

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2009**Open to Public
Inspection**

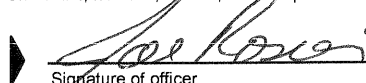
A For the 2009 calendar year, or tax year beginning		, and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE ORCHARD FOUNDATION	
		Doing Business As	
		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite
		1101 FOURTH STREET	300
		City or town, state or country, and ZIP + 4	
ALEXANDRIA LA 71301		D Employer identification number 87-0730768	
		E Telephone number 318-443-3394	
		G Gross receipts \$ 835,411	
F Name and address of principal officer: JOE ROSIER 1101 FOURTH STREET, ALEXANDRIA, LA 71301		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.theorchardfoundation.org			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2004 M State of legal domicile: LA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE ORCHARD FOUNDATION IS A NONPROFIT EDUCATION FUND ESTABLISHED AS A RESOURCE FOR CENTRAL LOUISIANA THAT WORKS WITH SCHOOL DISTRICTS, BUSINESSES, AND COMMUNITIES TO IMPROVE EDUCATIONAL OPPORTUNITIES IN A NINE-PARISH SERVICE AREA: ALLEN, AVOYELLES, CATAHOULA, GRANT, LASALLE, NATCHITOCHES. (CONTINUED ON SCH O).		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	3
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	1
	5 Total number of employees (Part V, line 2a)	5	0
6 Total number of volunteers (estimate if necessary)	6		
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,528,898	Current Year 835,250
	9 Program service revenue (Part VIII, line 2g)	0	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	984	161
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,529,882	835,411
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	39,727	124,203
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	642,565	742,863	
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	682,292	867,066	
19 Revenue less expenses. Subtract line 18 from line 12	847,590	-31,655	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 1,156,163	End of Year 1,164,427
	21 Total liabilities (Part X, line 26)	73,949	113,869
	22 Net assets or fund balances. Subtract line 21 from line 20	1,082,214	1,050,558

Part II Signature Block

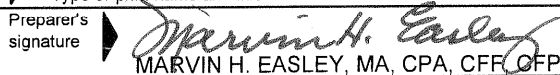
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here


Signature of officer

Date

8/12/10

JOE ROSIER, CPA
Type or print name and title**Paid Preparer's Use Only**


Firm's name (or yours if self-employed), address, and ZIP + 4

M. H. EASLEY & ASSOCIATES, LLC

1006 CALAIS CIRCLE, ALEXANDRIA, LA 71303

Date
8/12/2010Check if self-employed ☐Preparer's identifying number (see instructions)
P00293042EIN ▶ 01-0704790
Phone no. ▶ (318) 767-1455May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2009)

(HTA)

Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

THE ORCHARD FOUNDATION'S MISSION IS TO IMPROVE ACADEMIC ACHIEVEMENT FOR CENTRAL LOUISIANA STUDENTS BY PROMOTING BEST PRACTICES; RECRUITING, RETAINING, AND REWARDING EXCELLENT AND INOVATIVE TEACHERS; BUILDING SCHOOL LEADERSHIP; AND STRENGTHENING SCHOOL AND COMMUNITY RELATIONSHIPS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 284,328 including grants of \$ 0) (Revenue \$ 0)

THE ORCHARD FOUNDATION'S ADVANCED LEADERSHIP ACADEMIES CONTINUE TO SUPPORT THE DEVELOPMENT OF STRONG INSTRUCTIONAL LEADERSHIP THOUGHOUT THE CENTRAL LOUISIANA REGION BY DEVELOPING AND OFFERING TRAINING FOR CURRENT SCHOOL LEADERS. ADVANCED LEADERSHIP ACADEMIES WERE OFFERED DURING SPRING AND FALL OF 2009 TO ALL SUPERINTENDENTS AND SELECT EXPERIENCED DISTRICT ADMINISTRATORS AND PRINCIPALS. THEY WERE CONDUCTED BY A NATIONALLY RECOGNIZED ENTITY IN THIS EXPERTISE AREA, THE CENTER FOR EDUCATIONAL LEADERSHIP CENTER AT THE UNIVERSITY OF WASHINGTON.

THE ACADEMIES FOCUSED ON THE ATTRIBUTES OF EFFECTIVE TEACHING, INCLUDING PURPOSE, RIGOR AND ENGAGEMENT. GREAT EMPHASIS WAS PLACED ON WRITING AND MATHEMATICAL SKILLS, WHICH ARE CRUCIAL IN PREPARING CHILDREN FOR A FUTURE CENTERED ON A GLOBAL ECONOMY. A KEY OBJECTIVE OF THE SESSIONS WAS TO EQUIP THE LEADERS WITH THE INSTRUCTIONAL (CONTINUED ON SCH. O).

4b (Code:) (Expenses \$ 137,184 including grants of \$ 0) (Revenue \$ 0)

THE ORCHARD FOUNDATION ALSO BUILDS STRONG INSTRUCTIONAL LEADERSHIP THOUGHOUT THE CENTRAL LOUISIANA REGION BY DEVELOPING AND OFFERING LEADERSHIP ACADEMIES FOR NEW AND ASPIRING LEADERS WITHIN THE SCHOOL DISTRICTS. THESE ACADEMIES, NEW ADMINISTRATORS' ACADEMY AND EMERGING LEADERS' ACADEMY, BOTH SERVE AS HANDS-ON LEARNING TOOLS FOR PROSPECTIVE SCHOOL AND DISTRICT LEADERS. IN 2009, APPROXIMATELY 60 EDUCATORS PARTICIPATED IN THESE MONTHLY COURSES TAUGHT BY THE URBAN LEARNING AND LEADERSHIP CENTER, BASED IN NEWPORT NEWS, VIRGINIA. THE SESSIONS EXPLORED THE CONCEPT OF DISTRIBUTED LEADERSHIP AND DISTRIBUTED ACCOUNTABILITY IN THE SCHOOLS. PARTICIPANTS ALSO EXPLORED THE COMPLEXITY OF SCHOOL CULTURES MADE UP OF A SOCIAL, ACADEMIC AND MORAL FABRIC.

4c (Code:) (Expenses \$ 120,495 including grants of \$ 0) (Revenue \$ 0)

IN 2009, THE RAPIDES FOUNDATION AND THE ORCHARD FOUNDATION BEGAN A MAJOR PUSH IN SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) EDUCATION. THE RAPIDES FOUNDATION, THE ORCHARD FOUNDATION'S SUPPORTED ORGANIZATION, GAVE \$1.7 MILLION OF PLANNING GRANTS TO NINE CENTRAL LOUISIANA SCHOOL DISTRICTS. THE SCHOOL DISTRICTS DESIGNED PROGRAMS BASED ON WHAT RESEARCH SHOWS IS WORKING IN SCHOOLS ACROSS THE UNITED STATES. SO CENTRAL LOUISIANA STUDENTS WILL BE EQUIPPED TO COMPETE GLOBALLY AS THE JOB MARKET SHIFTS TO THESE SKILLS. THE ORCHARD FOUNDATION REDESIGNED ITS EDUCATIONAL OFFERINGS TO SUPPORT THE RAPIDES FOUNDATION'S NEW STEM INITIATIVE. IN JULY 2009, THE ORCHARD FOUNDATION SPONSORED A SCIENCE SUMMER INSTITUTE, "ENGAGING STUDENTS IN SCIENCE AT HIGH LEVELS." THE INSTITUTE PROVIDED 86 PARTICIPANTS WITH SCIENCE RESOURCES THAT THEY TOOK BACK TO THEIR CLASSROOM. THE RESOURCES CONTAINED LESSON PLANS THAT ARE ENGAGING, RIGOROUS AND MOTIVATING FOR STUDENTS. (CONTINUED ON SCH. O).

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 33,564 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses 575,571

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	0
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body	3			
b Enter the number of voting members that are independent		1		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5			X
6 Does the organization have members or stockholders?	6	X		
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X		
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X		
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a	X		
b Each committee with authority to act on behalf of the governing body?	8b	X		
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a			X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official.	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ►

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► JOE ROSIER 318-443-3394
 1101 FOURTH STREET, ALEXANDRIA, LA 71301

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

● List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if the organization did not compensate any current officer, director, or trustee.

[illegible]

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a 0				
	b	Membership dues	1b 0				
	c	Fundraising events	1c 0				
	d	Related organizations	1d 740,000				
	e	Government grants (contributions)	1e 0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 95,250				
	g	Noncash contributions included in lines 1a-1f: \$	0				
	h	Total. Add lines 1a-1f	835,250				
Program Service Revenue	2a	Business Code	0				
	b	0					
	c	0					
	d	0					
	e	0					
	f	All other program service revenue	0				
	g	Total. Add lines 2a-2f	0				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	161				
	4	Income from investment of tax-exempt bond proceeds	0				
	5	Royalties	0				
	6a	Gross Rents					
	b	Less: rental expenses					
	c	Rental income or (loss)	0	0			
	d	Net rental income or (loss)	0				
	7a	Gross amount from sales of assets other than inventory	0	0			
	b	Less: cost or other basis and sales expenses	0	0			
	c	Gain or (loss)	0	0			
	d	Net gain or (loss)	0				
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	0				
	b	Less: direct expenses	0				
	c	Net income or (loss) from fundraising events	0				
	9a	Gross income from gaming activities. See Part IV, line 19	0				
	b	Less: direct expenses	0				
	c	Net income or (loss) from gaming activities	0				
10a	Gross sales of inventory, less returns and allowances	0					
b	Less: cost of goods sold	0					
c	Net income or (loss) from sales of inventory	0					
Miscellaneous Revenue			Business Code				
11a	0						
b	0						
c	0						
d	All other revenue	0					
e	Total. Add lines 11a-11d	0					
12	Total revenue. See instructions	835,411	0	0	0	0	

Part IX Statement of Functional Expenses**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.****All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	0			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	98,371		98,371	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	9,837		9,837	
9 Other employee benefits	8,536		8,536	
10 Payroll taxes	7,459		7,459	
11 Fees for services (non-employees):				
a Management	0			
b Legal	5,953		5,953	
c Accounting	0			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees				
g Other	5,700	5,700		
12 Advertising and promotion	4,139	3,677	462	
13 Office expenses	32,171	25,886	6,285	
14 Information technology	0			
15 Royalties	0			
16 Occupancy	5,077		5,077	
17 Travel	14,041	2,119	11,922	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	3,681	0	3,681	0
23 Insurance	933		933	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a CONTRACT SERVICES	615,548	489,217	126,331	
b CONVENIGN & FACILATING	46,255	46,224	31	
c TELEPHONE	2,464		2,464	
d STAFF DEVELOPMENT	5,097		5,097	
e				
f All other expenses	1,804	2,748	-944	
25 Total functional expenses. Add lines 1 through 24f	867,066	575,571	291,495	0
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	218,042	1	436,875
	2 Savings and temporary cash investments		2	60,612
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	927,500	4	660,000
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 17,927		
	b Less: accumulated depreciation	10b 10,987	10,621	10c 6,940
	11 Investments—publicly traded securities	0	11	0
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,156,163	16	1,164,427	
Liabilities	17 Accounts payable and accrued expenses	73,949	17	53,358
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	0	20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	60,511
	25 Other liabilities. Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	73,949	26	113,869
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	799,345	27	544,802
	28 Temporarily restricted net assets	282,869	28	505,756
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances.	1,082,214	33	1,050,558
	34 Total liabilities and net assets/fund balances.	1,156,163	34	1,164,427

Part XI Financial Statements and Reporting

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?

- b** Were the organization's financial statements audited by an independent accountant?

- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separate basis

- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

THE ORCHARD FOUNDATION

Employer identification number

87-0730768

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☒ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Other
- e ☒ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above? ☐
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
THE RAPIDES									0
FOUNDATION	72-0423603	3	X		X		X		0
									0
									0
									0
									0
Total									0

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0				0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0				0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
4 Total. Add lines 1 through 3	0	0	0	0	0	0
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0				0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0				0
11 Total support. Add lines 7 through 10						0
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	0.00%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	0.00%
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. . . ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. . . ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0				0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	0	0				0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0				0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0				0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.00%

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐

b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Area for supplemental information with horizontal dashed lines.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009

Name of the organization

THE ORCHARD FOUNDATION

Employer identification number

87-0730768

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

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

Name of organization
THE ORCHARD FOUNDATION

Employer identification number
87-0730768

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE RAPIDES FOUNDATION 1101 FOURTH STREET, SUITE 300 ALEXANDRIA LA 71301 Foreign State or Province: _____ Foreign Country: _____	\$ 740,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	THE MARTIN FOUNDATION P.O. BOX 1100 ALEXANDRIA LA 71309-110 Foreign State or Province: _____ Foreign Country: _____	\$ 87,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	GILCHRIST CONSTRUCTION 5700 NEW YORK AVENUE ALEXANDRIA LA 71302 Foreign State or Province: _____ Foreign Country: _____	\$ 8,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ 0	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ 0	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ 0	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Employer identification number

THE ORCHARD FOUNDATION

87-0730768

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	0	0
2 Aggregate contributions to (during year)	0	0
3 Aggregate grants from (during year)	0	0
4 Aggregate value at end of year	0	0
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a 0
b Total acreage restricted by conservation easements	2b 0.00
c Number of conservation easements on a certified historic structure included in (a)	2c 0
d Number of conservation easements included in (c) acquired after 8/17/06	2d 0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0.

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ 0
(ii) Assets included in Form 990, Part X	▶ \$ 0

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$ 0
b Assets included in Form 990, Part X	▶ \$ 0

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** ☐ Public exhibition **d** ☐ Loan or exchange programs
b ☐ Scholarly research **e** ☐ Other _____
c ☐ Preservation for future generations

- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

- b** If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c 0
d Additions during the year	1d _____
e Distributions during the year	1e _____
f Ending balance	1f 0

- 2a** Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☒ No

- b** If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	0				
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0	0			

- 2** Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment ☐ _____ %
b Permanent endowment ☐ _____ %
c Term endowment ☐ _____ %

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
(ii) related organizations

- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	0	0	0
d Equipment	0	17,927	10,987	6,940
e Other	0	0	0	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				6,940

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives	0	
Closely-held equity interests	0	
Other _____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
_____	0	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►	0	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	▶ 0	

Part IX **Other Assets.** See Form 990, Part X, line 15.

[illegible]

Part X **Other Liabilities.** See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Amount
	Federal income taxes	0
		0
		0
		0
		0
		0
		0
		0
		0
		0
		0
Total.	<i>(Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶</i>	0

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	835,411
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	867,066
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-31,655
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-31,655

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	31,655
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	31,655
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	31,655

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	867,066
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	867,066
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	867,066

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: "THE FOUNDATION IS A NONPROFIT ORGANIZATION AND EXEMPT FROM FEDERAL INCOME

TAXES UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE. THEREFORE, NO PROVISION FOR

INCOME TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS, BUT THE FOUNDATION IS REQUIRED TO

FILE AN ANNUAL INFORMATION TAX RETURN. THE FOUNDATION IS ALSO REQUIRED TO REVIEW VARIOUS

TAX POSITIONS IT HAS TAKEN WITH RESPECT TO ITS EXEMPT STATUS AND DETERMINE WHETHER IN

FACT IT IS A TAX EXEMPT ENTITY. THE FOUNDATION MUST ALSO CONSIDER WHETHER IT HAS NEXUS IN

JURISDICTIONS IN WHICH IT HAS INCOME AND WHETHER A TAX RETURN IS REQUIRED IN THOSE

Part XIV Supplemental Information (continued)

JURISDICTIONS. IN ADDITION, AS A TAX EXEMPT ENTITY, THE FOUNDATION MUST ALSO ASSESS WHETHER
IT HAS ANY TAX POSITIONS ASSOCIATED WITH UNRELATED BUSINESS INCOME SUBJECT TO INCOME TAX.
THE FOUNDATION DOES NOT EXPECT ITS POSITIONS TO CHANGE SIGNIFICANTLY OVER THE NEXT TWELVE
MONTHS. ANY PENALTIES RELATED TO LATE FILING OR OTHER REQUIREMENTS WOULD BE RECOGNIZED
AS EXPENSE IN THE FOUNDATION'S ACCOUNTING RECORDS. THE FOUNDATION FILES U.S. FEDERAL FORM
990 FOR INFORMATIONAL PURPOSES. THE FOUNDATION'S FEDERAL INCOME TAX RETURNS FOR THE TAX
YEARS 2006 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE."

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

THE ORCHARD FOUNDATION

Employer identification number

87-0730768

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

☐ Compensation committee

☐ Independent compensation consultant

☐ Form 990 of other organizations

☐ Written employment contract

☐ Compensation survey or study

☐ Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

(HTA)

Schedule J (Form 990) 2009

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Area with horizontal dashed lines for supplemental information.

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ▶ Attach to Form 990.
 ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

THE ORCHARD FOUNDATION

Employer identification number
87-0730768

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

[illegible]

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
THE RAPIDES FOUNDATION 72-0423603 1101 FOURTH STREET, SUITE 300, ALEXANDRIA, LA 71301	HOSPITAL	LA	501(C)(3)	3	N/A
GMAP EXPRESS 02-0751416 1101 FOURTH STREET, ALEXANDRIA, LA 71301	HEALTHCARE	LA	501(C)(3)	11	TRF (a)
NOTE (a) - THE RAPIDES FOUNDATION					

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?
							Yes	No		
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	
-----					0	0			0	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
-----					0	0	%
-----					0	0	%
-----					0	0	%
-----					0	0	%
-----					0	0	%
-----					0	0	%
-----					0	0	%
-----					0	0	%
-----					0	0	%
-----					0	0	%

Part V**Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)
- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)
- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees
- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses
- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(1)	THE RAPIDES FOUNDATION	c	770,000
(2)	THE RAPIDES FOUNDATION	j	129,749
(3)			0
(4)			0
(5)			0
(6)			0

SCHEDULE O
(Form 990)

SUPPLEMENTAL INFORMATION TO FORM 990
Complete to provide information for responses to questions on
Form 990 or to provide an additional information.
>Attach to form 990

2009

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THE ORCHARD FOUNDATION

87-0730768

Core Form 990, Part I, Line 1 (continued)

...Rapides, Vernon and Winn. The Orchard Foundation's mission is to improve academic achievement for Central Louisiana students by promoting best practices; recruiting, retaining, and rewarding excellent and innovative teachers; building school leadership; and strengthening school and community relationships. The Orchard Foundation's activities as described are carried out for the benefit of its supported organization, The Rapides Foundation. The Orchard Foundation is a 509(a)(3) Type I supporting organization.

Code Form 990, Part III, 4a (continued). ...expertise necessary to enable them to effectively develop, coach and mentor the teaching staff at their school or district.

Approximately 130 district office and school administrators attended these monthly training sessions in 2009.

Code Form 990, Part III, 4c (continued)....Resources were aligned to the areas of middle school physical science, environmental/earth science, and life science; high school chemistry, physics and biology. During the 2010 – 2011 school year, The Orchard Foundation will continue to develop the content expertise of teachers in the areas of mathematics and science. Workshops will be held for both elementary and secondary teachers that include strategies for increasing the rigor in lessons and demonstrations of highly engaging activities. Through observation and coaching, teachers will receive feedback on the effectiveness of their lessons in science and/or mathematics.

Core Form 990, Part III, Line 4d. Other Program Services:

As part of its focus on Career and Technical Education (CTE), The Orchard Foundation facilitates two career-focused courses in area high schools.

An innovative program that prepares high school students for careers in the Forest Products Industry, the Wood Works program, is currently offered in several Central Louisiana schools. The Wood Works course of study includes training in safety, applied math, forestry, employability skills, wood industry terminology, and an introduction to the industry as a viable career option. The Wood Works program provides basic training for students to become productive employees in business and industry.

A Construction Technology Course (CTC) is a combination of hands-on and textbook instruction and utilizes text books certified and approved by the National Center for Construction Education and Research (NCCER) to instruct students. It is designed to help students gain technical and industrial knowledge and encourage them to pursue a career in construction. High school students that successfully complete the course are registered into the NCCER database for potential employment in the construction industry.

SCHEDULE O
(Form 990)

SUPPLEMENTAL INFORMATION TO FORM 990

2009

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THE ORCHARD FOUNDATION

87-0730768

Core Form 990, Part V, Line 1a:

The Orchard Foundation has no employees of its own. It leases employees from its supported organization, The Rapides Foundation. The Rapides Foundation files Forms 1096 and W-3 on behalf of employees leased to the Orchard Foundation. The Orchard Foundation records expenses associated with the leased employees as salaries and wages, pension plan contributions, other employee benefits, and payroll taxes.

Core Form 990, Part VI, Line 11A.

A final copy of the Orchard Foundation Form 990 is furnished to the Orchard Foundation Board as well as the Audit Committee of The Rapides Foundation Board (TRF), Orchard Foundation's supported organization, for review and approval, and a meeting is held to discuss the Form 990 in detail. The meeting is attended by staff that assisted in compiling the form, as well as, representatives of the external accounting firm who compiled the form. The TRF Audit Committee then provides the draft Form 990 to the TRF Board for review and approval prior to filing.

Core Form 990, Part VI, Line 12c.

The Rapides Foundation, Orchard Foundation's supported organization, has both a "Staff Code of Ethics and Conduct" and a "Trustee Code of Ethics and Conduct," both of which define and describe actions to be taken in the event of conflicts of interest. Orchard Foundation operates under Rapides Foundation policies and procedures. The "Staff Code of Ethics and Conduct" is monitored and enforced through organizational procedures, controls and daily supervision of employees by the next level of management. The "Trustee Code of Ethics and Conduct" is monitored at each board meeting, because the first agenda item is one in which board members are asked to disclose any potential conflicts with listed agenda items. A member that has a potential conflict of interest with a matter that comes before the board or committee is required to leave the room before the matter is discussed, and a majority vote of the remaining disinterested board members determine whether a conflict actually exists. If a conflict is determined to exist, then the conflicted member is not allowed to be present during board discussion and vote on the issue creating the conflict. Each year, board members and key employees are required to complete a conflict of interest questionnaire to disclose business and personal relationships that could be potential conflicts of interests.

Core Form 990, Part VI, Line 15a & 15b.

The Rapides Foundation's (Orchard's supported organization) Board Compensation Committee, which is composed of the independent members of its Executive Committee, engages a third-party compensation consultant to provide market information concerning pay and benefits and make compensation structure recommendations for all Rapides Foundation positions as well as positions for its supporting organizations. The consultant is provided with job descriptions for all

SCHEDULE O
(Form 990)

SUPPLEMENTAL INFORMATION TO FORM 990

2009

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THE ORCHARD FOUNDATION

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job positions. The consultant then compares those jobs with similar positions at similar types and sizes of organizations. The consultant meets with the Compensation Committee and provides the comparison data, along with their recommendations for pay ranges for each position (minimum, midpoint, maximum). Recommendations are based upon market averages of similar types and sizes of organizations.

The CEO and two staff directors of the Rapides Foundation are considered key employees. The CEO recommends the pay for the two staff directors and a salary budget for the remaining employees of the Rapides Foundation and its supporting organizations to the Compensation Committee for approval. The consultant meets with the Compensation Committee independently to discuss recommendations for CEO pay.

Core Form 990, Part VI, Line 19.

The Rapides Foundation, Orchard's supported organization, makes its Staff Code of Ethics and Conduct, Trustee Code of Ethics and Conduct, and Annual Report (including financial statements) available on the organization's website at www.rapidesfoundation.org. The Orchard Foundation website links to the Rapides Foundation website.

ORCHARD FOUNDATION-FA

Depreciation Expense Report

As of December 31, 2009

Book = Internal

FYE Month = December

Sys No	In Svc Date	Acquired Value	P T	Depr Meth	Est Life	Salv / 168(k) Sec 179	Depreciable Basis	Prior Thru	^{YED8} Prior Accum Depreciation	Depreciation This Run	Current YTD Depreciation	Current Accum Depreciation	Key Code
000002	08/01/04	4,086.67	P	RemVI	05 00	0.00	4,086.67	11/30/09	4,086.67	0.00	0.00	4,086.67	d
000003	08/01/04	4,086.66	P	RemVI	05 00	0.00	4,086.66	11/30/09	4,086.66	0.00	0.00	4,086.66	d
000004	08/01/04	4,086.67	P	RemVI	05 00	0.00	4,086.67	11/30/09	4,086.67	0.00	0.00	4,086.67	d
000005	08/01/04	699.00	P	RemVI	07 00	0.00	699.00	11/30/09	317.00	12.32	147.87	464.87	
000006	08/01/04	699.00	P	RemVI	07 00	0.00	699.00	11/30/09	317.00	12.32	147.87	464.87	
000007	08/01/04	801.00	P	RemVI	07 00	0.00	801.00	11/30/09	506.00	9.52	114.19	620.19	
000008	08/01/04	500.00	P	RemVI	07 00	0.00	500.00	11/30/09	316.00	5.93	71.23	387.23	
000009	08/01/04	1,198.00	P	RemVI	07 00	0.00	1,198.00	11/30/09	542.00	21.16	253.94	795.94	
000010	08/01/04	598.00	P	RemVI	07 00	0.00	598.00	11/30/09	271.00	10.55	126.58	397.58	
000011	08/01/04	374.00	P	RemVI	07 00	0.00	374.00	11/30/09	168.00	6.64	79.74	247.74	
000012	08/01/04	95.00	P	RemVI	07 00	0.00	95.00	11/30/09	60.00	1.13	13.55	73.55	
000013	08/01/04	60.00	P	RemVI	07 00	0.00	60.00	11/30/09	38.00	0.71	8.52	46.52	
000014	08/01/04	100.00	P	RemVI	05 00	0.00	100.00	11/30/09	64.00	0.00	36.00	100.00	
000015	08/01/04	100.00	P	RemVI	03 00	0.00	100.00	11/30/09	100.00	0.00	0.00	100.00	d
000016	08/01/04	50.00	P	RemVI	07 00	0.00	50.00	11/30/09	32.00	0.58	6.94	38.94	
000017	08/01/04	966.00	P	RemVI	07 00	0.00	966.00	11/30/09	439.00	17.00	204.00	643.00	
000018	08/01/04	398.00	P	RemVI	07 00	0.00	398.00	11/30/09	251.00	4.74	56.90	307.90	
000019	08/01/04	599.00	P	RemVI	07 00	0.00	599.00	11/30/09	272.00	10.55	126.58	398.58	
000020	08/01/04	538.00	P	RemVI	07 00	0.00	538.00	11/30/09	342.00	6.32	75.87	417.87	
000021	08/01/04	1,000.00	P	RemVI	07 00	0.00	1,000.00	11/30/09	634.00	11.81	141.68	775.68	
000022	08/01/04	500.00	P	RemVI	07 00	0.00	500.00	11/30/09	316.00	0.00	65.29	381.29	d
000023	08/01/04	600.00	P	RemVI	07 00	0.00	600.00	11/30/09	380.00	7.10	85.16	465.16	
000024	08/01/04	198.00	P	RemVI	07 00	0.00	198.00	11/30/09	126.00	2.32	27.87	153.87	
000025	08/01/04	45.00	P	RemVI	03 00	0.00	45.00	11/30/09	45.00	0.00	0.00	45.00	d
000026	08/01/04	100.00	P	RemVI	05 00	0.00	100.00	11/30/09	100.00	0.00	0.00	100.00	d
000027	11/01/06	1,070.00	P	RemVI	05 00	0.00	1,070.00	11/30/09	422.33	19.05	228.59	650.92	
000028	11/01/06	1,070.00	P	RemVI	05 00	0.00	1,070.00	11/30/09	422.33	19.05	228.59	650.92	
000029	11/01/06	1,070.00	P	RemVI	05 00	0.00	1,070.00	11/30/09	422.34	19.05	228.59	650.93	
000030	12/01/06	2,550.00	P	RemVI	05 00	0.00	2,550.00	11/30/09	952.00	45.66	547.89	1,499.89	
000031	11/01/08	1,931.00	P	SLMM	05 00	0.00	1,931.00	11/30/09	96.00	32.18	386.20	482.20	
000032	04/01/08	763.00	P	SLMM	05 00	0.00	763.00	11/30/09	100.00	12.72	152.60	252.60	
Grand Total		30,932.00				0.00	30,932.00		20,311.00	288.41	3,562.24	23,873.24	
Less disposals and transfers		(13,005.00)				0.00	(13,005.00)		(12,821.00)			(12,886.29)	
Count = 7													
Net Grand Total		17,927.00				0.00	17,927.00		7,490.00	288.41	3,562.24	10,986.95	
Count = 24													

ORCHARD FOUNDATION-FA

Net Book Value Report

Book = Internal

FYE Month = December

Sys No	Co Asset No	Description	In Svc Date	Depr Meth	Rem Life	Basis	(+) Salvage Value	Thru Date	(-) Current Accum Depreciation	(=) Net Book Value	Pct Dep
000002		Computer Works	08/01/04	RemVI	00 00	\$ 4,086.67	\$ 0.00	12/31/09	\$ 4,086.67	\$ 0.00	100.00%
000003		Computer Works	08/01/04	RemVI	00 00	4,086.66	0.00	12/31/09	4,086.66	0.00	100.00%
000004		Computer Works	08/01/04	RemVI	00 00	4,086.67	0.00	12/31/09	4,086.67	0.00	100.00%
000005		Desk	08/01/04	RemVI	01 07	699.00	0.00	12/31/09	464.87	234.13	66.51%
000006		Desk	08/01/04	RemVI	01 07	699.00	0.00	12/31/09	464.87	234.13	66.51%
000007		Task Chairs (3)	08/01/04	RemVI	01 07	801.00	0.00	12/31/09	620.19	180.81	77.43%
000008		Side Chairs (2)	08/01/04	RemVI	01 07	500.00	0.00	12/31/09	387.23	112.77	77.45%
000009		Credenza (2)	08/01/04	RemVI	01 07	1,198.00	0.00	12/31/09	795.94	402.06	66.44%
000010		Lateral 2-drawer F	08/01/04	RemVI	01 07	598.00	0.00	12/31/09	397.58	200.42	66.48%
000011		Legal 4-drawer Fi	08/01/04	RemVI	01 07	374.00	0.00	12/31/09	247.74	126.26	66.24%
000012		Vertical 2-drawer F	08/01/04	RemVI	01 07	95.00	0.00	12/31/09	73.55	21.45	77.42%
000013		GE Microwave	08/01/04	RemVI	01 07	60.00	0.00	12/31/09	46.52	13.48	77.53%
000014		Whirlpool Refrige	08/01/04	RemVI	00 00	100.00	0.00	12/31/09	100.00	0.00	100.00%
000015		HP 1100 Ink Jet P	08/01/04	RemVI	00 00	100.00	0.00	12/31/09	100.00	0.00	100.00%
000016		Equipment Dolly	08/01/04	RemVI	01 07	50.00	0.00	12/31/09	38.94	11.06	77.88%
000017		Desk	08/01/04	RemVI	01 07	966.00	0.00	12/31/09	643.00	323.00	66.56%
000018		Conference Tabl	08/01/04	RemVI	01 07	398.00	0.00	12/31/09	307.90	90.10	77.36%
000019		Credenza	08/01/04	RemVI	01 07	599.00	0.00	12/31/09	398.58	200.42	66.54%
000020		Task Chairs (2)	08/01/04	RemVI	01 07	538.00	0.00	12/31/09	417.87	120.13	77.67%
000021		Side Chairs (4)	08/01/04	RemVI	01 07	1,000.00	0.00	12/31/09	775.68	224.32	77.57%
000022		Rocking Chairs (08/01/04	RemVI	00 00	500.00	0.00	12/31/09	381.29	118.71	76.26%
000023		Couch	08/01/04	RemVI	01 07	600.00	0.00	12/31/09	465.16	134.84	77.53%
000024		Storage Cabinet	08/01/04	RemVI	01 07	198.00	0.00	12/31/09	153.87	44.13	77.71%
000025		Wall Clock	08/01/04	RemVI	00 00	45.00	0.00	12/31/09	45.00	0.00	100.00%
000026		HP 1100 Ink Jet P	08/01/04	RemVI	00 00	100.00	0.00	12/31/09	100.00	0.00	100.00%
000027		Computer Works	11/01/06	RemVI	01 10	1,070.00	0.00	12/31/09	650.92	419.08	60.83%
000028		Computer Works	11/01/06	RemVI	01 10	1,070.00	0.00	12/31/09	650.92	419.08	60.83%
000029		Computer Works	11/01/06	RemVI	01 10	1,070.00	0.00	12/31/09	650.93	419.07	60.83%
000030		Computer Works	12/01/06	RemVI	01 11	2,550.00	0.00	12/31/09	1,499.89	1,050.11	58.82%
000031		InFocus LCD Pro	11/01/08	SLMM	03 10	1,931.00	0.00	12/31/09	482.20	1,448.80	24.97%
000032		Brother Color MF	04/01/08	SLMM	03 03	763.00	0.00	12/31/09	252.60	510.40	33.11%

Grand Total	\$ 30,932.00	\$ 0.00	\$ 23,873.24	\$ 7,058.76	77.18%
Less disposals and transfers	(13,005.00)	0.00	(12,886.29)	(118.71)	99.09%
Count = 7					
Net Grand Total	\$ 17,927.00	\$ 0.00	\$ 10,986.95	\$ 6,940.05	61.29%
Count = 24					



Department of the Treasury
Internal Revenue Service
OGDEN UT 84201-0074

For assistance, call:
1-877-829-5500

Notice Number: CP211A
Date: June 14, 2010

Taxpayer Identification Number:
87-0730768
Tax Form: 990
Tax Period: December 31, 2009

022524.737346.0075.002 1 AT 0.357 375



ORCHARD FOUNDATION
% CARY MCGUFFEE
1101 FOURTH ST STE 101
ALEXANDRIA LA 71301-8309990

022524

received
6-17-10

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **August 15, 2010**.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

