

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



Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury

inte	mal Re	evenue Service Information about Form	i 990-PF and its separa	te instructions	12 91 MMM'1	is.gov/formssopr.	pen to rabite inspection
	_	endar year 2013 or tax year beginning		, 2013	, and endi		, 20
1	lame	of foundation				A Employer identif	
_		LUS FOUNDATION				20-419033	
ı	lumb	er and street (or P O box number if mail is not delivered	d to street address) Room/suite		e B Telephone numb	er (see instructions)	
						(61	L5) 467-7400
	104	WOODMONT BLVD.			500		
_	City or	town, state or province, country, and ZIP or foreign po-	stal code	•			
						C If exemption applic	ation is
]	NASI	WILLE, TN 37205				pending, check hen	
			Initial return	of a former r	oublic char	ity D. 4.5	
G Check all that apply. Initial return Final return			Amended re		, abii 0.1a.	D 1 Foreign organiza 2 Foreign organiza	
		Address change	Name chang			85% test, check	here and attach
	Cho	ck type of organization. X Section 501(computation •	
'n			F - 3		tion	E If private foundation	►
Ή.		ection 4947(a)(1) nonexempt charitable trust	Other taxable prunting method C				o)(1)(A), check here .
ı				asii Acc	ruai		s in a 60-month termination
			ther (specify)			under section 507(t	o)(1)(B), check here .
			column (d) must be on	i casri basis.)	1		(d) Disbursements
ř	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	expenses per books	incon		income	purposes
_		column (a) (see instructions))					(cash basis only)
1	1	Contributions, gifts, grants, etc., received (attach schedule)	167,991.				
	2	Check ► if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	801.		801.		
	4	Dividends and interest from securities					
	5 a	Gross rents					
	b	Net rental income or (loss)				DECENTE!	
ø	6a	Net gain or (loss) from sale of assets not on line 10			į.	KEULIVE	
2	þ	Gross sales price for all assets on line 6a			1		1921
Revenue	7	Capital gain net income (from Part IV, line 2)			įκ	MAY 21 2019	4 -
œ	8	Net short-term capital gain			21		10.1
i	9	Income modifications · · · · · · · · ·					marin marin \
	_	Gross sales less returns			Ţ	OCHEN,) pr)
	h	and allowances • • • • Less Cost of goods sold			·		
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
ŀ	12	Total. Add lines 1 through 11	168,792.	1	801.		
_			·				
	13	Compensation of officers, directors, trustees, etc		 			
Ses	14	Other employee salaries and wages					
ens	15	Pension plans, employee benefits	3,824.				3,824
X	10 a	Pension plans, employee benefits Legal fees (attach schedule) ATCH 1 Accounting fees (attach schedule) ATCH 2 Other professional fees (attach schedule). Interest Taxes (attach schedule) (see instructions) ATCH 3 Depreciation (attach schedule) and depletion. Occupancy Travel, conferences, and meetings	1,600.	-	160.		1,440
Θ	þ	Accounting rees (attach schedule)ATCH 2	 	 			1,440
ŧ	C	Other professional fees (attach schedule)		 			
stra	17	Interest	17				
ij	18	Taxes (attach schedule) (see instructions)ATCH . 3	17.	ļ			
Ē	19	Depreciation (attach schedule) and depletion.		 			
Ă	20	Occupancy					
and	21	Travel, conferences, and meetings		.			ļ
a	22	Printing and publications					<u> </u>
Ę	22 23 24	Other expenses (attach schedule) ATCH .4	8,764.	L	194.		8,678
Ta	24	Total operating and administrative expenses.					
ğ		Add lines 13 through 23	14,205.		354.		13,942
J	25	Contributions, gifts, grants paid	94,017.				94,017
	26	Total expenses and disbursements Add lines 24 and 25	108,222.		354.		0 107,959
_	27	Subtract line 26 from line 12				•	
		Excess of revenue over expenses and disbursements	60,570.				
		Net investment income (if negative, enter -0-)	·		447.		
		Adjusted net income (if negative enter -0-)		 	-	- -	

Р	art II	Attached schedules an Balance Sheets description column sh	id amounts in the ould be for end-of-year	Beginning of year	End o	f year
-	en CII	amounts only (See ins	structions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		29,995.	9,538.	9,538.
	2	Savings and temporary cash investments		407,340.	488,367.	488,367.
	3	Accounts receivable ▶	65.			
		Less allowance for doubtful accounts ▶		65.	65.	65.
	4	Pledges receivable				
		Less allowance for doubtful accounts ▶	L			
		Grants receivable				
	6	Receivables due from officers, directors, ti		-	·	
		disqualified persons (attach schedule) (see in	nstructions)			
	7	Other notes and loans receivable (attach scho	edule) >			
		Less allowance for doubtful accounts ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges			-:-	15
څ	10 a	Investments - U S and state government obligations	1			
		Investments - corporate stock (attach schedu				
i		Investments - corporate bonds (attach schedinvestments - land, buildings, and equipment basis	ule)			
		(attach schedule)				
	12	Investments - mortgage loans				
	13 14	Investments - other (attach schedule)				
		equipment basis Less accumulated depreciation (attach schedule)				
	15	Other assets (describe	·			
	16	Total assets (to be completed by all				
4		instructions Also, see page 1, item I)		437,400.	497,970.	497,970.
	17	Accounts payable and accrued expenses		14.000	14 000	
	18	Grants payable		14,200.	14,200.	
Liabilities	19	Deferred revenue				
Ē	20	Loans from officers, directors, trustees, and other d	· · · · ·			
Ë	21	Mortgages and other notes payable (attach s				
	22	Other liabilities (describe	· ⁾ -			
	23	Total liabilities (add lines 17 through 22)		14,200.	14,200.	
-	23		1 11	14,200.	14,200.	
Salances		Foundations that follow SFAS 117, chand complete lines 24 through 26 and	l lines 30 and 31.			
aŭ	24	Unrestricted			· -	
Bal	25	Temporarily restricted				
Б	26	Permanently restricted				
Net Assets or Fund B	07	Foundations that do not follow SFAS check here and complete lines 27 thro	ough 31.			
ets	27 28	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipm				
SS	29			423,200.	483,770.	
t A	29	Retained earnings, accumulated income, endowned	·	423,200.	483,770.	
Ñ	30 31	Total net assets or fund balances (see instru Total liabilities and net assets/fund	/ · · · · · F	423,200.	403,770.	
	31		, 1	437,400.	497,970.	
e	art II	Analysis of Changes in Net As			4377370.	
		al net assets or fund balances at beginn			nust agree with	
•		-of-year figure reported on prior year's re				423,200.
2		er amount from Part I, line 27a				60,570.
3	Oth	er increases not included in line 2 (itemi				
		I lines 1, 2, and 3				483,770.
5	Dec	creases not included in line 2 (itemize) ▶			5	
		al net assets or fund balances at end of		line 5) - Part II, column (b		483,770.
				· · · · · · · · · · · · · · · · · · ·		Form 990-PF (2013)

Part IV Capital Gains and Losses for Tax on Investment Income

_	
Page	

(a) List and 2-story b	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)				
1a			D 001120011				
b							
С							
d							
<u>e</u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu			
_a							
b							
<u>c</u>							
<u>d</u>							
<u> </u>		<u> </u>					
Complete only for assets	showing gain in column (h) and owner			Gains (Col (h) g			
(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	COI	(k), but not less t Losses (from co			
a	<u> </u>						
b					 		
C							
				_			
If gain, also enter in Par	' (not canital lace)	ructions) If (loss), enter -0- in	2				
		duced Tax on Net Investment I	ncome				
		outable amount of any year in the b Do not complete this part.	ase period	d?	Yes X No		
	ount in each column for each year	; see the instructions before making	any entri				
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution re (col (b) divided by			
2012	97,538.	268,937.			0.362680		
2011	37,751.	121,975.			0.309498		
2010	10,004.	38,405.			0.260487		
2009	18,292.	25,484.			0.717784		
2008	12,335.	26,484.			0.465753		
2 Total of line 1, column (d)	a the total on line 2 by 5, or by the	2		2.116202		
	dation has been in existence if less		3		0.423240		
4 Enter the net value of nor	ncharitable-use assets for 2013 fro	om Part X, line 5	4		455,957.		
5 Multiply line 4 by line 3			5		192,979.		
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		4.		
7 Add lines 5 and 6			7		192,983.		
8 Enter qualifying distribution If line 8 is equal to or grapher VI instructions	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						

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	5)
1 a	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)			
	Domestic_foundations that meet the section 4940(e) requirements in Part V, check		_	9.
	here ▶ ☐ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			9.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		_	9.
6	Credits/Payments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			0
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			
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities		_	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c		X
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?	2	_	<u> </u>
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	_	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_5_		<u> </u>
	If "Yes," attach the statement required by General Instruction T	1 1		
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		x	
_	with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b_	X	
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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses	10		<u> </u>
_	-	Form 99	0-PF	(2013)

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 2013?

Form 990-PF (2013)

4a

20-4190331	Page 6

Pai	1 VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	ired (continued)			
5a	During the year did the foundation pay or incur any amount	nt to.					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No						
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,						
directly or indirectly, any voter registration drive?							
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than a charitable, etc., organization described in							
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	ee instructions)		X Yes No	,		
	(5) Provide for any purpose other than religious, ch	aritable, scientific, l	iterary, or educationa				
	purposes, or for the prevention of cruelty to children o	r anımals?		Yes X No	,		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				1		
	Regulations section 53 4945 or in a current notice regard				. 5b	x	
	Organizations relying on a current notice regarding disast						
С	If the answer is "Yes" to question 5a(4), does the f				_		
	because it maintained expenditure responsibility for the gr	ant? ATCH 5		X Yes No	,		
	If "Yes," attach the statement required by Regulations sect						
6a	Did the foundation, during the year, receive any fund	, ,	ctly, to pay premium	S			
	on a personal benefit contract?	•			,		
ь	Did the foundation, during the year, pay premiums, direct				6b	x	
	If "Yes" to 6b, file Form 8870	,,			'		
7 a	At any time during the tax year, was the foundation a pai	rty to a prohibited tax	shelter transaction?	Yes X No	,		
	If "Yes," did the foundation receive any proceeds or have						
	t VIII Information About Officers, Directors					<u> </u>	
-	and Contractors List all officers, directors, trustees, foundation n	nanagore and their	componention (coo	instructions)			
		(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evnens	se account,	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	lowances	
					_		
ATO	CH 6		0	d		0	
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line	e 1 - see instructi	ons). If n	one, enter	
(8	n) 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		se account, lowances	
	NONE						
			-				
	- <u>-</u>						
Total	al number of other ampleyees and over \$50,000	<u> </u>	-				
<u>ı ota</u>	al number of other employees paid over \$50,000 .	<u> </u>		<u> </u>	Form 99	0-PF (2013)	

Form 990-PF (2013) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 . . **Summary of Direct Charitable Activities** Part IX-A List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 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 NONE All other program-related investments. See instructions 3 NONE Total. Add lines 1 through 3 . .

Form 990-PF (2013)

Page 8

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn found	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	462,901.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and	1d	462,901.
•	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see	3	462,901.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4	6,944.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	455,957.
_ 6	Minimum investment return. Enter 5% of line 5	6	22,798.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	22,798.
2 a	Tax on investment income for 2013 from Part VI, line 5 2a 9.		
b	Income tax for 2013. (This does not include the tax from Part VI.) 2b		
	Add lines 2a and 2b	2c	9.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,789.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	22,789.
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	22,789.
Par	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	107,959.
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:		
а	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	107,959.
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	107,959.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating	g whether the foundation

Form 990-PF (2013)

E PLUS FOUNDATION

	1 1105 10	51121111011		20	1170001
F	000 05 (2012)				Dana Q
	990-PF (2013) rt XIII Undistributed Income (see instru	ctions)		 –	Page 9
ra	Ondistributed income (see institu		(L)	(-)	(4)
_	5	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1	Distributable amount for 2013 from Part XI,		- Today prior to 2012	-	
_	line 7				22,789.
	Undistributed income, if any, as of the end of 2013				
	Enter amount for 2012 only				
	Total for pnor years 20 11 ,20 10 ,20 09				
3	Excess distributions carryover, if any, to 2013				
	From 2008				
b					
C	I				
a					
	110.11 2012	151,893.			
	Total of lines 3a through e	131,055.	· · · · · · · · · · · · · · · · · · ·	····	
4	Qualifying distributions for 2013 from Part XII, line 4 > \$ 107,959.				
	Applied to 2012, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2013 distributable amount				22,789.
е	Remaining amount distributed out of corpus	85,170.			
5	Excess distributions carryover applied to 2013			••	
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6					
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	237,063.			
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	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				
е	Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see			_	
	instructions				
f	Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be				
_	distributed in 2014				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not				
•	applied on line 5 or line 7 (see instructions)	11,011.			
9	Excess distributions carryover to 2014.	206 252			
	Subtract lines 7 and 8 from line 6a	226,052.			
10	1	!			
a	Excess from 2009 17,018.				
b	Excess from 2010 8,090.				
C	Excess from 2011				
d	Excess from 2012 84,108. Excess from 2013 85,170.				
_ e	Excess from 2013 85,170.	<u> </u>	L		Form 990-PF(2013)

Form **990-PF**(2013)

Pa	rt XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questi	on 9)	NOT APPLICABLE	
1 a	If the foundation has i	_			- 1		
	foundation, and the ruling is effective for 2013, enter the date of the ruling						
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 494						(3) or 4942(j)(5)	
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total	
	justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(5) 1041	
	I or the minimum investment return from Part X for each						
	year listed						
b	85% of line 2a						
C	Qualifying distributions from Part						
	XII, line 4 for each year listed						
d	Amounts included in line 2c not used directly for active conduct of exempt activities						
0	Qualifying distributions made						
	directly for active conduct of exempt activities. Subtract line						
	2d from line 2c						
3	Complete 3a, b, or c for the						
а	"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 invest-						
	ment return shown in Part X, line 6 for each year listed						
С	"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						
Pa		ntary Information (only if the found	lation had \$5,000	or more in assets	
	at any time	e during the year - s	ee instructions.)				
1	Information Regardin	•					
а	List any managers of before the close of any					ed by the foundation	
	N/A						
b	List any managers of					, large portion of the	
	ownership of a partner	iship or other entity) o	which the foundation	inas a 10% of greater	miterest.		
	** / *						
2	N/A Information Regardin	a Contribution Grant	Giff Loan Scholarch	in ata Programs:		-	
2							
	Check here ► X if t unsolicited requests f	the foundation only	makes contributions	to preselected char	itable organizations a	and does not accept	
	other conditions, com			ints, etc. (see instruc	tions) to individuals of	ir organizations under	
_	The name, address, a	·		he person to whom an	anlications should be ad	dressed	
b	The form in which app	olications should be su	bmitted and information	on and materials they	should include:		
	: Any submission deadl	ines					
C	. Any audinisaidh deadl	103 .					
	Any restrictions or li	imitations on awards	, such as by geogra	aphical areas, charita	ible fields, kinds of i	nstitutions, or other	
	factors:						

	990-PF (2013)				Page 11
Par	XV Supplementary Information (c	continued)			
3	Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture 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)	or substantial contributor	recipient	COMMISSION	
a	Paid during the year			1	
ÀТ	CH 7				
	,				
				,_,,	
	Total	 	<u></u>		94,017.
D	Approved for future payment				•
				:	
			<u> </u>		
	Total		<u> </u>	<u></u> ≥ 3b	

Part XVI-A Analysis of Income-Produ	icing Acti	vities			
Enter gross amounts unless otherwise indicated	Unrel	ated business income	Excluded by	y section 512, 513, or 514	(e)
-	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1 Program service revenue					(See instructions)
a b		-	+		
	_		_		
			-		
			 		- ·
6		_	 		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	801.	-
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	1				
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	l .				
11 Other revenue a		<u></u>			
b					
c				-	· · · · · · · · · · · · · · · · · · ·
d					<u></u> .
е					
12 Subtotal Add columns (b), (d), and (e)				801.	
13 Total. Add line 12, columns (b), (d), and (e)				13	801.
(See worksheet in line 13 instructions to verify calc		11.1			
Part XVI-B Relationship of Activities	s to the Ad	complishment of Ex	empt Purp	oses	
Explain below how each active accomplishment of the foundate					
					-
					
	-				
			_		
					
					

3) E PLUS FOUNDATION 20-4190331 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1 Did the organization directly or indirectly engage in any of the following with any other organization									Yes	No
				section 501(c)(3) organization						
	organiz	ations?	•	, ,, ,	·					ļ
а	_		o foundation to	a noncharitable exempt orga	nization (of:				ļ
_			_					1a(1)		х
								1a(2)		х
h		ransactions:						18(2)		
b								4.44		х
	(1) Sai	es of assets to a nor	icharitable exe	mpt organization				1b(1)		-
				able exempt organization				1b(2)		X
				assets				1b(3)		<u>X</u>
								1b(4)		X
	(5) Loa	ans or loan guarantee	s					1b(5)		X
	(6) Per	formance of services	s or memberst	hip or fundraising solicitations				1b(6)		X
С	Sharing	g of facilities, equipm	ent, mailing lis	sts, other assets, or paid emplo	yees			1c		Х
d	If the	answer to any of the	e above is "Ye	es," complete the following s	chedule	. Column (b) s	should always show	w the	fair m	arket
				ices given by the reporting for						
		_		gement, show in column (d)						
(a) L	ine no	(b) Amount involved		noncharitable exempt organization	1		ers, transactions, and sha			
ν-, -		(-)	(-)		N/A					
			-		+,	•				
					+					
			··		+					
					_					
					-		_			
					ļ. <u>-</u>					
							.,			
					ļ					
			-							
	-				<u> </u>					
	1- 41-	£		ffile and south an extend to a		4	A			
2a				ffiliated with, or related to, or				\Box	es X	٦.,.
		· ,	•	other than section 501(c)(3)) o	r in sect	ion 52/?		Y6	es <u> </u>	ŊNO
b	If "Yes	," complete the follow	-	1		1				
		(a) Name of organization	n	(b) Type of organization		-	(c) Description of relation	ship		
						ļ <u></u>	·			
	Under	penalties of penjury, I decla	are that I have exam	nined this return, including accompanying taxpayer) is based on all information of which	schedules a	and statements, and	to the best of my knowled	ige and b	oelief, it	is true,
ei		ct, and complete Declaration of	r preparer (other than	taxpayer) is based on all information of which	i preparer na	as any knowledge				
Sig		Melini 1	unote	~ S/14/14	7	26 SUM	May the IR with the p	& discus reparer		retum below
Her	'e '	nature of officer or trustee		Date	Title	<u> </u>	(see instructio	·	Yes	No
							(000 11100 0000		J . 66 C	
		Print/Type preparer's na	me		.2014	05.08etl=1:32:	23 Check If	PTIN		
Paid	d			Rachel Sperlock	-04'00		self-employed		2077	0.0
	parer	RACHEL SPUR			-04-01	<u> </u>		P005		·
			OWE HORWAT				Firm's EIN ▶ 35-0	3216	8 U	
USE	Only	1		TAL PLACE, STE 200		5005				
		<u>BR</u>	ENTWOOD,	TN	3	7027	Phone no 615-3			
							F	orm 99 (0-PF	(2013)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service Schedule of Contributors

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

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization		Employer identification number				
E PLUS FOUNDATION						
		20-4190331				
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundate	tion				
	501(c)(3) taxable private foundation					
General Rule	8), or (10) organization can check boxes for both the General Rule and a S					
	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or contributor. Complete Parts I and II.	or more (in money or				
Special Rules						
under sections 509(a)) organization filing Form 990 or 990-EZ that met the 33 1/3 % support t (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 00 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form .	e year, a contribution of				
during the year, total of), (8), or (10) organization filing Form 990 or 990-EZ that received from a contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitales, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary,				
during the year, contri not total to more than year for an exclusively applies to this organiz	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 total 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					
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Spanswer "No" on Part IV, line 2, of its Form 990, or check the box on line Fertify that it does not meet the filing requirements of Schedule B (Form 99	I of its Form 990-EZ or on its				

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization E PLUS FOUNDATION

Employer Identification number

			20-4190331
Part I	Contributors (see instructions). Use duplicate copies of Par	rt I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	E+ HEALTHCARE, LLC 104 WOODMONT BOULEVARD, #500 NASHVILLE, TN 37205-2245	\$6,560.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	MORGAN CITY HIGH SCHOOL GILR'S VOLLEYBAL 2400 TIGER DRIVE MORGAN CITY, LA 70380	\$18,510.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_	RUTH H. ROBINSON TRUST 3021 6TH AVENUE NORTH STE 205 BILLINGS, MT 59101	\$52,600.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
- -	BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH STREET, 8TH FLOOR NEW YORK, NY 10022	\$ <u>8,464</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5 _	UNITED WAY FOR SOUTH LOUISIANA 7910 MAIN STREET, SUITE 460 HOUMA, LA 70360	\$9,642.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization E PLUS FOUNDATION

Employer identification number

20-4190331

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II it additional space is need	ded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
	<u> </u>		

Name of organization E PLUS FOUNDATION

Employer identification number

20-4190331

Part III	Exclusively religious, charitable, etc. that total more than \$1,000 for the y	, individual contribu ear. Complete colur	tions to section (601(c)(7), (8), or (10) organizations e) and the following line entry.					
	For organizations completing Part III, contributions of \$1,000 or less for the	e year. (Enter this inf	ormation once. Se	charitable, etc., ee instructions.) ► \$					
	Use duplicate copies of Part III if addit	ional space is neede	d						
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held					
				·					
		(e) Transfe	r of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held					
									
	(e) Transfer of gift								
	Transferee's name, address, a	nship of transferor to transferee							
				-					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
		(e) Transfe	er of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transfer						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						

ATTACHMENT 1 PAGE 18

II
FEES
LEGAL
H
PART
990PF,
FORM

CHARITABLE <u>PURPOSES</u>	3,824.	3,824.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	3,824.	3,824.
		TOTALS
DESCRIPTION	LEGAL FEES	

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE <u>PURPOSES</u>	1,440.	1,440.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	160.	160.
REVENUE AND EXPENSES PER BOOKS	1,600.	1,600.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 2 PAGE 19

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

EXPENSES
PER BOOKS

FEDERAL TAX PAID

17.

TOTALS

17.

PART

FORM 990PE,

- OTHER EXPENSES

	CHARITABLE	PURPOSES	4,538.	1,745.	474.	973.	108.	67.	773.	8,678.	
NET	INVESTMENT	INCOME					108.		86.	194.	
KEVOE AND AND	EXPENSES	PER BOOKS	4,538.	1,745.	474.	973.	108.	. 49	859.	8,764.	
										TOTALS	
		DESCRIPTION	EVENT EXPENSES	FILING FEES	KOMEN MISCELLANEOUS EXPENSE	MISCELLANEOUS EXPENSE	BANK FEE	CHECKS	INSURANCE		

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME:

CROSSFIT SURGE

GRANTEE'S ADDRESS:

10621 IRMA DRIVE UNIT C

CITY, STATE & ZIP:

NORTHGLENN, CO 80234

GRANT DATE:

10/03/2013

GRANT AMOUNT:

GRANT PURPOSE:

TO SUPPORT MAMMOGRAMS IN ACTION

AMOUNT EXPENDED:

300.

ANY DIVERSION?

NO

DATES OF REPORTS: VERIFICATION DATE: 10/03/2013 10/03/2013

RESULTS OF VERIFICATION:

TO THE KNOWLEDGE OF THE GRANTOR, THE GRANTEE HAS NOT DIVERTED ANY

PORTION OF THE FUNDS FROM THE PURPOSE OF THE GRANT.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0	0
COMPENSATION	0	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 5.00	TREASURER 5.00	VICE PRESIDENT/SECRETARY 5.00	SECRETARY 5.00	GRAND TOTALS
NAME AND ADDRESS	JERRY EYLER 104 WOODMONT BLVD. 500 NASHVILLE, TN 37205	YANIRA SHELTON 104 WOODMONT BLVD. 500 NASHVILLE, TN 37205	MELISSA CURETON 104 WOODMONT BLVD. 500 NASHVILLE, TN 37205	HEIDI MILLS-PARTIAL YEAR 104 WOODMONT BLVD. 500 NASHVILLE, TN 37205	

20-4190331

ATTACHMENT 7

V 13-4 6F

ATTACHMENT 7 (CONT.D)

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

NONE PC	FOUNDATION STATUS OF RECIPIENT	TRANSPORTATION, LODGING, FOOD, CANCER SCREENINGS, COURT COSTS, MEDICAL SUPPLIES, UTILITIES, MEDICAL CARE, AND OTHER FINANCIAL ASSISTANCE TO CANCER PATIENTS DUE TO FINANCIAL HARDSHIPS. ASSISTANCE IS MINOR IN AMOUNT PER PATIENT, SO IT IS IMPRACTICAL TO LIST ALL AID RECIPIENTS. SUPPORT GENERAL CHARITABLE OPERATIONS TO SUPPORT GENERAL CHARITABLE OPERATIONS	27,666 8,158 1,000
	NONE P.C	TO SUPPORT GENERAL CHARITABLE OPERATIONS	1,427.
AMERICAN YOUTH SOCCER ORG. 19750 S VERMONT AVENUE, SUITE 200 TORRENCE, CA 90502	NONE PC	PROGRAM SUPPORT	193.

TOTAL CONTRIBUTIONS PAID

94,017

۲

PAGE 25 ATTACHMENT 7

V 13-4 6F