inform	i statements, mation of who	and to the choreoare	best of my knowledge.	ge Ma	y the IRS	discuss	this
Sign	Land De	elief, it is true, correct, and co			5	p. op a. (.					<i>,</i>			3,10	um with th	(see in	str)?
Here		Charles K	<u> </u>		<u></u>				7-21	-201	Y DI	REC	<u>ror</u>	[[X Yes	. L	No
	Sign	ature of officer or trustee	3						Date		Title						
		Print/Type preparer's n	ame			Prepa	arer's si	gdallar	6 1	ノ. <i>-</i>	Date		Check X	If PTIN			
						/	17 VIM	W	ンナい	X			self- employed				
Paid		CHARLES R.	, P	EVF	ĽΥ	CHA	RLE	S R	. PEV	ΨY >	07/07	/14			0103		<u></u>
Prepa	arer	Firm's name HAW				AYMC	UTH	&	CARRO	LL,	L.L.F	•	Firm's EIN	→ 72-0	4644	28	
lise (Only				•					-			1				

Firm's address ▶ 8555 UNITED PLAZA BLVD. - NO. 200

BATON ROUGE, LA 70809-9982

Phone no

225-923-3000

Form **990-PF** (2012)

Part XV Supplementary Information 3 Grants and Contributions Paid During the N				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
MISSISSIPPI COLLEGE		EDUCATIONAL	SCHOLARSHIP	
200 CAPITOL STREET CLINTON, MS 39056		INSTITUTION		2,000
,				2,003
SOUTHEASTERN LOUISIANA UNIVERSITY		EDUCATIONAL	SCHOLARSHIP	
500 WESTERN AVENUE		INSTITUTION		
HAMMOND, LA 70402	 			1,000
UNIVERSITY OF TENNESSEE AT MARTIN		EDUCATIONAL	SCHOLARSHIP	
554 UNIVERSITY STREET MARTIN, TN 38237	{	INSTITUTION		500
UNIVERSITY OF LOUISIANA LAFAYETTE		EDUCATIONAL	SCHOLARSHIP	
104 E. UNIVERSITY AVENUE		INSTITUTION		
LAFAYETTE, LA 70504	-	 		500
TULANE UNIVERSITY 6823 ST. CHARLES AVENUE		EDUCATIONAL INSTITUTION	SCHOLARSHIP	
NEW ORLEANS, LA 70118		INSTITUTION		500
ZOLL MEDICAL CORP		EDUCATIONAL	SCHOLARSHIP	
P.O. BOX 27028		INSTITUTION		1 500
NEW YORK, NY 10087		 		1,500
UNIVERSITY OF MISSISSIPPI		EDUCATIONAL	SCHOLARSHIP	
P.O. BOX 1848	1	INSTITUTION	Deliozaksiiii	
UNIVERSITY, MS 38677		 		750
				,
Total from continuation sheets		<u> </u>		6,750

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SEC	URITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	.)
CREATE FOUNDATION			8,052.		0.	8,052.	
TOTAL TO FM 990-PF, PART I, L	N 4 =		8,052.		0.	8,0	52.
FORM 990-PF	0.	THER I	NCOME			STATEMENT	2
DESCRIPTION			(A) REVENUE PER BOOKS	S	(B) NET INVEST- MENT INCOME		
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS			6,8	820.	0	•	
TOTAL TO FORM 990-PF, PART I,	LINE	11	6,8	820.	0	•	
FORM 990-PF	ACC	COUNTI	NG FEES			STATEMENT	3
	() EXPE	A)	NG FEES (B) NET INVI		(C) ADJUSTED NET INCOM	(D) CHARITA	BLE
DESCRIPTION	() EXPEI PER 1	A) NSES	(B) NET INVI MENT INC		ADJUSTED NET INCOM	(D) CHARITA	BLE
DESCRIPTION ACCOUNTING	EXPER I	A) NSES BOOKS	(B) NET INVI MENT INC	COME	ADJUSTED NET INCOM	(D) CHARITA	BLE
DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1, LN 16B	EXPER I	A) NSES BOOKS	(B) NET INVI	COME 0	ADJUSTED NET INCOM	(D) CHARITA	BLE ES 0.
DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1, LN 16B FORM 990-PF	EXPER I	A) NSES BOOKS 1,003. 1,003. TAX	(B) NET INVI	O O EST-	ADJUSTED NET INCOM	(D) CHARITA E PURPOS STATEMENT (D) CHARITA	BLE 0. 0. 4
FORM 990-PF DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1, LN 16B FORM 990-PF DESCRIPTION TAXES	EXPER I	A) NSES BOOKS 1,003. 1,003. TAX A) NSES	(B) NET INV MENT INC ES (B) NET INV	O O EST-	ADJUSTED NET INCOM	(D) CHARITA E PURPOS STATEMENT (D) CHARITA	BLE 0. 0. 4

FORM 990-PF	OTHER E	OTHER EXPENSES				STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		TABLE		
AWARDS BANK FEES - CHARGES ADMINISTRATIVE OTHER EXPENSES POSTAGE CREATE EXPENSE	1,856. 631. 2,000. 3,070. 23. 2,014.		0. 0. 0. 0.			0. 0. 0. 0.		
TO FORM 990-PF, PG 1, LN 23	9,594.		0.			0.		
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	r 6		
DESCRIPTION		LUATION ETHOD	воо	K VALUE	FAIR MARI VALUE	KET		
MUTUAL FUND		FMV		457,418.	457,	418.		
TOTAL TO FORM 990-PF, PART I	I, LINE 13	_		457,418.	457	418.		

FORM 990-PF		IST OF OFFICERS, DI ND FOUNDATION MANAG		STATE	EMENT 7
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
CHARLES H. FORD		EXECUTIVE DIREC	CTOR/TREASUR	0.	0.
DONNA OSBURN		PRESIDENT 1.00	0.	0.	0.
OTHA BRITTON		VICE PRESIDENT 1.00	0.	0.	0.
CATHERINE SIMMONS		SECRETARY 1.00	0.	0.	0.
JOSEPH R. KEOHANE		IMM. PAST PRESI	IDENT 0.	0.	0.
REBECCA CROW		DIRECTOR 1.00	0.	0.	0.
DONNA CAFFERATA		DIRECTOR 1.00	0.	0.	0.
EVA ABATE		DIRECTOR 1.00	0.	0.	0.
CLIFFORD GIFFIN,	JR.	DIRECTOR 1.00	0.	0.	0.
CLAUDE VINSON		DIRECTOR 1.00	0.	0.	0.
ROBERT BENOIT		IMM. PAST GOVER	RNOR 0.	0.	0.

LA-MS-W. TN DISTRICT FOUNDATION,	INC. DI		72-090)5792
JAN ROBERTSON	LIEUTENANT GO	VERNOR 0.	0.	0.
TRAVIS MOORE	LIEUTENANT GO	VERNOR 0.	0.	0.
TONY WEAVER	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

990-PF INVOLVEMENT WI

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS
PART XVII, LINE 1, COLUMN (D)

STATEMENT

8

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

LA, MISS, W. TENN, DISTRICT OF KIWANIS

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

FOUNDATION ASSISTANCE

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

STATEMENT

9

NAME OF AFFILIATED OR RELATED ORGANIZATION

LA, MISS, W. TENN, DISTRICT OF KIWANIS

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

AFFILIATE

Form 88	68 (Rev. 1-2013)					Page 2		
	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box .		► X		
Note. Or	nly complete Part II if you have already been granted an a	automatic	3-month extension on a previously fil	led Form 8	3868.			
If you	are filing for an Automatic 3-Month Extension, complete							
Part I	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	opies needed	<u>). </u>		
	<u> </u>		Enter filer's	identifyin	g number, see i	nstructions		
Type or								
print								
File by the								
due date fo filing your return See	5210 D DIDECCE DDIVE	curity number (S	SN)					
instructions	City, town or post office, state, and ZIP code. For a for BATON ROUGE, LA 70808-6401	oreign add	ress, see instructions.					
	D. A		to analyzation for each voture)			0 4		
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)					
Applicat	tion	Return	Application			Return		
ls For		Code	Is For			Code		
Form 99	0 or Form 990-EZ	01						
Form 99	0-BL	02	Form 1041-A	_		08		
Form 47	20 (individual)	03	Form 4720			09		
Form 99	0-PF	04	Form 5227			10		
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
	0-T (trust other than above)	06	Form 8870			12		
STOP! D	Oo not complete Part II if you were not already granted	l an auton	natic 3-month extension on a prev	iously file	d Form 8868.			
_	CHARLES FORD	ייידממ	E DAMON DOLLCE T	λ 70Ω	21 0160			
• The b	books are in the care of $\triangleright \frac{5319-B}{234} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{1000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{1000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{1000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{1000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{1000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{10000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{10000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{10000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{100000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{100000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{1000000} \stackrel{\text{DIDESSE}}{=} \frac{3319-B}{1000000000000000000000000000000000000$	DKIV.	FAX No. ►	<u> 700</u>	21-0103			
	shone No. ► (225) 924–5509	_ !_ 45 _ 1 -						
	organization does not have an office or place of business			f this is fai	l Hayanala arau	a shock this		
_	s is for a Group Return, enter the organization's four digit	-						
box ▶	. If it is for part of the group, check this box equest an additional 3-month extension of time until		Γ 15 , 2014 .	all Meino	ers the extension	11 13 101.		
4 In	or calendar year, or other tax year beginning			SEP	30, 201	3		
5 Fo	the tax year entered in line 5 is for less than 12 months, or	shock reas		Final r		<u> </u>		
, "	Change in accounting period	incon reas	on milarrotam		0.0			
7 St	ate in detail why you need the extension							
7 OI	AXPAYER NEEDS ADDITIONAL TIME	E TO	GATHER ALL THE NEC	ESSAR	Y INFORM	ATION		
	EEDED.							
=-								
8a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any					
	onrefundable credits. See instructions.			8a	\$	0.		
	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated					
ta	x payments made. Include any prior year overpayment al	lowed as a	a credit and any amount paid					
	reviously with Form 8868.			8b	\$	0.		
c Ba	alance due. Subtract line 8b from line 8a. Include your pa	ayment wit	th this form, if required, by using			_		
E	TPS (Electronic Federal Tax Payment System). See Instr			8c	\$	0.		
			st be completed for Part II o					
Under pe it is true,	nalties of perjury, I declare that I have examined this form, include correct, and complete, and that I am authorized to prepare this for	ling accomi orm	panying schedules and statements, and to	o the best o	f my knowledge ar	nd belief,		
Signature	Title ▶	CPA		Date	>			
					Form 8868	(Rev. 1-2013)		