EXTENSION GRANTED TO JULY 15, Return of Private Foundation

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

Form **990-PF** Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

For	cale	ndar year 2019 or tax year beginning		, and ending		
Na	ıme c	of foundation	•		A Employer identification	number .
1	<u>NI</u>	MEÉ FAVROT & MICHAEL BE	LL FAMILY FUN	ID _ ·	72-1312430	<u> </u>
Nu	mber	and street (or P O box number if mail is not delivered to stre	et address)	Room/suite	B Telephone number	
-	755	CAMP ST.		`	504-596-23	55
· Cr	ty or 1	town, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
1	1EM	<u> ORLEANS, LA 70130-37</u>	01			
G	Chec	k all that apply: Initial return	Initial return of a f	ormer public charity	D 1 Foreign organizations	s, check here
		Final return	Amended return		2 5	notine the REP4 test
_		Address change	Name change		Foreign organizations me check here and attach co	omputation
<u>3</u> ⊩	_		exempt private foundation	, N	E If private foundation sta	
$\overline{I} \vdash$		ection 4947(a)(1) nonexempt charitable trust	Other taxable private found		under section 507(b)(1))(A), check here
		· —	iting method: X Cash	Accrual	F If the foundation is in a	
	rom ►\$		Other (specify) imn (d), must be on cash bas	nic)	under section 507(b)(1)	(B), check here
	ant!		1 -	T	, , , , , , , , , , , , , , , , , , , ,	· (d) Disbursements
^3/ —	LI I (L	(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	for charitable purposes (cash basis only)
3 —	1	Contributions, gifts, grants, etc., received	· · · · · · · · · · · · · · · · · · ·		N/A	(cash basis only)
ra ∋>	2	Chèck				
9	3	Interest on savings and temporary cash investments	20.	20.	THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O	Statement 1
	4.	Dividends and interest from securities	6790.	6790.		Statement: 2
	5a	a Gross rents				******
2	, b	Net rental income or (loss)	54WWW.1847			1/2-1/2-1/2-1/2-1/2-1/2-1/2-1/2-1/2-1/2-
11 12 o	6a	Net gain or (loss) from sale of assets not on line 10	21355.			
3	b	Gross sales price for all assets on line 6a				
SCANNED Revenue	7	Capital gain net income (from Part IV, line 2)		21355.		
® "	8	Net short-term capital gain			DE	20224.94 Z. 100.00 M
	9	Income modifications Gross sales less returns				ASSIVE PARTY
	10a	and allowances			- C	<u> \(\(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) </u>
್ಷತ		Less Cost of goods sold		Control of the second s	<u>&</u> **10	- Z
R Receive		Gross profit or (loss)			, L	
÷ 8.	11	Other income Total Add lines 1 through 11	28165.	20165	0G	
. ₹	12	Compensation of officers, directors, trustees, etc	3000.	28165.		0.
3	14	Other employee salaries and wages	3000.	0.		0.
	15	Pension plans, employee benefits	•			•
33	16a	Legal fees	+		* ,	-
Fxpenses	b	Accounting fees Stmt 3	900.	0.	·	0.
는 함	c	Other professional fees Stmt 4	6019.	6019.		0.
0 202 ative	17	Interest				
0202 Operating and Administrative	18	Taxes *				
nis.	19	Depreciation and depletion	*	7.		
Ē	20	Occupancy 1				
Ą	21	Travel, conferences, and meetings		,		<u> </u>
a	22	Printing and publications		•	•	
ting	23	Other expenses Stmt 5'	114.	0.		0.
era.	24	Total operating and administrative	10022	6010	_	
ŏ	25	expenses Add lines 13 through 23 · Contributions, gifts, grants paid	20189.	6019.		20189.
	26	Total expenses and disbursements	20109.	THE REPORT OF THE PROPERTY AND A PARTY.	PARTIES IN PROPERTY OF THE PROPERTY OF THE	20109.
	20	Add lines 24 and 25	30222.	6019.		20189.
	27	Subtract line 26 from line 12:	30222.			20109.
	i	Excess of revenue over expenses and disbursements	-2057.			
	I	Net investment income (if negative, enter -0-)		22146.		
		Adjusted net income (if negative, enter -0-)			N/A	

tess secuniulated expectation 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue. 20 Loans from efficers, furstless, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (did lines 17 through 22) 23 Total liabilities (add lines 17 through 22) 24 Total liabilities (add lines 17 through 22) 25 Foundations that follow FASB ASC 958, check here ■ 26 All exasets with donor restrictions 27 Paid-in or capital surplus, or land, bidg., and equipment fund 28 Fetamed earnings, accumulated income, endowment, or other funds 29 Total liabilities and net assets/fund balances 30 Total liabilities and net assets/fund balances 375489. 3773432. Statement 6. 375489. 28 Inter amount from Part I, line 27a 30 Che increases not included in line 2 (itemze) ▶ 30 Decreases not included in line 2 (itemze) ▶ 30 Decreases not included in line 2 (itemze) ▶ 3 Government of the part of the par	Fo	rm 99	90-PF (2019) AIMEE FAVROT & MICHAEL	BELL FAMILY F	<u>'UND 72-</u>	1312430 Page 2 .
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Deferred revenue. 19 Deferred revenue.				1008.	5860.	
20 Loans from officers, directors, trustees, and other disqualified persons 1 Mortgages and other notes payable 2 Other liabilities (describe		١ '	•	• •		
23 Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. 24 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here 35 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here 36 X and complete lines 26 through 30. 36 Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bidg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances 375489. 373432. Statement 62 Pait: Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Cother increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 0. 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 373432.	ies	1			ì	
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Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 -6 373432.	Z				,	
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Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 375 489 2 -2057 3 0 4 373432 5 0 6 373432	P	ártž	Analysis of Changes in Net Assets or Fund B	alances		,
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3 0. Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ Decreases not included in line 2 (itemize) ▶ Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 3 373432. 5 704 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2	Enter	amount from Part I, line 27a	•	2	
Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 4 373432. 5 0. 6 373432.	3	Other	increases not included in line 2 (itemize)		. 3	
5 Decreases not included in line 2 (itemize) 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 -6 373432.	4	Add I	ines 1, 2, and 3			
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	5	Decre	eases not included in line 2 (itemize)	•		
				olumn (b), line 29		
			,			

{ If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }

2

21355.

N/A

2 Capital gain net income or (net capital loss)

If (loss), enter "-0-" in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

(a) List and describe the 2-story brick wareh	d Losses for Tax on In kind(s) of property sold (for exa louse; or common stock, 200 sh	ample, real esta		(b) How acqui P - Purchas D - Donatio	e '	c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)
1a							
b See Attached S	statement					-	
<u>c</u>			-			_	
e e		<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale			(h) Gain or (los: (e) plus (f) minus	
a			<u> </u>				
b		<u> </u>					
C							
d							
e 269946.		<u> </u>	24859	1.			21355.
Complete only for assets showing g	 	1			(I) (Gains (Col. (h) gair k), but not less tha	n minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			Losses (from col.	(h))
a							
<u>b</u>							
C						•	
d							01255
<u>e</u>		<u> </u>					21355.
2 Capital gain net income or (net capital	If gain, also ente $\left\{\begin{array}{l} \text{If gain, also enter -0} \\ \text{If (loss), enter -0} \end{array}\right.$	er in Part I, line)- in Part I, line	7 7	} 2			21355.
3 Net short-term capital gain or (loss) a	as defined in sections 1222(5) a	nd (6):					
If gain, also enter in Part I, line 8, coli	umn (c).					57 / 7	
Part V Qualification Und	ler Section 4940(e) for	r Dodugod	Toy on Not	J 3	at Inco	N/I	<u> </u>
f section 4940(d)(2) applies, leave this p Was the foundation liable for the section f "Yes," the foundation doesn't qualify ui	4942 tax on the distributable ar		•	nod?			Yes X No
1 Enter the appropriate amount in each				ntries.			
(a) Base period years Calendar year (or tax year beginning i	(b)			(c) ncharitable-use	assets	Distri (col (b) di	(d) bution ratio vided by col. (c))
2018		20428.		459	162.		.044490
2017		27700.			667.		.067287
2016		28799.		432	2740.		.066550
2015	"	69669.		531	663.		.131040
2014		55729.		636	145.		.087604
2 Total of line 1, column (d)						2	.396971
3 Average distribution ratio for the 5 ye the foundation has been in existence		on line 2 by 5.0), or by the numb	cr of years		3	.079394
4 Enter the net value of noncharitable-t	use assets for 2019 from Part X,	line 5				4	398503.
5 Multiply line 4 by line 3						5	31639.
6 Enter 1% of net investment income (1% of Part I, line 27b)					6	221.
7 Add lines 5 and 6						7	31860.
8 Enter qualifying distributions from Pa	art XII, line 4					8	20189.
If line 8 is equal to or greater than line See the Part VI instructions.	e 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	g a 1% tax rate.			

AIMEE FAVROT & MICHAEL BELL FAMILY FUND

72-1312430

Page 3

10

of each state as required by General Instruction G? If "No," attach explanation

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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yoo," attach a school listing their names and addresses

	At any time during the year, and the foundation, directly of monectly, own a controlled entity within the meaning of	- 1		1
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	The life is a second and of the life is a second and of the life is a second of a dioqualities person in a dioqualities and devisory privileges			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►N/A			
14	The books are in care of ► AIMEE' F. BELL Telephone no. ►504-	596-2	355	
	Located at ► 755 CAMP ST., NEW ORLEANS, LA ZIP+4 ►	70130		
15	Sèction 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	Ŋ	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
P	Statements Regarding Activities for Which Form 4720 May Be Required			

<u>%</u>	the state of the s			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?		2	
	(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.)			
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			2
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	120.2		
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	\$\$\$.3		
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years >	100		
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?			
b	of "Yes," did it have excess business holdings in 2019 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 4940(c)(7)) to dispose		3. W.	**************************************
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			2002
	Schedule C, to determine if the foundation had excess business holdings in 2019.) 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	20 1 (K		
	had not been removed from inopardy hofore the first day of the tay year beginning in 2019?	41.		v

Form 990-PF (2019) AIMEE FAVROT & MICHAEL E	BELL FAMILY FU	ND	72-13124	<u> 30 Page 6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	x.xx 6. dla a
5a During the year, did the foundation pay or incur any amount to:			&ur!	Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗶 No 🛙	
`(2) Influence the outcome of any specific public election (see section 4955); (or to carry on, directly or indir	ectly,		
any voter registration drive?		Y	es 🗶 No 💈	
(3) Provide a grant to an individual for travel, study, or other similar purposes		, 🗀 A	es 🗶 No 💈	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		8	
4945(d)(4)(A)? See instructions		Y	es 🗓 No 🛙	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or i	for		
the prevention of cruelty to children or animals?		Y	es 🗶 No 🛭	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations	S	
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b
Organizations relying on a current notice regarding disaster assistance, check	here	•		Tell Tall Tall
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ıned •	3	
expenditure responsibility for the grant?	, N	I/A 🗀 Yo	es 🔲 No 🕌	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		•	Į.	
. 6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		l	
a personal benefit contract?		· [Ye	es 🗶 No 🖁	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		'	6b X
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	shelter transaction?	☐ Y6	es 🗶 No 🖟	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		r	,	W 0 2 2 3 3
excess parachute payment(s) during the year?			es 🗓 No	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma			
Paid Employees, and Contractors		o , o .	•	
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.			
· () Nome and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
MICHAEL J. BELL	PRESIDENT/CHA	IRMAN		,
755 CAMP ST.		*		
NEW ORLEANS, LA 70130	0.00	0.	0.	0.
AIMEE' F. BELL	TREASURER/SEC	RETARY		
755 CAMP ST.				,
NEW ORLEANS, LA 70130	10.00	3000.	. 0.	0.
· · · · · · · · · · · · · · · · · · ·	٠,			
	:	. '		,
	,,,			
				·
				•
2 Compensation of five highest-paid employees (other than those inc	luded 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	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	allowances
NONE	•			
	_			
		,		•
				<u> </u>
Total number of other employees paid over \$50,000			•	0
			Form	990-PF (2019)

Part VIII: Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	TLY FUND 72-1 ation Managers, Highly	312430 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ _ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati- number of organizations and other beneficiaries served, conferences convened, research papers pro-	stical information such as the oduced, etc.	Expenses
1N/A		
3		
Part X-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2.	Amount
N/A		
2		
All other program-related investments. See instructions.		
Total, Add lines 1 through 3	>	0.

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

4940(e) reduction of tax in those years.

income. Enter 1% of Part I, line 27b

Form **990-PF** (2019)

20189.

4

5

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for	2019 from Part XI,				<u>-</u> .
line 7	,				19482.
2 Undistributed income, if any,	as of the end of 2019				
a Enter amount for 2018 o	nly			0.	
b Total for prior years:	•				
,			0.		
3 Excess distributions carr	yover, if any, to 2019:				
a From 2014	24474.				•
b From 2015	44702.				
c From 2016	7162.				
d From 2017	8300.				
e From 2018					
f Total of lines 3a through	е	84638.			
4 Qualifying distributions for				- '''	
Part XII, line 4: ►\$	20189.				i
a Applied to 2018, but not				0.	
b Applied to undistributed in		· · · · · · · · · · · · · · · · · · ·			
years (Election required -	•		0.		
c Treated as distributions of	,			`	
(Election required - see in		0.	;		
d Applied to 2019 distribut					19482.
e Remaining amount distril		707.			
5 Excess distributions carryove (If an amount appears in columnust be shown in column (a)	r applied to 2019 mn (d), the same amount	0.		· · · · · · · · · · · · · · · · · · ·	0.
6 Enter the net total of each indicated below:	·				
a Corpus Add lines 3f, 4c, and	4e Subtract line 5	85345.			
b Prior years' undistributed	1	03343.			
line 4b from line 2b	s moorno: oubtract		0.		
c Enter the amount of prior	· vears'				
undistributed income for deficiency has been issue the section 4942(a) tax h assessed	which a notice of ed, or on which		0.		
d Subtract line 6c from line	6b. Taxable				
amount - see instructions	5		0.		
e Undistributed income for	2018. Subtract line				
4a from line 2a. Taxable a	amount - see instr.			0.	
f Undistributed income for	2019. Subtract				
lines 4d and 5 from line 1	I. This amount must				
be distributed in 2020					0.
7 Amounts treated as distri	butions out of				
corpus to satisfy requirer	ments imposed by				
section 170(b)(1)(F) or 4	942(g)(3) (Election				
may be required - see ins	structions)	0.			
8 Excess distributions carry	yover from 2014				
not applied on line 5 or lii	ne 7	24474.			
9 Excess distributions car	ryover to 2020.				
Subtract lines 7 and 8 fro	om line 6a	60871.		ادِ	
O Analysis of line 9:					
a Excess from 2015	44702.				
b Excess from 2016	7162.		*		
c Excess from 2017	8300.		ਰਾ :		
d Excess from 2018					
e Excess from 2019	707.		<u>¢</u>		

	XIV Private Operating F	oundations (see in				1312430 Fage II
	the foundation has received a ruling o	 			14/11	
	undation, and the ruling is effective fo			_		
	lock box to indicate whether the found			in section	1942(j)(3) or	1912(j)(5)
	ter the lesser of the adjusted net	Tax year	N.	Prior 3 years	1 10 12())(0) 01 <u> </u>	3
	come from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	estment return from Part X for		1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1	· · · · · · · · · · · · · · · · · · ·
	ch year listed					
	% of line 2a	-				
	alifying distributions from Part XII,					
	e 4, for each year listed					
	nounts included in line 2c not		 	 		
-	ed directly for active conduct of	İ				
	empt activities					
	alifying distributions made directly					
	active conduct of exempt activities.					
	btract line 2d from line 2c					
	mplete 3a, b, or c for the					
	ernative test relied upon:				1	
	ssets" alternative test - enter: Value of all assets					
-						
(2	Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Er	ndowment" alternative test - enter			1	 \ 	
2/3	3 of minimum investment return					
	own in Part X, line 6, for each year red					
	ipport" alternative test - enter:					
	Total support other than gross					
(1)	investment income (interest,					
	dividends, rents, payments on		/		·	
	securities loans (section 512(a)(5)), or royalties)					X
(2)	Support from general public					
(2)	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
(2)	Largest amount of support from	/				
(0)	an exempt organization					
(4)	, -	<u></u>				- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ - \ \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \
	Gross investment income XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or	more in assets
· uit	at any time during t			ii tile ioulidation	παα φο,σσο στ	more in assets
1 In	ormation Regarding Foundatio					<u> </u>
	t any managore of the foundation who	•	than 2º/ of the total cont	ributions received by the	foundation before the	close of any tax
ye:	er (but only if they have contributed m	nore than \$5,000), (See s	ection 507(d)(2))	indutions received by the	ווט ווטמוטמו ווטמוטוט וווט	close of any tax
AIME			()()			
	t any managers of the foundation who	n own 10% or more of th	e stock of a corporation	(or an equally large ports	on of the ownerchin of	a partnership or
	er entity) of which the foundation has			(or all equally large portion	on or the ownership of	a partitionship of
None	1	-				
	ormation Regarding Contributi	on Grant Gift Loan	Scholarship etc. Pr	ograms:		
	eck here \blacktriangleright if the foundation o				ot accent unsolicited i	requests for funds. If
	foundation makes gifts, grants, etc.,					equests for futios. If
	e name, address, and telephone numb				<u></u>	* -
	E' F. BELL, (504		ie person to whom applic	anona anono de addica:		
	CAMP ST., NEW OR		0130			
	form in which applications should b		•	nould include:		
	PECIFIC FORM OF					
	y submission deadlines:	··· · · · · · · · · · · · · · · · · ·	TO REQUIRE	•		
	- APPLICATIONS	ARE ACCEPTE	D ANYTIME.			
	restrictions or limitations on awards			kinds of institutions, or o	other factors:	
	PECIFIC DOLLAR L					BUTIONS MADE.
			_	_		

▶ 3b

Total

AIMEE FAVROT & MICHAEL BELL FAMILY FUND 72-1312430

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or any foundation manager or substantial contributor **Amount** status of contribution Name and address (home or business) recipient BASTON COMMUNITY OF RESILIENCE N/A ÞC FOR THE GENERAL 1901 MIRABEAU AVE BENEFIT OF THE CHARITY NEW ORLEANS, LA 70122 150. CAMP RIVA LAKE INC N/A PC FOR THE GENERAL 14462 VIA MONTEVERDE BENEFIT OF THE CHARITY SAN DIEGO CA 92127 100. DE LA SALLE HIGH SCHOOL N/A PC FOR THE GENERAL 5300 ST. CHARLES AVENUE BENEFIT OF THE CHARITY NEW ORLEANS, LA 70115 50. FRIENDS OF BEAUREGARD-KEYES HOUSE N/A PC FOR THE GENERAL 1113 CHARTRES ST. BENEFIT OF THE CHARITY NEW ORLEANS, LA 70116 145. FRIENDS OF THE CABILDO INC N/A PC FOR THE GENERAL 701 CHARTRES STREET BENEFIT OF THE CHARITY NEW ORLEANS, LA 70116 1265, HABITAT FOR HUMANITY N/A РC FOR THE GENERAL 2900 ELYSIAN FIELDS AVE. BENEFIT OF THE CHARITY NEW ORLEANS, LA 70122 100. HISTORIC NEW ORLEANS COLLECTION N/A ÞС FOR THE GENERAL 533 ROYAL ST. BENEFIT OF THE CHARITY NEW ORLEANS, LA 70130 110. HOGS FOR THE CAUSE N/A PC FOR THE GENERAL P O BOX 792300 BENEFIT OF THE CHARITY NEW ORLEANS, LA 70179 500. THE JEFFERSON SOCIETY N/A PC FOR THE GENERAL C/O 2170 LONICERA WAY BENEFIT OF THE CHARITY CHARLOTTESVILLE, VA 22911 190. JUNIOR LEAGUE OF NEW ORLEANS INC N/A ÞC FOR THE GENERAL BENEFIT OF THE CHARITY 4319 CARONDELET STREET NEW ORLEANS, LA 70115 572. Total from continuation sheets 19530

AIMEE FAVROT & MICHAEL BELL FAMILY FUND 72-1312430
Part XV Supplementary Information

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
LIBERTY CITY COMMUNITY DEV. CORP	N/A	₽C	FOR THE GENERAL	
2100 MARTIN LUTHER KING JR BLVD.			BENEFIT OF THE CHARITY	
NEW ORLEANS, LA 70113				200
LOUISE MCGEHEE SCHOOL	7 / 2	200	TOP THE OTHERS	
2343 PRYTANIA STREET	N/A	PC	FOR THE GENERAL BENEFIT OF THE CHARITY	
NEW ORLEANS, LA 70130			BENEFIT OF THE CHARITY	230
LOUISIANA ENDOWMENT FOR THE	N/A	PC	FOR THE GENERAL	
HUMANITIES, INC.			BENEFIT OF THE CHARITY	
338 LAFAYETTE STREET				
NEW ORLEANS, LA 70113	-			20
LSU HEALTH FOUNDATION	N/A	PC	FOR THE GENERAL	
000 TULANE AVE, 4TH FLOOR			BENEFIT OF THE CHARITY	
NEW ORLEANS, LA 70112	-			150
MEMORIAL HALL FOUNDATION	N/A	PC	FOR THE GENERAL	
NEW_ORLEANS, LA 70130			BENEFIT OF THE CHARITY	100
ORDERATE, ELL 70150				
ONUMENTAL TASK COMMITTEE	N/A	PC	FOR THE GENERAL	
1215 PRYTANIA ST.		,	BENEFIT OF THE CHARITY	
NEW ORLEANS, LA 70130				100
NATIONAL MULTIPLE SCLEROSIS SOCIETY	N/A	PC	FOR THE GENERAL	
613 FAIRFIELD ST.			BENEFIT OF THE CHARITY	
ETAIRIE, LA 70006		1		200
ATIONAL TRUST FOR HISTORIC	N/A	PC	FOR THE GENERAL	
RESERVATION IN THE UNITED STATES			BENEFIT OF THE CHARITY	
600 VIRGINIA AVENUE NW SUITE 1000]		
ASHINGTON, DC 20037			<u> </u>	100
ATIONAL WWII MUSEUM	N/A	PC	FOR THE GENERAL	
45 MAGAZINE ST.		!	BENEFIT OF THE CHARITY	
EW ORLEANS, LA 70130				300
NEW ORLEANS ARCHITECTURE FOUNDATION	N/A	PC	FOR THE GENERAL	
000 ST. CHARLES AVE.			BENEFIT OF THE CHARITY	4400
EW ORLEANS, LA 70130 Total from continuation sheets		1	1	1100

AIMEE_FAVROT & MICHAEL BELL FAMILY FUND 72-1312430

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient PRESERVATION RESOURCE CENTER N/A PC FOR THE GENERAL 923 TCHOUPITOULAS STREET BENEFIT OF THE CHARITY NEW ORLEANS, LA 70130 1200. ST JOSEPH'S CHURCH N/A PC FOR THE GENERAL 1802 TULANE AVE. BENEFIT OF THE CHARITY NEW ORLEANS, LA 70112 <u>50.</u> ST JUDE'S HOSPITAL N/A ÞС FOR THE GENERAL 262 DANNY THOMAS PLACE BENEFIT OF THE CHARITY MEMPHIS TN 38105 400. ST. CHARLES AVENUE PRESBYTERIAN ÞС N/A FOR THE GENERAL CHURCH BENEFIT OF THE CHARITY 1545 STATE STREET NEW ORLEANS, LA 70118 8010. STAND UP TO CANCER N/A ÞС FOR THE GENERAL P O BOX 843721 BENEFIT OF THE CHARITY LOS ANGELES CA 90084 50, TRAVIS MANION FOUNDATION N/A PC FOR THE GENERAL P O BOX 1485 BENEFIT OF THE CHARITY 5<u>0</u>, DOYLESTOWN PA 18901 TRINITY EPISCOPAL CHURCH N/A РC FOR THE GENERAL 1329 JACKSON AVENUE BENEFIT OF THE CHARITY NEW ORLEANS, LA 70130 50. TRINITY EPISCOPAL SCHOOL N/A ÞС FOR THE GENERAL 1315 JACKSON AVENUE BENEFIT OF THE CHARITY 500. NEW ORLEANS, LA 70130 TULANE UNIVERSITY N/A ÞС FOR THE GENERAL 6823 ST. CHARLES AVENUE BENEFIT OF THE CHARITY 2500. NEW ORLEANS, LA 70118 VANDERBILT UNIVERSITY N/A ЬC FOR THE GENERAL BENEFIT OF THE CHARITY 2301 VANDERBILT PLACE 60. NASHVILLE, TN 37235 Total from continuation sheets

AIMEE FAVROT & MICHAEL BELL FAMILY FUND 72-1312430

Part XV | Supplementary Information

Part XV Supplementary Informat	tion			
3 Grants and Contributions Paid During th	ne Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
WYES TELEVISION	N/A	PC	FOR THE GENERAL	
916 NAVARRE AVENUE			BENEFIT OF THE CHARITY	
NEW ORLEANS, LA 70124				40.
AIDS LIFECYCLE	N/A	PC	FOR THE GENERAL	
1035 MARKET STREET		[BENEFIT OF THE CHARITY	
SAN FRANCISCO CA 94103				80.
CALVERY EDISCODAL GUIDON	7/3			
CALVERY EPISCOPAL CHURCH 102 N 2ND STREET	N/A	PC	FOR THE GENERAL	
MEMPHIS TN 38103			BENEFIT OF THE CHARITY	50,
MMM MID , IN JOIOS				30,
COVINGTON PRESBYTERIAN CHURCH	N/A	PC	FOR THE GENERAL	
222 S. JEFFERSON AVE. COVINGTON, LA 70133			BENEFIT OF THE CHARITY	60
COVINGION, DA 70133				60.
FIRSTLINE SCHOOLS	N/A	PC	FOR THE GENERAL	
300 N. BROAD ST. # 207 NEW ORLEANS, LA 70119			BENEFIT OF THE CHARITY	120,
NEW ORDERNO, DR 70119				120.
FRIENDS IN NEED FOUNDATION				
239 E. 79TH ST. # 12M	N/A	PC	FOR THE GENERAL BENEFIT OF THE CHARITY	
NEW YORK NY 10075			BENEFII OF THE CHARITY	205.
GLIOBLASTOMA FOUNDATION	N/A	PC	EOD MAE CEMEDAL	
3512 LOCHNORA PKWY	N/A		FOR THE GENERAL BENEFIT OF THE CHARITY	
DURHAM NC 27705			DENERTY OF THE CHARTTY	50,
GETTYSBURG FOUNDATION	N/A	PC	FOR THE GENERAL	
1195 BALTIMORE PIKE			BENEFIT OF THE CHARITY	
GETTYSBURG, PA 17325				68,
HEIFER INTERNATIONAL	N/A	₽C	FOR THE GENERAL	
1 WORLD AVE.			BENEFIT OF THE CHARITY	
LITTLE ROCK, AR 72202				100,
MD ANDERSON CANCER CENTER	N/A	PC	FOR THE GENERAL	
PO BOX 4319			BENEFIT OF THE CHARITY	
HOUSTON, TX 77210		<u> </u>		50.
Total from continuation sheets				

AIMEE FAVROT & MICHAEL BELL FAMILY FUND 72-1312430

Part XV | Supplementary Information

Part XV Supplementary Informati	on						
3 Grants and Contributions Paid During the Year (Continuation)							
Recipient	if recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	Amount			
Name and address (home or business)	or substantial contributor	status of recipient	contribution	Amount			
NAMED AND ADDRESS OF THE PARTY							
NATIONAL BRAIN TUMOR SOCIETY 55 CHAPEL STREET, SUITE 200	N/A	PC	FOR THE GENERAL BENEFIT OF THE CHARITY				
NEWTON, MA 02458			DEMERTI OF THE CHARTTI	30			
NAMIONAL EVOUSNOE OF US COUNTS WITCH							
NATIONAL EXCHANGE CLUB FOUNDATION 3050 CENTRAL AVE.	N/A	ÞC	FOR THE GENERAL BENEFIT OF THE CHARITY				
FOLEDO, OH 43606			DENERTY OF THE CHARTTY	75			
OCCUPATION OF MEN OPERANG							
POOR CLARES OF NEW ORLEANS 720 HENRY CLAY AVE.	N/A	PC	FOR THE GENERAL BENEFIT OF THE CHARITY				
NEW ORLEANS, LA 70118			DENERTY OF THE CHERTY	50			
	,						
~							

<u>-</u>							
Total from continuation sheets							

Unrelated business income

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e)	
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	Code		1000			
a			+			
b			1			
c			ļ			
d						
e			ļ			
f		_				
g Fees and contracts from government agencies	_					
2 Membership dues and assessments			<u> </u>			
3 Interest on savings and temporary cash						
investments			14			
4 Dividends and interest from securities			14	6790.		
5 Net rental income or (loss) from real estate:				,	/	
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	21355.		
9 Net income or (loss) from special events			10	21333.		
10 Gross profit or (loss) from sales of inventory		_			 	
•			-			
I1 Other revenue:						
a			 -			
b						
C						
d					· · =	
e			ļ			
2 Subtotal. Add columns (b), (d), and (e)		0.		28165.		
3 Total Add line 12, columns (b), (d), and (e)				13	28165.	
See worksheet in line 13 instructions to verify calculations.)					 	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes		
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A	contrib	outed importantly to the accomi	olishment of	
the foundation's exempt purposes (other than b				, ,		
				· · · · · · · · · · · · · · · · · · ·		
				 		
		*				
					<u> </u>	
		·				
						
						
		-		-		
		.				
		-				
			-			

•

Part XVII	Information Regarding	Transfers to and	Transactions and Rela	tionships With Noncharitable
	Exempt Organizations			•

	_	<u> </u>							I -	
1 Die	the or	rganization directly or indi	rectly engage in any	of the following	ng with any other organizat	ion described in sect	ion 501(c)		Yes	No
(of	her tha	ın section 501(c)(3) orgar	nizations) or in secti	on 527, relatın	g to political organizations?	?		ĺ		1
a Tra	ansfers	from the reporting found	ation to a noncharita	able exempt or	ganization of:]
(1)	Cash							1a(1)		X
(2)	Other	r assets						1a(2)		_X_
b Otl	ner trar	nsactions;								
(1)	Sales	of assets to a noncharita	ıble exempt organiza	ation				16(1)		X
(2)	Purcl	hases of assets from a no	ncharitable exempt	organization				1b(2)		X
(3)	Renta	al of facilities, equipment,	or other assets					1b(3)		X
(4)	Reim	bursement arrangements	;					1b(4)		X
(5)	Loan	s or loan guarantees						1b(5)		X
(6)	Perfo	ormance of services or me	embership or fundra	ising solicitation	ons			1b(6)	_	X
c Sh	arıng o	f facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees			1c		X
d if t	he ansv	wer to any of the above is	"Yes," complete the	following sche	edule. Column (b) should a	lways show the fair r	narket value of the	goods, other ass	ets.	
					ed less than fair market val					
		i) the value of the goods,				,	0	, , ,		
(a) Line r		(b) Amount involved			e exempt organization	(d) Description	of transfers, transaction	ons, and sharing ar	angeme	nts
				N/A		,,,,,				
							 			
	-		1		 -			<u> </u>		
			 -							
	+									
	+					_				
										
	+					-				
	_	 -								
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	+	-	-	-						
	+-									
0 - 1 - 4										
					or more tax-exempt organ	izations described				٦
		501(c) (other than section		ection 5277				Yes	X	J No
b 11"	res," co	omplete the following sche			(A) T (·				
		(a) Name of org	anization		(b) Type of organization		(c) Description of re	elationship		
		N/A								
								 		
								 		
	_									
]				
٠.	Under and be				g accompanying schedules and taxpayer) is based on all inforr			May the IRS o	iscuss t	his
Sign		day land	2100	epare (omer ma			rias ariy kilowiedge	return with the shown below		
Here		1 han mark	1200		07.13.20	PRESID	ENT	_ X Yes		No
	Sign	ature of officer or trusted	<u> </u>		Date	Title				_
		Print/Type preparer's na	me	Preparer's si	gnature	Date	Check X If	PTIN		
_						1	self- employed			
Paid		MARCIA D.	MORGAN	MARCIA	D. MORGAN	06/17/20		P00001	325	
Prepa		Firm's name ► MAR		RGAN,			Firm's EIN ► 7	•		
Use (Only			•				-		
		Firm's address ▶ 15	31 FERN S	ST.						
					0118-4005		Phone no. 50	4-862-5	533	
					 			Form 990		2019)

Form 990-PF Interes	st on Savi	ngs and Tem	porary	Cash Ir	vestments	Statement 1	
Source		Reve	(a) Revenue N Per Books		(b) vestment come	(c) Adjusted Net Income	
IBERIA BANK			20.		20.		
Total to Part I, line 3			20.		20.		
Form 990-PF	Dividend	s and Inter	est fr	om Secur	ities	Statement 2	
Source	Gross Amount	Capital Gains Dividend	R	(a) evenue r Books	(b) Net Invest ment Incor	_	
BENJAMIN F. EDWARDS	6790	•	0.	6790.	6790	· · · · · · · · · · · · · · · · · · ·	
To Part I, line 4 =	6790	•	0. 6790.		6790).	
Form 990-PF		Accounti	ng Fee	s		Statement 3	
Description		(a) Expenses Per Books	Net I	b) nvest- Income	(c) Adjusted Net Income	(d) Charitable Purposes	
ACCOUNTING FEES		900.		0.	···		
To Form 990-PF, Pg 1	., ln 16b =	900.		0.		0.	
Form 990-PF	0	ther Profes	sional	Fees		Statement 4	
/ Description		(a) Expenses Per Books	Net I	b) nvest- Income	(c) Adjusted Net Income	(d) Charitable Purposes	
INVESTMENT FEES	_	6019.		6019.		0.	
To Form 990-PF, Pg 1		6019.	· 	6019.		0.	

Form 990-PF	Other E	xpenses			Statement	5	
Expenses Net I		(b) Net Invest- ment Income		(c) Adjusted Net Incom		Charitable	
SECRETARY OF STATE FEE BANK CHARGES	15. 99.	0.				0.	
To Form 990-PF, Pg 1, ln 23	114.		0.			0.	
Form 990-PF	Other F	unds			Statement	6	
Description			Beg:	(A) inning of Year	(B) End of Year		
Endowment Fund				-161389.	-163446.		
Total to Form 990-PF, Part II, line 29				-161389.	-163446.		
Form 990-PF	Corporat	e Stock			Statement	7	
Description			Вос	ok Value	Fair Marke Value	t	
500 SH-INTEL CORP 100 SH-SPOTIFY TECHNOLOGY SA 100 SH-LYONDELLBASELL INDUSTR 14 SH-ALPHABET INC CAP STK CI 14 SH-AMAZON COM INC 3000 SH-ANTERO RES CORP 500 SH-ASTEC INDS INC 200 SH-JOHNSON & JOHNSON 2300 SH-LUMINEX CORP 200 SH-OKTA INC CL A 1500 SH-SCHLUMBERGER LTD 200 SH-SPLUNK INC	RIES NV			17515. 15280. 9144. 16468. 24020. 14847. 15361. 10404. 49200. 19064. 87152. 12995.	187 258	55. 48. 70. 50. 00. 74. 68. 74.	
Total to Form 990-PF, Part II, line 10b				291450.	3242	36	

Form 990-PF Other	Investments		Statement	8
Description	Valuation Method	Book Value	Fair Market Value	
500 UNITS-ENTERPRISE PRODS PARTNERS	COST			
LP 9.11 UNITS-UNITI GROUP INC	COST	10989. 54657.	1408 4926	
Total to Form 990-PF, Part II, line	13	65646.	6334	0.