

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation CAROLYN W & CHARLES T BEAIRD FAMILY FOUNDATION		A Employer identification number 72-6027212	
Number and street (or P.O. box number if mail is not delivered to street address) 330 MARSHALL ST 1440		Room/suite	B Telephone number (see instructions) (318) 221-2823
City or town, state or province, country, and ZIP or foreign postal code SHREVEPORT, LA 711013015		C If exemption application is pending, check here ☐	
G Check all that apply: ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here..... ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 28,992,275		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ☒ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	64,132	64,132		
	4 Dividends and interest from securities	452,915	452,915		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	1,305,531			
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		1,305,531		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	17,165	8,459		
	12 Total. Add lines 1 through 11	1,839,743	1,831,037		
	13 Compensation of officers, directors, trustees, etc.	70,000			70,000
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits	3,500			3,500
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,850	555		1,295
	c Other professional fees (attach schedule)	106,292	106,292		
	17 Interest	644			
	18 Taxes (attach schedule) (see instructions)	31,887	11,617		5,355
	19 Depreciation (attach schedule) and depletion	2,482			
	20 Occupancy				
	21 Travel, conferences, and meetings	66,743			66,743
	22 Printing and publications				
	23 Other expenses (attach schedule)	327,181	292,506		34,675
	24 Total operating and administrative expenses. Add lines 13 through 23	610,579	410,970		181,568
	25 Contributions, gifts, grants paid	1,288,872			1,288,872
	26 Total expenses and disbursements. Add lines 24 and 25	1,899,451	410,970		1,470,440
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-59,708			
	b Net investment income (if negative, enter -0-)		1,420,067		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	5,172	21,796	21,796
	2 Savings and temporary cash investments	225,732	229,098	229,098
	3 Accounts receivable ▶ <u>7,892</u>			
	Less: allowance for doubtful accounts ▶ _____	18,171	7,892	7,892
	4 Pledges receivable ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	37,696	23,495	23,495
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	17,122,529	17,114,986	20,127,882
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____			
Less: accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)				
14 Land, buildings, and equipment: basis ▶ <u>12,798</u>				
Less: accumulated depreciation (attach schedule) ▶ <u>11,615</u>	2,380	1,183	1,183	
15 Other assets (describe ▶ _____)	5,437,847	5,391,360	8,580,929	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	22,849,527	22,789,810	28,992,275	
Liabilities	17 Accounts payable and accrued expenses	2,379	2,370	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	2,379	2,370	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☒ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	22,847,148	22,787,440	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	22,847,148	22,787,440	
	30 Total liabilities and net assets/fund balances (see instructions) .	22,849,527	22,789,810	

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	22,847,148
2 Enter amount from Part I, line 27a	2	-59,708
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	22,787,440
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	22,787,440

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a BERNSTEIN - SALE OF ST COV. SEC.		P		2019-11-20
b BERNSTEING - SALE OF LT COV SEC		P		2019-12-27
c CASH IN LIEU		P		2019-04-18
d BEAIRD PROPERTIES		P		2019-12-31
e BEAIRD PROPERTIES		P		2019-12-31

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 416,040		391,399	24,641
b 3,284,384		2,709,557	574,827
c 89			89
d 408,092			408,092
e 297,499			297,499

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			24,641
b			574,827
c			89
d			408,092
e			297,499

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	1,305,531
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		3	24,730

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

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

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

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



Yes



No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	1,473,884	26,668,909	0.055266
2017	1,309,413	25,746,084	0.050859
2016	1,277,608	24,250,277	0.052684
2015	1,256,486	24,167,254	0.051991
2014	1,195,311	23,796,340	0.050231

2 Total of line 1, column (d)	2	0.261031
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.052206
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	27,821,876
5 Multiply line 4 by line 3	5	1,452,469
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	14,201
7 Add lines 5 and 6	7	1,466,670
8 Enter qualifying distributions from Part XII, line 4	8	1,470,440

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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

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% of Part I, line 27b	1	14,201
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	
3	Add lines 1 and 2.	3	14,201
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	14,201
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	35,696
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	35,696
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	21,495
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 21,495 Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	
b If "Yes," has it filed a tax return on Form 990-T for this year?	Yes	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
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? <i>If "No," attach explanation .</i>	Yes	
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 taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12	Yes	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.BEAIRDFoundation.ORG	13	Yes	
14	The books are in care of THE ORGANIZATION Telephone no. (318) 221-2823			

Located at **330 MARSHALL ST 1440 SHREVEPORT LA** ZIP+4 **71101**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ☐ and enter the amount of tax-exempt interest received or accrued during the year 15		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	16	Yes No

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

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

1a	During the year did the foundation (either directly or indirectly):		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance check here. ☐	1b		No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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.)	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. ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "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 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2019?	4b		No

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

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		5b	
	Organizations relying on a current notice regarding disaster assistance check here. 	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	☐ Yes ☐ No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No			
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000. 				

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		

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	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	19,182,852
b	Average of monthly cash balances.	1b	481,778
c	Fair market value of all other assets (see instructions).	1c	8,580,929
d	Total (add lines 1a, b, and c).	1d	28,245,559
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	28,245,559
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	423,683
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	27,821,876
6	Minimum investment return. Enter 5% of line 5.	6	1,391,094

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

1	Minimum investment return from Part X, line 6.	1	1,391,094
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	14,201
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	14,201
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,376,893
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	1,376,893
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,376,893

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,470,440
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:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,470,440
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. See instructions.	5	14,201
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,456,239

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				1,376,893
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			416,530	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>1,470,440</u>				
a Applied to 2018, but not more than line 2a			416,530	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2019 distributable amount.				1,053,910
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b.				
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.				
d Subtract line 6c from line 6b. Taxable amount—see instructions.				
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.				
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				322,983
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test—enter:

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

c "Support" alternative test—enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV

1

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

NONE

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

NONE

2

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
TOYA GRAHAM EXECUTIVE DIRECTOR
330 MARSHALL ST 1440
SHREVEPORT, LA 71101
(318) 221-8276
TOYA@BEAIRDFOUNDATION.ORG

b The form in which applications should be submitted and information and materials they should include:
THE APPLICATION FORM IS AVAILABLE AT WWW.BEIRDFFOUNDATION.ORG. APPLICANTS MUST USE THIS FORM AND SUBMIT ONLINE AT THIS WEBSITE. IN ADDITION, PRIOR TO THE SUBMISSION OF AN APPLICATION, APPLICANT MUST COMPLETE A LETTER OF INTENT.

c Any submission deadlines:
SEMI-ANNUAL DEADLINES: JANUARY 5TH AND JULY 21ST

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

AWARDS ARE PRIMARILY TO QUALIFIED NON-PROFIT ORGANIZATIONS LOCATED IN THE SHREVEPORT AND BOSSIER CITY AREAS OF NORTH LOUISIANA. NO SCHOLARSHIPS OR GRANTS ARE AWARDED TO INDIVIDUALS.

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	1,288,872
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated.

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g Fees and contracts from government agencies				
2 Membership dues and assessments.				
3 Interest on savings and temporary cash investments				
		14	64,132	
4 Dividends and interest from securities.				
		14	452,915	
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.				
		15	8,459	
8 Gain or (loss) from sales of assets other than inventory				
				1,305,531
9 Net income or (loss) from special events:				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue:				
a OTHER REVENUE				
				6,000
b FROM K-1				
531110	2,706	3		
c _____				
d _____				
e _____				
12 Subtotal. Add columns (b), (d), and (e).				
	2,706		525,506	1,311,531
13 Total. Add line 12, columns (b), (d), and (e).				
				1,839,743

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII

- | | Yes | No |
|--|-----|----|
|--|-----|----|

--	--	--

- | | | |
|-------|--|----|
| 1a(1) | | No |
| 1a(2) | | No |

--	--	--

- | | | |
|--------------|--|-----------|
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |

1c		No
----	--	----

value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here 	*****	2020-11-10	*****	May the IRS discuss this return with the preparer shown below (see instr.) ☒ Yes ☐ No
	_____ Signature of officer or trustee	_____ Date	_____ Title	

Paid Preparer Use Only	ROBERT E KING III		2020-11-16		
	Firm's name ► HUMMINGBIRD KING & BUTLER CPAS				Firm's EIN ► 72-0941949
	Firm's address ► 330 MARSHALL ST STE 600 SHREVEPORT, LA 711013293				Phone no. (318) 221-1803

May the IRS discuss this return with the preparer shown below
(see instr.) ☒ **Yes** ☐ **No**

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ELIZABETH BEAIRD	PRESIDENT 25.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
NICOLE SEAWELL	VICE PRESIDE 5.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
VIKKI WOLF	SECRETARY 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
MARJORIE SEAWELL	DIRECTOR 1.00	0	0	0
330 MARHSALL ST SUITE 1440 SHREVEPORT, LA 71101				
SUSAN BEAIRD	DIRECTOR 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
DUNCAN SEAWELL	DIRECTOR 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
JOHN BEAIRD	DIRECTOR 2.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
TOYA GRAHAM	EXECUTIVE DI 40.00	70,000	0	0
330 MARSHALL ST SUITE 330 SHREVEPORT, LA 71101				
AUSTIN DARR	DIRECTOR 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
MATT WOLF	DIRECTOR 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
MALCOLM SEAWELL	TREASURER 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
JACKSON DARR	DIRECTOR 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				
TYLER WOLF	DIRECTOR 1.00	0	0	0
330 MARSHALL ST SUITE 1440 SHREVEPORT, LA 71101				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ACADEMY OF CHILDREN'S THEATRE 1666 EAST BERT KOUNS SUITE 200 SHREVEPORT, LA 71105			GENERAL OPERATING	1,250
ALLIANCE FOR EDUCATION 509 OLIVE WAY SUITE 220 SEATTLE, WA 981012557			GENERAL OPERATING	5,670
AMERICAN UNIVERSITY OFFICE OF DEVELOPMENT & ALUMNI AFFAIRS 4400 MASSACHUSETTS AVE NW WASHINGTON, DC 200168143			GENERAL OPERATING	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN UNIVERSITY OFFICE OF DEVELOPMENT & ALUMNI AFFAIRS 4400 MASSACHUSETTS AVE NW WASHINGTON, DC 200168143			GENERAL OPERATING	100
ANCHOR CENTER FOR BLIND CHILDREN 2550 ROSLYN ST DENVER, CO 80238			GENERAL OPERATING	50
BERNSTEIN DEVELOPMENT INC 1706 HOLLYWOOD AVENUE SHREVEPORT, LA 71108			PROGRAM SERVICES	28,100
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIOMEDICAL RESEARCH FOUNDATION OF NORTHWEST LOUISIANA 2031 KINGS HIGHWAY SHREVEPORT, LA 71103			PROGRAM SERVICES	10,000
BOOK HARVEST5802 BRISBANE DRIVE CHAPEL HILL, NC 27514			GENERAL OPERATING	60
BOSSIER COUNCIL ON AGING 706 BEARKAT DR BOSSIER CITY, LA 71111			CAPITAL EXPENSES	15,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOY SCOUTS OF AMERICA NORWELA COUNCIL3508 BEVERLY PLACE SHREVEPORT, LA 71104			GENERAL OPERATING	1,500
CADDO COUNCIL ON AGING1700 BUCKNER STREET SHREVEPORT, LA 71101			CAPITAL EXPENSES	25,000
CARNIVAL EDUCATION FUND4735 SPOTTSWOOD AVE SUITE 103 MEMPHIS, TN 38117			GENERAL OPERATING	2,500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAROLINA FRIENDS SCHOOL 4809 FRIENDS SCHOOL ROAD DURHAM, NC 27705			GENERAL OPERATING	1,000
CAROLINA FRIENDS SCHOOL 4809 FRIENDS SCHOOL ROAD DURHAM, NC 27705			GENERAL OPERATING	250
CATHOLIC DIOCESE OF LAFAYETTE ST CECILIA302 W MAIN STREET BROUSSARD, LA 70518			GENERAL OPERATING	1,500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CATHOLIC DIOCESE OF LAFAYETTE ST CECILIA302 W MAIN STREET BROUSSARD, LA 70518			GENERAL OPERATING	1,000
CATHOLIC SERVICES OF ACADIANA INC PO BOX 3177 LAFAYETTE, LA 70502			PROGRAM SERVICES	500
CATHOLIC SERVICES OF NORTH LOUISIAN 331 EAST 71ST ST SHREVEPORT, LA 71106			GENERAL OPERATING	37,500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER FOR PET SAFETY 11921 FREEDOM DRIVE SUITE 550 RESTON, VA 20190			GENERAL OPERATING	500
CHERRY CREEK SCHOOL DISTRICT FOUNDATION4700 S YOSEMITE STREET SUITE 130 GREENWOOD VILLAGE, CO 80111			GENERAL OPERATING	4,500
CHILD CARE SERVICES ASSOCIATION PO BOX 901 CHAPEL HILL, NC 27514			GENERAL OPERATING	35
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN & ARTHRITIS INC 2751 ALBERT BICKNELL DR SUITE 2E SHREVEPORT, LA 71103			GENERAL OPERATING	500
CHIMP HAVEN 13600 CHIMPANZEE PLACE KEITHVILLE, LA 71047			GENERAL OPERATING	1,000
CHIMP HAVEN 13600 CHIMPANZEE PLACE KEITHVILLE, LA 71047			GENERAL OPERATING	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHIMP HAVEN 13600 CHIMPANZEE PLACE KEITHVILLE, LA 71047			GENERAL OPERATING	500
CHRISTIAN SERVICE PROGRAM 2346 LEVY STREET SHREVEPORT, LA 71101			GENERAL OPERATING	35,000
CHURCH HEALTH CENTER 1350 CONCOURSE AVE SUITE 142 MEMPHIS, TN 38104			GENERAL OPERATING	2,500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CITY LAX - DENVER 1106 COLUMBINE STREET DENVER, CO 80206			GENERAL OPERATING	1,000
COHABITAT FOUNDATION INC 500 CLYDE FANT PARKWAY SUITE 200 SHREVEPORT, LA 71101			PROGRAM SERVICES	30,000
COHABITAT FOUNDATION INC 500 CLYDE FANT PARKWAY SUITE 200 SHREVEPORT, LA 71101			PROGRAM SERVICES	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COHABITAT FOUNDATION INC 500 CLYDE FANT PARKWAY SUITE 200 SHREVEPORT, LA 71101			GENERAL OPERATING	50
COHABITAT FOUNDATION INC 500 CLYDE FANT PARKWAY SUITE 200 SHREVEPORT, LA 71101			GENERAL OPERATING	50
COLORADO FRIENDS OF COLORADO WSRP C/O ROSE COMMUNITY FOUNDATION 600 S CHERRY STREET SUITE 1200 DENVER, CO 802461712			GENERAL OPERATING	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMON GROUND COMMUNITY INC 4830 LINE AVE 117 SHREVEPORT, LA 71106			CAPITAL EXPENSES	20,000
COMMON GROUND COMMUNITY INC 4830 LINE AVE 117 SHREVEPORT, LA 71106			GENERAL OPERATING	1,000
COMMON GROUND COMMUNITY INC 4830 LINE AVE 117 SHREVEPORT, LA 71106			GENERAL OPERATING	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMON GROUND COMMUNITY INC 4830 LINE AVE 117 SHREVEPORT, LA 71106			GENERAL OPERATING	500
COMMUNITY FOUNDATION OF NORTH LOUISIANA 401 EDWARDS STREET SUITE 105 SHREVEPORT, LA 71101			DONOR ADVISED FUND	46,000
COMMUNITY HOME TRUST PO BOX 2315 CHAPEL HILL, NC 27517			GENERAL OPERATING	750
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY SAILING OF COLORADO PO BOX 102613 DENVER, CO 80250			GENERAL OPERATING	500
COMPASSION FOR LIVES 7505 PINES ROAD SUITE 1265 SHREVEPORT, LA 71129			GENERAL OPERATING	30,000
CORNELL UNIVERSITY OFFICE OF ALUMNI AFFAIRS 130 EAST SENECA STREET ITHACA, NY 14850			GENERAL OPERATING	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COUNCIL ON ALCOHOLISM AND DRUG ABUS OF NORTHWEST LOUISIANA 2000 FAIRFIELD AVENUE SHREVEPORT, LA 71115			CAPITAL EXPENSES	25,000
DEMOCRACY NORTH CAROLINA 1821 GREEN STREET DURHAM, NC 277054114			GENERAL OPERATING	1,000
DENVER PUBLIC SCHOOLS HALLETT ACADEMY 1860 LINCOLN ST 11TH FLOOR FINANCE DEPT DENVER, CO 80203			GENERAL OPERATING	3,500
Total ► 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DENVER RESCUE MISSION 6100 SMITH ROAD DENVER, CO 80216			GENERAL OPERATING	350
EL CENTRO HISPANO 2000 CHAPEL HILL RD STE 26 A DURHAM, NC 27707			GENERAL OPERATING	500
ELM FORK CHAPTER OF TEXAS MASTER NATURALISTS INC 401 W HICKORY ST SUITE 112 DENTON, TX 76201			GENERAL OPERATING	1,619
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EVERGREEN PRESBYTERIAN MINISTRIES 2101 HIGHWAY 80 HAUGHTON, LA 71037			PROGRAM SERVICES	1,000
FIRST PRESBYTERIAN CHURCH 900 JORDAN ST SHREVEPORT, LA 71101			GENERAL OPERATING	4,000
FIRST PRESBYTERIAN DAY SCHOOL 900 JORDAN ST SHREVEPORT, LA 71101			GENERAL OPERATING	4,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FIRST PRESBYTERIAN DAY SCHOOL 900 JORDAN ST SHREVEPORT, LA 71101			PROGRAM SERVICES	1,500
FORENSIC NURSES OF LOUISIANA INC 2900 HEARNE AVE SHREVEPORT, LA 71103			GENERAL OPERATING	500
FOUNDATION OF FIGHTING BLINDNESS 7168 COLUMBIA GATEWAY DR SUITE 100 COLUMBIA, MD 21046			GENERAL OPERATING	250
Total ► 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF HAWTHORNE PTA 4100 39TH AVE S SEATTLE, WA 98118			GENERAL OPERATING	5,150
FRONTLINE INCIDENT RESPONSE SOLUTION AND TRAININGPO BOX5310 SHREVEPORT, LA 71135			GENERAL OPERATING	20,000
GAYLORD HOSPITALPO BOX 400 WALLINGFORD, CT 06492			PROGRAM SERVICES	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GEAUX 4 KIDS INCPO BOX 597 SHREVEPORT, LA 711620597			GENERAL OPERATING	12,000
GEAUX 4 KIDS INCPO BOX 597 SHREVEPORT, LA 711620597			GENERAL OPERATING	3,500
GEAUX 4 KIDS INCPO BOX 597 SHREVEPORT, LA 711620597			PROGRAM SERVICES	2,500
Total ► 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GEAUX 4 KIDS INCPO BOX 597 SHREVEPORT, LA 711620597			PROGRAM SERVICES	1,500
GEAUX 4 KIDS INCPO BOX 597 SHREVEPORT, LA 711620597			PROGRAM SERVICES	1,000
GERMANTOWN CHARITY HORSE SHOW PO BOX 38102 GERMANTOWN, TN 38183			GENERAL OPERATING	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GINGERBREAD HOUSE 1700 BUCKNER SQUARE SUITE 101 SHREVEPORT, LA 71101			GENERAL OPERATING	15,000
GINGERBREAD HOUSE 1700 BUCKNER SQUARE SUITE 101 SHREVEPORT, LA 71101			GENERAL OPERATING	1,000
GINGERBREAD HOUSE 1700 BUCKNER SQUARE SUITE 101 SHREVEPORT, LA 71101			GENERAL OPERATING	750
Total			▶ 3a	1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GINGERBREAD HOUSE 1700 BUCKNER SQUARE SUITE 101 SHREVEPORT, LA 71101			GENERAL OPERATING	500
GINGERBREAD HOUSE 1700 BUCKNER SQUARE SUITE 101 SHREVEPORT, LA 71101			GENERAL OPERATING	500
GOLDEN RETRIEVER FREEDOM RESCUE PO BOX 103130 DENVER, CO 80250			GENERAL OPERATING	50
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GREATER PARK HILL COMMUNITY 2823 FAIRFAX ST DENVER, CO 80207			GENERAL OPERATING	225
GULF SOUTH GOLDEN RETRIEVER RESCUE 2664 CHOCTAW TRAIL MARIANNA, FL 32446			GENERAL OPERATING	500
HEARTS OF HOPEPO BOX 53967 LAFAYETTE, LA 70505			GENERAL OPERATING	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOPE CONNECTIONS INC 2350 LEVY STREET SHREVEPORT, LA 71103			GENERAL OPERATING	500
INTER CITY ROW MODERN DANCE COMPANY 2021 MARTIN LUTHER KING DRIVE SHREVEPORT, LA 71107			GENERAL OPERATING	13,500
JEWISH FAMILY SERVICES OF SAN DIEGO 8804 BALBOA AVE SAN DIEGO, CA 92123			PROGRAM SERVICES	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWISH FAMILY SERVICES OF SAN DIEGO 8804 BALBOA AVE SAN DIEGO, CA 92123			PROGRAM SERVICES	250
JEWISH FAMILY SERVICES OF SAN DIEGO 8804 BALBOA AVE SAN DIEGO, CA 92123			GENERAL OPERATING	25
JUNETEENTH MUSIC FESTIVAL PO BOX 460454 GLENDALE, CO 80246			GENERAL OPERATING	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LEWISVILLE HIGH SCHOOL THEATRE BOOSTERSPO BOX 292912 LEWISVILLE, TX 75029			GENERAL OPERATING	100
LEWISVILLE HIGH SCHOOL THEATRE BOOSTERSPO BOX 292912 LEWISVILLE, TX 75029			GENERAL OPERATING	100
LEWISVILLE HIGH SCHOOL THEATRE BOOS PO BOX 292912 LEWISVILLE, TX 75029			GENERAL OPERATING	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOUISIANA A SCHOOLS SHAW CENTER FOR THE ARTS 100 LAFAYETTE ST STE B222 BATON ROUGE, LA 70801			PROGRAM SERVICES	60,000
LOUISIANA ARCHITECTURE FOUNDATION 521 AMERICA STREET BATON ROUGE, LA 70802			PROGRAM SERVICES	16,000
LOUISIANA ASOCIATION FOR THE BLIND 1750 CLAIBORNE AVE SHREVEPORT, LA 71103			CAPITAL EXPENSES	15,000
Total			3a	1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOUISIANA ASSOCIATION FOR THE BLIND 1750 CLAIBORNE AVE SHREVEPORT, LA 71103			GENERAL OPERATING	250
MAIA1031 33RD ST SUITE 176 DENVER, CO 80205			GENERAL OPERATING	500
LOUISIANA ENDOWMENT FOR THE HUMANIT 938 LAFAYETTE STREET SUITE 300 NEW ORLEANS, LA 70113			PROGRAM SERVICES	37,155
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAKE-A-WISH MID-SOUTH 1780 MORIAH WOODS BLVD SUITE 10 MEMPHIS, TN 38117			GENERAL OPERATING	500
MARTIN LUTHER KING HEALTH CENTER 865 OLIVE STREET SHREVEPORT, LA 71104			GENERAL OPERATING	30,750
MARTIN LUTHER KING COMMUNITY DEVELOPMENT CORPORATION 3067 DR MARTIN L KING JR DRIVE SHREVEPORT, LA 71107			PROGRAM SERVICES	35,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHAEL J FOX FOUNDATION PO BOX 5014 HAGERSTOWN, MD 217415014			GENERAL OPERATING	500
MID-SOUTH FOOD BANK 239 SOUTH DUDLEY MEMPHIS, TN 38104			GENERAL OPERATING	500
MIRACLES ON ICE-HOWARD FAMILY FOUND 9 WATERSIDE TERRACE CHERRY HILLS VILLAGE, CO 80113			GENERAL OPERATING	500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MISSIO DEI CHURCH 621 S WHITE STATION RD MEMPHIS, TN 38117			GENERAL OPERATING	6,000
MORRIS ANIMAL FOUNDATION 720 S COLORADO BLVD SUITE 174A DENVER, CO 80246			PROGRAM SERVICES	1,000
NORTH CAROLINA JUSTICE CENTER PO BOX 28068 RALEIGH, NC 27611			PROGRAM SERVICES	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NW LA EDUCATION AND LEADERSHIP FOUN PO BOX 5956 BOSSIER CITY, LA 711715956			GENERAL OPERATING	30,000
PAMOJA ART SOCIETY 3806 LINWOOD AVENUE SHREVEPORT, LA 71103			CAPITAL EXPENSES	12,500
PARK HILL COLLECTIVE IMPACT 3475 HOLLY ST DENVER, CO 80207			GENERAL OPERATING	3,100
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PARK HILL ELEMENTARY PTA ATTN PTSA5050 EAST 19TH AVENUE DENVER, CO 80220			GENERAL OPERATING	800
PARTNERS IN HEALTHPO BOX 996 FREDERICK, MD 210759942			GENERAL OPERATING	5,025
PEOPLE ACTING FOR CHANGE AND EQUALI 906 KIRBY PL SHREVEPORT, LA 71104			PROGRAM SERVICES	5,215
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PET SAVERS632 DUDLEY DR SHREVEPORT, LA 71104			GENERAL OPERATING	2,000
PHILADELPHIA CENTER 2020 CENTENARY BOULEVARD SHREVEPORT, LA 71104			GENERAL OPERATING	250
PLANNED PARENTHOOD SOUTH ATLANTIC 100 SOUTH BOYLAN AVENUE RALEIGH, NC 27603			GENERAL OPERATING	3,984
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PLANT A SEED IN OUR YOUTH FOUNDATIO 1518 COX STREET BOSSIER CITY, LA 71111			GENERAL OPERATING	500
PLAYAZ AND PLAYETTES INC 835 BUTLER STREET SHREVEPORT, LA 71103			GENERAL OPERATING	3,000
PROJECT RECLAIM OF MINDEN INC PO BOX 444 MINDEN, LA 71058			GENERAL OPERATING	16,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PROVIDENCE HOUSE 814 COTTON STREET SHREVEPORT, LA 71101			PROGRAM SERVICES	50,000
REPAIRERS OF THE BREACH INC PO BOX 1638 GOLDSBORO, NC 275331638			GENERAL OPERATING	310
RED RIVER REVEL 101 CROCKETT STREET SUITE C SHREVEPORT, LA 71101			GENERAL OPERATING	10,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RED RIVER STEM 820 CLYDE FANT PARKWAY SHREVEPORT, LA 71101			PROGRAM SERVICES	25,934
RENESTING PROJECT INC 1331 DRIFTWOOD DRIVE BOSSIER CITY, LA 71111			GENERAL OPERATING	25,000
RENZI EDUCATION AND ART CENTER 435 EGAN STREET SHREVEPORT, LA 71101			GENERAL OPERATING	250
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RHO OMEGA AND FRIENDS INC PO BOX 19431 SHREVEPORT, LA 71149			PROGRAM SERVICES	10,000
ROBINSON'S RESCUE LOW COST SPAY 2515 LINE AVENUE SHREVEPORT, LA 71104			GENERAL OPERATING	1,750
SACRED HEART OF JESUSPO BOX 737 BROUSSARD, LA 70518			GENERAL OPERATING	1,500
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SADIE'S ARMS INC4466 FAIRWAY DR SHREVEPORT, LA 71109			GENERAL OPERATING	15,000
SANCTUARY ARTS SCHOOL 1200 MARSHALL STREET SHREVEPORT, LA 71101			GENERAL OPERATING	750
SEMESTER AT SEAINSTITUTE FOR SHIPB COLORADO STATE UNIVERSITY CAMPUS DELIVERY 1587 FT COLLINS, CO 805231587			GENERAL OPERATING	350
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHREVEPORT GREEN 3625 SOUTHERN AVENUE SHREVEPORT, LA 71104			GENERAL OPERATING	16,400
SHREVEPORT OPERA6969 FERN LOOP SUITE 206 SHREVEPORT, LA 71105			PROGRAM SERVICES	10,000
SHREVEPORT REGIONAL ARTS COUNCIL 801 CROCKETT ST SHREVEPORT, LA 71101			CAPITAL EXPENSES	25,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104			GENERAL OPERATING	500
SPEAKING PLACEPO BOX 905 ROCKLAND, ME 04841			GENERAL OPERATING	3,000
ST GEORGE EPISCOPAL CHURCH 2425 S GERMANTOWN RD GERMANTOWN, TN 38138			GENERAL OPERATING	4,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST LUKE'S EPISCOPAL MOBILE MEDICAL PO BOX 53074 SHREVEPORT, LA 71135			GENERAL OPERATING	1,000
STEDMAN PTA2940 DEXTER ST DENVER, CO 80207			PROGRAM SERVICES	3,500
STEP FORWARD401 EDWARDS STREET SUITE 125 SHREVEPORT, LA 71101			GENERAL OPERATING	30,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STEVE'S CLUB DENVER 950 S CHERRY ST SUITE 1140 DENVER, CO 80246			GENERAL OPERATING	8,400
STEVES CLUB NATIONAL PROGRAM PO BOX 18082 DENVER, CO 80218			PROGRAM SERVICES	11,450
STRATEGIC ACTION COUNCIL 331 MILAM STREET SUITE 314 SHREVEPORT, LA 71101			GENERAL OPERATING	25,000
Total ► 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE BETTY AND LEONARD PHILLIPS DEAF ACTION CENTER 601 JORDAN STREET SHREVEPORT, LA 71101			CAPITAL EXPENSES	10,000
THE CHERRY HILLS LAND PRESERVE PO BOX 522 ENGLEWOOD, CO 80151			GENERAL OPERATING	1,000
THE CHILDREN'S HOSPITAL COLORADO 13123 E 16TH AVENUE BOX 045 AURORA, CO 80045			GENERAL OPERATING	11,450
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE FIRST TEE MIAMI-DADE AMATEUR GOLF ASSOCIATION1802 NW 37TH AVE MIAMI, FL 33125			GENERAL OPERATING	100
THE GEORGE WASHINGTON UNIVERSITY PO BOX 98131 WASHINGTON, DC 20077			GENERAL OPERATING	250
THE MORGAN ADAMS FOUNDATION 5303 E EVANS AVE STE 202 DENVER, CO 80222			GENERAL OPERATING	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE NATURE CONSERVANCY 721 GOVERNMENT ST STE 200 BATON ROUGE, LA 70802			PROGRAM SERVICES	15,000
THE PERIWINKLE FOUNDATION 3400 BISSONNET ST SUITE 185 HOUSTON, TX 77005			GENERAL OPERATING	4,000
THE WATER PROJECTPO BOX 3353 CONCORD, NH 033023353			GENERAL OPERATING	50
Total ► 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THEATRE OF THE PERFORMING ARTS 4005 LAKESHORE DRIVE SHREVEPORT, LA 71109			PROGRAM SERVICES	30,000
THERE WITH CARE-DENVER 2401 SOUTH COLORADO BLVD SUITE A DENVER, CO 80222			GENERAL OPERATING	4,150
TOGETHER RISING 800 WEST BOARD STREET FALLS CHURCH, VA 22040			PROGRAM SERVICES	250
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRAINING EDUCATION AND MEDIATION FOR STUDENDS INC TEAMS 1545 LINE AVE STE 228 SHREVEPORT, LA 71101			GENERAL OPERATING	20,000
TRANSPLANTING TRADITIONS PO BOX 835 HILLSBOROUGH, NC 27278			GENERAL OPERATING	1,000
TROOP 712 BOYS SCOUTS BETHANY LUTHERAN CHURCH 4500 E HAMPDEN AVE CHERRY HILLS VILLAGE, CO 80113			GENERAL OPERATING	2,500
Total			▶ 3a	1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRUTHOUTPO BOX 276414 SACRAMENTO, CA 95827			GENERAL OPERATING	65
UNITED WAY OF NW LOUISIANA 820 JORDON SUITE 370 SHREVEPORT, LA 71101			CAPITAL EXPENSES	25,000
UNIVERSITY OF DENVER-STURM COLLEGE 2255 E EVANS AVENUE DENVER, CO 80208			GENERAL OPERATING	1,000
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF PENNSYLVANIA LAW SCH 3451 WALNUT ST ROOM 433 PHILADELPHIA, PA 191046205			GENERAL OPERATING	1,000
VOLUNTEERS FOR YOUTH JUSTICE 900 JORDON STREET SUITE 102 SHREVEPORT, LA 71101			PROGRAM SERVICES	52,000
VOLUNTEERS FOR YOUTH JUSTICE 900 JORDON STREET SUITE 102 SHREVEPORT, LA 71101			GENERAL OPERATING	1,000
Total			3a	1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VOLUNTEERS OF AMERICA OF NORTH LA 360 JORDON ST SHREVEPORT, LA 71101			CAPITAL EXPENSES	500
WUNC 915 NC PUBLIC RADIO 120 FRIDAY CENTER DR CHAPEL HILL, NC 27517			GENERAL OPERATING	150
YMCA OF METROPOLITAN DENVER 2625 S COLORADO BLVD DENVER, CO 80222			GENERAL OPERATING	975
Total ▶ 3a				1,288,872

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOUTH OUTREACH SERVICES 7903 ARCADIAN SHORES DRIV SHREVEPORT, LA 71129			GENERAL OPERATING	40,000
YWCA OF NORTHWEST LA 850-B OLIVE STREET SHREVEPORT, LA 71104			PROGRAM SERVICES	64,575
Total ▶ 3a				1,288,872

TY 2019 Accounting Fees Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,850	555		1,295

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Depreciation Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION
EIN: 72-6027212

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER	2006-03-15	727	727	S/L	5.0000				
OFFICE SOFTWARE	2006-03-15	480	480		3.0000				
DESKTOP COMPUTER	2010-08-24	1,296	1,296	200DB	5.0000				
CONFERENCE TABLE	2013-12-03	1,093	800	S/L	7.0000	156			
LAPTOP	2017-06-20	888	444	S/L	3.0000	296			
I-CLICKERS	2017-06-20	2,738	1,424	200DB	5.0000	525			
PROJECTOR	2017-07-19	658	329	S/L	3.0000	219			
FURNITURE & FIXTURES	2006-02-15	3,632	3,632	S/L	7.0000				
DELL INSPIRON COMPUTER	2019-10-22	1,286		200DB	5.0000	1,286			

TY 2019 Investments Corporate Stock Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BROKER INVESTMENTS	17,114,986	20,127,882

**TY 2019 Land, Etc.
Schedule**

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FURNITURE & FIXTURES	12,798	11,615	1,183	1,183

TY 2019 Other Assets Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
BEAIRD PROPERTIES LLC	5,437,847	5,391,360	8,580,929

TY 2019 Other Expenses Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
EMPLOYEE HEALTH INSURANCE	10,862			10,862
MEMBER COMPENSATION	4,214			4,214
OFFICE EXPENSE	5,535			5,535
PROFESSIONAL DEVELOPMENT	5,102			5,102
INSURANCE	1,397			1,397
DUES	7,550			7,550
FILING FEES	15			15
BEAIRD PROPRITIES LLC - PASS T	292,506	292,506		

TY 2019 Other Income Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BEAIRD PROPERTIES	8,459	8,459	
OTHER REVENUE	6,000		
FROM K-1	2,706		

TY 2019 Other Professional Fees Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BERNSTEIN ADVISORS	106,292	106,292		

TY 2019 Taxes Schedule

Name: CAROLYN W & CHARLES T BEAIRD
FAMILY FOUNDATION

EIN: 72-6027212

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	11,617	11,617		
PAYROLL TAXES	5,355			5,355
PENALTY	714			
EXCISE TAX ON INVESTMENT INCOME	14,201			