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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

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1

Briefly describe the organization's mission

THE MISSION OF THE RAPIDES FOUNDATION (TRF) IS TO IMPROVE THE HEALTH STATUS OF CENTRAL LOUISIANA TRF IS A MEMBER OF RAPIDES HEALTHCARE SYSTEM LLC, WHICH OWNS AND OPERATES RAPIDES REGIONAL MEDICAL CENTER, A 325-BED HOSPITAL IN ALEXANDRIA, LA ADDITIONALLY, TRF PROVIDES FUNDING FOR PROJECTS WHICH EFFECTIVELY ADDRESS THE FOLLOWING PHILANTHROPIC OBJECTIVES HEALTHY PEOPLE TO PROMOTE HEALTHY BEHAVIORS AND IMPROVE ACCESS TO HEALTHCARE EDUCATION TO INCREASE THE LEVEL OF EDUCATIONAL ATTAINMENT AND ACHIEVEMENT AS THE PRIMARY PATH TO IMPROVED ECONOMIC, SOCIAL AND HEALTH STATUS HEALTHY COMMUNITIES TO IMPROVE ECONOMIC OPPORTUNITY AND FAMILY INCOME, AND ENHANCED CIVIC AND COMMUNITY OPPORTUNITIES FOR MORE EFFECTIVE LEADERS AND ORGANIZATIONS

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 \$ including grants of \$) (Revenue \$ 3,480,129)
ACUTE-CARE HOSPITAL SERVICES THE RAPIDES FOUNDATION IS A MEMBER OF RAPIDES HEALTHCARE SYSTEM LLC (RHS), WHICH OWNS AND OPERATES RAPIDES REGIONAL MEDICAL CENTER (RRMC), A 325-BED HOSPITAL IN ALEXANDRIA, LA AS AN OWNER OF RHS, TRF SEEKS TO PROVIDE THE HIGHEST STANDARD OF PATIENT CARE THAT IS SAFE, EFFECTIVE, EFFICIENT, TIMELY, PATIENT-CENTERED AND EQUITABLE DURING THE TWELVE MONTHS ENDED DECEMBER 31, 2013, RRMC'S CORE MEASURES RANKED IN THE TOP 10% NATIONALLY, AND ITS RISK-ADJUSTED COMPLICATIONS INDEX OF 0.83 AND MORTALITY INDEX OF 0.90 WERE BELOW EXPECTED MEASURES OF 1.0, DEMONSTRATING QUALITY PROCESSES AND TOP-LEVEL PATIENT CARE OUTCOMES FOR THE THIRD YEAR, U.S. NEWS AND WORLD REPORTS' 2012-2013 RANKINGS OF BEST HOSPITALS RECOGNIZED RAPIDES REGIONAL AS NO. 3 IN LOUISIANA CARECHEX, A DIVISION OF COMPARION MEDICAL ANALYTICS, RANKED RRMC SECOND IN LOUISIANA IN TRAUMA CARE AND HIP FRACTURE REPAIR, AND THIRD IN MAJOR CARDIAC SURGERY AND CORONARY BYPASS SURGERY ADDITIONALLY, FOR THE THIRD YEAR, THE HOSPITAL WAS NAMED A TOP PERFORMER ON KEY QUALITY MEASURES FOR EXCELLENCE IN ACCOUNTABILITY MEASURE PERFORMANCE BY THE JOINT COMMISSION, RAPIDES IS ONE OF JUST 182 HOSPITALS NATIONWIDE TO HAVE BEEN NAMED A TOP PERFORMER EVERY YEAR SINCE THE PROGRAM BEGAN FOR THE SECOND YEAR, RAPIDES REGIONAL WAS RECOGNIZED IN MODERN HEALTHCARE MAGAZINE AS RECEIVING THE 2013/2014 CONSUMER CHOICE AWARD IN ITS MARKET BASED ON NATIONAL RESEARCH CORPORATION CONSUMER SURVEYS ON QUALITY HEALTHCARE SERVICES THE HOSPITAL RECEIVED THE 2013 HEALTHGRADES PATIENT SAFETY EXCELLENCE AWARD, WHICH RECOGNIZES HOSPITALS THAT ARE IN THE TOP 10% IN THE NATION FOR PATIENT SAFETY RAPIDES REGIONAL MEDICAL CENTER IS CERTIFIED AS LOUISIANA'S ONLY LEVEL II TRAUMA CENTER, WHICH BENEFITS CENTRAL LOUISIANA BY PROVIDING ACCESS TO TRAUMA CARE DURING THE CRITICAL FIRST 60 MINUTES FOLLOWING A TRAUMATIC INJURY, THEREBY REDUCING MORTALITY RATES FROM SUCH INJURIES IN THE REGION THE FACILITY IS ALSO CERTIFIED AS AN ADVANCED PRIMARY STROKE CENTER AND AN ACCREDITED CYCLE IV CHEST PAIN CENTER THE ONLY ONE IN CENTRAL LOUISIANA RAPIDES WAS RECOGNIZED BY THE AMERICAN HEART ASSOCIATION AND THE AMERICAN STROKE ASSOCIATION WITH THE 2013 "SILVER PLUS GET WITH THE GUIDELINES" AWARD FOR ADHERENCE TO STROKE PERFORMANCE ACHIEVEMENT INDICATORS TRF ALSO SEEKS TO ASSERT, DEVELOP AND SUPPORT ACCESS TO NON-URGENT CARE FOR THE UNINSURED AND UNDERSERVED POPULATIONS IN 2013 TRF CHARITY CARE AND OTHER COMMUNITY BENEFITS TOTALED \$13.67 MILLION, AS INCLUDED ON SCHEDULE H, PART I, LINE 7K ATTACHED HERETO THIS INCLUDED \$3 MILLION OF UNREIMBURSED PATIENT CARE COSTS AND \$10.64 MILLION IN HEALTH PROFESSIONS EDUCATION, COMMUNITY EDUCATION, COMMUNITY PROGRAMS AND COMMUNITY DONATIONS IN 2012 THE LOUISIANA GOVERNOR ANNOUNCED THAT THE STATE'S SYSTEM OF CHARITY HOSPITALS WOULD BE PRIVATIZED IN LATE 2012, REPRESENTATIVES OF RAPIDES HEALTHCARE SYSTEM, THE RAPIDES FOUNDATION AND THE OTHER LARGE COMMUNITY HOSPITAL IN THE REGION BEGAN DISCUSSIONS WITH STATE LEADERS ABOUT A REPLACEMENT HEALTHCARE SOLUTION FOR INDIGENT PATIENTS BEING CARED FOR BY THE CHARITY HOSPITAL IN THE RAPIDES FOUNDATION'S REGION AN AGREEMENT BETWEEN THE TWO HOSPITALS WAS REACHED IN LATE 2013, WHICH RESULTED IN PLANS TO CLOSE THE CHARITY HOSPITAL AND MOVE SERVICES TO THE TWO EXISTING HOSPITALS ACCORDINGLY, THE TWO HOSPITALS AGREED TO PROVIDE EMERGENCY AND INPATIENT SERVICES AS WELL AS ESTABLISH NEW URGENT, PRIMARY AND SPECIALTY CARE CLINICS IN THE COMMUNITY FOR INDIGENT PATIENTS RAPIDES' FIRST CLINIC, AN URGENT CARE CLINIC, OPENED IN DECEMBER 2013, AND THE REMAINING CLINICS OPENED DURING THE FIRST HALF OF 2014 THE CHARITY HOSPITAL CLOSED IN MID-2014, WITH STATE LEGISLATIVE APPROVAL	

4b	(Code) (Expenses \$ 4,960,450 including grants of \$ 2,853,223) (Revenue \$)
HEALTHY PEOPLE INITIATIVE TRF PROVIDED CHRONIC CARE PRESCRIPTION MEDICATIONS FOR PEOPLE WHO CANNOT AFFORD THEM THROUGH \$600,000 IN GRANTS TO ITS SUPPORTING ORGANIZATION, CENLA MEDICATION ACCESS PROGRAM (CMAP) CMAP'S GOAL IS TO ENSURE APPROPRIATE MEDICATION ACCESS AND EDUCATION AND ALSO PROMOTE OTHER PREVENTIVE HEALTH PRACTICES AMONG RESIDENTS WITH LIMITED INCOMES IN 2013, APPROXIMATELY 1,828 PEOPLE IN CENTRAL LOUISIANA RECEIVED \$3.2 MILLION IN PRESCRIPTION MEDICATIONS THEY NEEDED TO MAINTAIN THEIR HEALTH THROUGH CMAP'S PATIENT ASSISTANCE PROGRAM ANOTHER 5,800 PEOPLE THROUGHOUT THE REST OF THE STATE RECEIVED \$7.9 MILLION WORTH OF MEDICATIONS THROUGH CMAP'S CENTRAL FILL PHARMACY, WHICH HAD CONTRACTS TO PROVIDE PHARMACEUTICALS FROM NINE MAJOR COMPANIES CMAP BEGAN PROVIDING NO- OR LOW-COST MEDICATIONS TO PATIENTS AT THE NEW RAPIDES REGIONAL MEDICAL CENTER INDIGENT CLINICS IN DECEMBER 2013 TRF PROVIDED \$175,000 IN FUNDING TO CMAP'S CANCER SCREENING PROJECT, WHICH PROVIDED FREE MAMMOGRAMS, PAP SMEARS, PELVIC EXAMS AND COLORECTAL CANCER TESTS TO UNINSURED PATIENTS WHO COULDN'T AFFORD THESE CRITICAL SCREENINGS ITS CANCER SCREENING VAN, THROUGH A PARTNERSHIP WITH LOUISIANA STATE UNIVERSITY, BROUGHT THESE TESTS TO RURAL AREAS IN 2013, 486 PATIENTS WERE SEEN, 164 PAP SMEARS DONE, 190 PELVIC EXAMS COMPLETED, 469 MAMMOGRAMS DONE, 217 CLINICAL BREAST EXAMS COMPLETED, AND 200 TAKE HOME COLORECTAL CANCER TESTS DISTRIBUTED OVER \$675,000 IN GRANTS WERE AWARDED TO NORTHWESTERN STATE UNIVERSITY, LOUISIANA STATE UNIVERSITY AT ALEXANDRIA AND CENTRAL LOUISIANA COMMUNITY AND TECHNICAL COLLEGE TO SUPPORT THEIR NURSING EDUCATION PROGRAMS OVER THE NEXT TWO YEARS AND BUILD HEALTHCARE ACCESS IN THE CENTRAL LOUISIANA REGION ALSO IN 2012, TRF AWARDED A FOUR-YEAR GRANT TOTALING \$700,000 TO NORTHWESTERN STATE UNIVERSITY TO SUPPORT THE TRAINING OF A TOTAL OF 24 NURSE PRACTITIONERS IN 2013 TRF BECAME THE FISCAL AGENT FOR THE LOUISIANA ACTION COALITION FOR THE FUTURE OF NURSING AND PROVIDED A TWO-YEAR, \$150,000 MATCHING GRANT TO THE ORGANIZATION THE COALITION RECEIVED A \$150,000 GRANT FROM THE ROBERT WOOD JOHNSON FOUNDATION TO LEAD CHANGE IN HEALTHCARE, WORKING ALONGSIDE PHYSICIANS, HEALTHCARE PROVIDERS AND OTHER STAKEHOLDERS TO HELP TRANSFORM THE HEALTHCARE DELIVERY SYSTEM IN LOUISIANA IN 2013 TRF CONTINUED ITS \$180,000 CONTRACT WITH THE AMERICAN CANCER SOCIETY TO IMPLEMENT AND MANAGE A COMMUNITY HEALTH ADVISOR NETWORK TO HELP EDUCATE INDIVIDUALS IN THE BENEFITS OF SCREENING AS WELL AS ASSIST IN ACCESS TO SCREENING FOR BREAST, CERVICAL, AND COLORECTAL CANCERS IN 2012 TRF AWARDED A TWO-YEAR \$400,000 GRANT TO THE LOUISIANA PRIMARY CARE ASSOCIATION TO ENHANCE AN INTEGRATED BEHAVIORAL HEALTH PROGRAM AT THREE FEDERALLY QUALIFIED HEALTH CENTERS IN THE FOUNDATION'S SERVICE AREA THROUGH THIS PROGRAM, A PRIMARY CARE PROVIDER, BEHAVIORAL HEALTH SPECIALIST, PATIENT NAVIGATOR AND PSYCHIATRIST WORK TOGETHER TO ADDRESS PATIENTS' MENTAL HEALTH ISSUES TRF AWARDED APPROXIMATELY \$137,000 IN GRANTS DURING 2013 TO 6 COMMUNITIES AND ORGANIZATIONS AS PART OF ITS DIET AND PHYSICAL ACTIVITY INITIATIVE THESE FUNDS WERE USED TO INCREASE HEALTHY EATING AND PHYSICAL ACTIVITY OPPORTUNITIES FOR ADULTS AND YOUTH THROUGH IMPLEMENTATION OF WALKING TRAILS, PLAYGROUNDS, FARMERS MARKETS, COMMUNITY GARDENS AND OTHER PROJECTS ADDITIONALLY, 8 SCHOOL DISTRICTS WERE GRANTED \$216,000 IN FUNDS TO IMPROVE HEALTHY EATING AND PHYSICAL ACTIVITY OPPORTUNITIES THROUGH INNOVATIVE SCHOOL HEALTH MODEL PROGRAMS SUCH AS CATCH, SPARK AND SMART IN GRADES K-8 A TRF FACILITATED YOUTH SUMMIT ON HEALTHY LIFESTYLES AND TOBACCO PREVENTION WAS ATTENDED BY 350 YOUTH AND COORDINATORS TRF FUNDED A TWO-YEAR, \$700,000 GRANT IN 2013 TO ITS HEALTHY LIFESTYLES PROGRAM ONE ASPECT PROVIDES ONE-ON-ONE COUNSELING TO INDIVIDUALS WHO ARE REFERRED BY THEIR DOCTORS IN 2013, 331 PEOPLE RECEIVED COACHING FROM A REGISTERED DIETITIAN AND EXERCISE SPECIALIST IN 2013 TRF IMPLEMENTED DASH FOR A HEALTHY LIFESTYLE AT 32 CHURCHES IN THE REGION INVOLVING 377 PARTICIPANTS THE 18-MONTH NUTRITION AND EXERCISE PLAN IS A PROVEN, EVIDENCE-BASED PROGRAM STUDIED AT PENNINGTON BIOMEDICAL RESEARCH CENTER IN BATON ROUGE, LA THE FOUNDATION PROVIDED A \$250,000, THREE-YEAR MATCHING GRANT IN 2012 TO THE CENTRAL LOUISIANA ECONOMIC DEVELOPMENT ALLIANCE TO CREATE THE CENTRAL LOUISIANA LOCAL FOODS INITIATIVE THE PROJECT CREATES A SUSTAINABLE AGRICULTURAL ECONOMY IN THE REGION AND ENCOURAGES LOCAL FARMERS TO PROVIDE LOCALLY GROWN FOOD FOR THE COMMUNITY AT HOLIDAY TIME, THE FOUNDATION PRODUCED A MEDIA CAMPAIGN, "MAKE A HEALTHY HOLIDAY HABIT," AIMED AT REMINDING THE COMMUNITY TO CONTINUE HEALTHY HABITS DURING THE HOLIDAYS IN 2013, AS PART OF TRF'S TOBACCO PREVENTION AND CONTROL INITIATIVE, TRF RAN HARD-HITTING CAMPAIGNS ON TV, RADIO, BILLBOARD AND FACEBOOK TARGETING SECONDHAND SMOKE, YOUTH AND YOUNG ADULT USE AND THE HEALTH CONSEQUENCES OF TOBACCO USE TRF'S CESSATION INTERVENTION PROGRAM FEATURES ELEMENTS OF PROVIDER EDUCATION, PROVIDER REMINDER/REFERRAL TOOLS, AND PATIENT EDUCATION APPROXIMATELY 285 PARTICIPATING PHYSICIANS AND OTHER HEALTHCARE PROVIDERS ARE ENCOURAGED TO REFER PATIENTS DIRECTLY TO THE STATE'S QUITLINE THROUGH USE OF INFORMATIONAL CARDS AND OTHER COLLATERALS DISPLAYING THE QUITLINE NUMBER IN 2013, 487 CALLS TO THE QUITLINE WERE MADE BY INDIVIDUALS IN THE RAPIDES FOUNDATION SERVICE AREA COMMUNITY AND SCHOOL GRANTS TOTALING OVER \$223,500 SUPPORTED PROGRAMS SUCH AS "TARS WARS" AND "KICK BUTTS DAY" EVENTS IN THE SCHOOLS, WORKPLACE OUTREACH AND "GREAT AMERICAN SMOKEOUT" ACTIVITIES AT THE BEGINNING OF ITS INITIATIVES, THE RAPIDES FOUNDATION SET LONG-TERM IMPACT GOALS IN 2013 TRF COMPLETED A PRIMARY DATA ASSESSMENT TO DETERMINE ITS PROGRESS TOWARD ITS LONG-TERM GOALS SELECTED GOALS FOR THE HEALTHY PEOPLE INITIATIVE ARE - DECREASE CURRENT SMOKING AMONG YOUTH FROM 24.6% IN 2007 TO 17.1% IN 2013, YOUTH SMOKING HAD DROPPED TO 23% - DECREASE CURRENT SMOKING IN ADULTS FROM 24.9% IN 2005 TO 20% IN 2013 ADULT SMOKING HAD DROPPED TO 23% - DECREASE THE PERCENTAGE OF OVERWEIGHT ADULTS FROM 68% IN 2005 TO 67% BY 2013 73% OF ADULTS WERE OVERWEIGHT - DECREASE THE PERCENTAGE OF ADOLESCENTS WHO ARE OVERWEIGHT FROM 31% IN 2007 TO 27.7% BY 2013 35% OF ADOLESCENTS WERE OVERWEIGHT - INCREASE PERCENTAGE OF ADULTS PARTICIPATING IN MODERATE PHYSICAL ACTIVITY FOR AT LEAST 30 MINUTES PER DAY 5 DAYS PER WEEK FROM 24% IN 2005 TO 35% IN 2013 27% OF ADULTS REPORTED SUCH EXERCISE - INCREASE THE PERCENTAGE OF ADOLESCENTS ENGAGING IN MODERATE PHYSICAL ACTIVITY FOR 30 MINUTES 5 DAYS PER WEEK FROM 20% IN 2007 TO 30% IN 2013 27% OF ADOLESCENTS REPORTED SUCH EXERCISE - INCREASE THE PERCENTAGE OF ADULTS WHO EAT 5 SERVINGS OF FRUITS AND VEGETABLES PER DAY FROM 32% IN 2005 TO 43.5% BY 2013 35% WERE EATING 5 SERVINGS PER DAY - INCREASE THE PERCENTAGE OF ADOLESCENTS WHO EAT 5 SERVINGS OF FRUITS AND VEGETABLES PER DAY FROM 14% IN 2007 TO 17.5% IN 2013 16% OF ADOLESCENTS WERE EATING 5 SERVINGS PER DAY - INCREASE THE PERCENTAGE OF ADULTS WITH A SPECIFIC SOURCE OF ONGOING PRIMARY CARE FROM 72% IN 2005 TO 85% IN 2013 74% OF ADULTS REPORTED A SOURCE OF ONGOING CARE	

4c	(Code) (Expenses \$ 2,368,595 including grants of \$ 1,752,554) (Revenue \$)
EDUCATION INITIATIVE -- DURING 2013 THE NINE PARISH SCHOOL DISTRICTS IN TRF'S AREA CONTINUED TO WORK UNDER THEIR STRATEGIC PLAN FOCUSED ON SCIENCE, TECHNOLOGY, ENGINEERING AND MATH, AND CAREER AND TECHNICAL EDUCATION TRF AWARDED A TOTAL OF \$1.3 MILLION IN GRANTS TO THE SCHOOL DISTRICTS TO SUPPORT PROFESSIONAL DEVELOPMENT TO ENHANCE CLASSROOM INSTRUCTION AND ADMINISTRATIVE LEADERSHIP DURING 2013 THROUGH A \$245,000 GRANT FROM THE RAPIDES FOUNDATION, THE ORCHARD FOUNDATION, TRF'S SUPPORTING ORGANIZATION, SPONSORED KAGAN INSTRUCTIONAL INSTITUTES FOR 397 AREA EDUCATORS THE INSTITUTES FEATURED HANDS-ON CURRICULUM AND MATERIALS THAT ARE ENGAGING, RIGOROUS AND MOTIVATING FOR STUDENTS AND THAT CAN IMMEDIATELY BE BROUGHT BACK INTO THE CLASSROOM AND IMPLEMENTED IN A COOPERATIVE LEARNING MODEL ADDITIONALLY, 107 TEACHERS RECEIVED 3 ROUNDS OF FOLLOW-UP ONE-ON-ONE COACHING IN THE CLASSROOM THE ORCHARD FOUNDATION ALSO HELD TRAININGS FOR NEW AND ASPIRING LEADERS IN AREA SCHOOLS THE PROGRAM IS DESIGNED FOR ASSISTANT PRINCIPALS OR TEACHERS WHO ARE DEDICATED TO IMPROVING THE BEST PRACTICES IN INSTRUCTION AND LEADERSHIP THESE PARTICIPANTS WERE TRAINED IN THE 5 DIMENSIONS OF TEACHING AND LEARNING FRAMEWORK BY THE UNIVERSITY OF WASHINGTON CENTER FOR EDUCATIONAL LEADERSHIP THROUGHOUT THE YEAR THEY HAD THE OPPORTUNITY TO COLLABORATE AND OBSERVE OTHERS TO DEVELOP THE EXPERTISE NEEDED TO RECOGNIZE HIGH QUALITY INSTRUCTION THE LEADING FOR BETTER INSTRUCTION PROGRAM ALLOWS PRINCIPALS TO DEVELOP THEIR LEADERSHIP SKILLS IN GUIDING AND SUPPORTING TEACHERS' PROFESSIONAL LEARNING PRINCIPALS WERE ALSO TRAINED IN THE 5 DIMENSIONS OF TEACHING AND LEARNING THEY SPENT TIME DURING THE SCHOOL YEAR WITH FACILITATORS TO MODEL AND COACH THE SD'S IN THEIR SCHOOL A SUPERINTENDENTS' NETWORK WAS ESTABLISHED TO PROVIDE SESSIONS FOR SUPERINTENDENTS AND KEY CENTRAL OFFICE LEADERS, FOCUSED ON THE ROLE OF CENTRAL OFFICE LEADERSHIP IN DEVELOPING AND SUPPORTING PRINCIPAL INSTRUCTIONAL LEADERSHIP IN 2013 126 PARTICIPANTS ATTENDED LEADERSHIP DEVELOPMENT ACTIVITIES TRF AWARDED \$190,000 IN GRANTS TO THE ORCHARD FOUNDATION TO SUPPORT ITS LEADERSHIP INSTITUTES IN 2010 LOUISIANA STATE UNIVERSITY RECEIVED AN \$8 MILLION, FIVE-YEAR GRANT FROM THE U.S. DEPARTMENT OF EDUCATION TO RETRAIN CENTRAL LOUISIANA PROFESSIONALS HOLDING A BACHELORS' DEGREE IN A MATH- OR SCIENCE-RELATED FIELD TO TEACH HIGH SCHOOL ADVANCED PLACEMENT MATH AND SCIENCE CLASSES THE CENTRAL LOUISIANA ACADEMIC RESIDENCY FOR TEACHERS (CART) GRANT IS A COLLABORATIVE EFFORT BETWEEN TRF, THE ORCHARD FOUNDATION, NINE CENTRAL LOUISIANA PARISH SCHOOL DISTRICTS, LSUA AND LSU DURING 2013, THE PROGRAM'S THIRD COHORT OF 12 RESIDENTS COMPLETED THEIR CO-TEACHING YEAR, EARNED THEIR MASTER'S DEGREES, AND BEGAN TEACHING IN CENTRAL LOUISIANA SCHOOLS THE FOURTH COHORT OF 9 STUDENTS BEGAN THEIR CO-TEACHING YEAR AND MASTERS' PROGRAM STUDY TRAINING ON THE NEW COMMON CORE MATHEMATICS REQUIREMENTS WAS PROVIDED TO 56 TEACHERS IN ADDITION TO ONGOING IN-KIND SUPPORT, IN 2013 TRF PROVIDED \$160,000 IN CASH MATCHING FUNDS TO SUPPORT THE CART PROGRAM DURING 2013 THE ORCHARD FOUNDATION FACILITATED GRANT AWARDS FOR AVOYELLES AND NATCHITOCHES PUBLIC SCHOOL DISTRICTS TOTALING OVER \$1.2 MILLION AS PART OF THE LOUISIANA DEPARTMENT OF EDUCATION BELIEVE AND SUCCEED PROGRAM BOTH DISTRICTS RECEIVED SCHOOL IMPROVEMENT GRANTS TO FUND THE TRAINING OF SCHOOL LEADERS WHO WILL TURN AROUND STRUGGLING SCHOOLS IN THEIR DISTRICTS PROFESSIONAL DEVELOPMENT ACTIVITIES FUNDED THROUGH BELIEVE AND SUCCEED BEGAN IN 2013 IN NATCHITOCHES PARISH WITH URBAN LEARNING AND LEADERSHIP CENTER PROFESSIONAL DEVELOPMENT ACTIVITIES FUNDED THROUGH BELIEVE AND SUCCEED BEGAN IN 2013 IN AVOYELLES PARISH WITH UNIVERSITY OF WASHINGTON'S CENTER FOR EDUCATIONAL LEADERSHIP AT THE BEGINNING OF ITS INITIATIVES, THE RAPIDES FOUNDATION SET LONG-TERM IMPACT GOALS IN 2013 TRF COMPLETED AN ASSESSMENT TO DETERMINE ITS PROGRESS TOWARD ITS LONG-TERM GOALS SELECTED GOALS FOR THE EDUCATION INITIATIVE ARE - 75% OF STUDENTS WILL ATTAIN "BASIC" OR ABOVE IN LANGUAGE ARTS, MATH AND SCIENCE ON THE ILEAP TEST IN 2013, SCORES ROSE ELA (71% FROM 64% IN 2006), MATH (65% FROM 63% IN 2006) AND SCIENCE (65% FROM 56% IN 2006) - 25% OF STUDENTS WILL ACHIEVE "ADVANCED/MASTERY" LEVEL ON THE ILEAP TEST 2013 SCORES INCREASED ELA (26% FROM 17% IN 2006), MATH (21% FROM 18% IN 2006) AND SCIENCE (21% FROM 14% IN 2006)- THE GRADUATION COHORT RATE WILL INCREASE TO 77% FROM 68.4% IN 2006 THE 2012 GRADUATION RATE WAS UP TO 73%	

(Code) (Expenses \$ 2,276,253 including grants of \$ 1,921,093) (Revenue \$)	THE RAPIDES FOUNDATION'S (TRF'S) OTHER PROGRAM SERVICES PRIMARILY CONSISTS OF ITS HEALTHY COMMUNITIES INITIATIVE -- IN 2013 TRF PROVIDED \$300,000 IN FUNDING TO THE BUSINESS ACCELERATOR SYSTEM (BAS), A PROGRAM OF THE ALEXANDRIA/PINEVILLE CHAMBER OF COMMERCE AND THE CENTRAL LOUISIANA ECONOMIC DEVELOPMENT ALLIANCE (CLEDA) BAS OFFERS COACHING SERVICES AND ENTREPRENEURSHIP CLASSES FOR EARLY-STAGE ENTREPRENEURS, SUCH AS FINANCE, MARKETING, AND OPERATIONS IN 2013 BAS PROVIDED COACHING SERVICES TO 70 ENTREPRENEURS AND PROVIDED 66 CLASSES AND SEMINARS TO 1,284 PARTICIPANTS IN 2013 TRF PROVIDED ALMOST \$230,000 IN MATCHING FUNDS TO CLEDA DEDICATED TO ECONOMIC AND WORKFORCE DEVELOPMENT IN THE REGION DURING THE YEAR CLEDA'S ECONOMIC DEVELOPMENT WORK BROUGHT 875 DIRECT JOBS TO THE COMMUNITY AND GENERATED \$725 MILLION IN NEW CONSTRUCTION IN 2013 TRF PROVIDED \$500,000 TO SUPPORT THE ORCHARD FOUNDATION'S CENLA WORK READY NETWORK, A SYSTEM DESIGNED TO LINK EDUCATION WITH WORKFORCE DEVELOPMENT EFFORTS AND ALIGN THEM WITH REGIONAL ECONOMIC NEEDS DURING 2013, ORCHARD ENABLED ALL HIGH SCHOOLS IN ITS SERVICE AREA TO ACCESS CAREER READY 101, A CAREER TRAINING COURSE THAT PREPARES STUDENTS FOR CERTIFICATION WITH WORKKEYS ASSESSMENTS WORKKEYS IS A JOB SKILLS ASSESSMENT SYSTEM MEASURING REAL WORLD SKILLS THAT EMPLOYERS BELIEVE ARE CRITICAL TO JOB SUCCESS WORKKEYS ASSESSMENT SCORES IN THREE CORE AREAS APPLIED MATHEMATICS, READING FOR INFORMATION, AND LOCATING INFORMATION, DETERMINE A STUDENT'S NATIONAL CAREER READINESS CERTIFICATE (NCRC) LEVEL, AN OBJECTIVE DOCUMENTATION OF AN EMPLOYEE'S SKILLS THAT CAN BE ACCEPTED NATIONWIDE DURING THE 2012-2013 SCHOOL YEAR, 5,963 STUDENTS PARTICIPATED IN CAREER READY 101 TRAINING, AND 2,714 STUDENTS ACHIEVED NCRC CERTIFICATION THE ORCHARD ALSO PARTNERED WITH THREE BUSINESSES IN THE REGION TO OFFER CONSTRUCTION TECHNOLOGY, WELDING AND HORTICULTURE TECHNICAL EDUCATION AT AREA HIGH SCHOOLS IN 2013, 209 STUDENTS RECEIVED CERTIFICATIONS IN ONE OF THESE THREE AREAS OF STUDY ALSO DURING 2013 TRF PROVIDED A \$300,000 GRANT TO ORCHARD TO PROVIDE COLLEGE AND CAREER COACHING FOR 12TH GRADE STUDENTS IN 45 HIGH SCHOOLS COLLEGE AND CAREER AWARENESS SEMINARS WERE PROVIDED FOR 9TH AND 11TH GRADES AT SELECT SCHOOLS WITH A \$35,000 TRF GRANT, CLEDA COMPLETED 11 JOB PROFILES FOR 9 EMPLOYERS IN CENTRAL LOUISIANA THESE PROFILES DESCRIBE JOB REQUIREMENTS IN TERMS OF COMPETENCIES TESTED IN THE NCRC CERTIFICATION EXAM, SO EMPLOYERS CAN APPROPRIATELY MATCH NCRC CERTIFICATE HOLDERS WITH JOBS BOTH RAPIDES AND AVOYELLES PARISHES ARE PART OF ACT'S CERTIFIED WORK READY COMMUNITIES PILOT PROJECT AVOYELLES PARISH HAS OBTAINED THEIR CERTIFICATION, AND RAPIDES PARISH HAS MET 97% OF THEIR GOALS FOR CERTIFICATION THE CENTRAL LOUISIANA CHAMBER OF COMMERCE HAS SET A GOAL TO HAVE 20% OF ITS MEMBERS (200 BUSINESS) UTILIZING NCRC IN THEIR HIRING BY THE END OF 2014 FIFTEEN CENTRAL LOUISIANA PROFESSIONALS GRADUATED FROM CENLA BOARDBUILDERS IN 2013, A TRF COMMUNITY DEVELOPMENT WORKS (CDW) PROGRAM THAT TRAINS EMERGING LEADERS TO BECOME ACTIVE IN THEIR COMMUNITIES AS MEMBERS OF NONPROFIT BOARDS OF DIRECTORS THE PROFESSIONALS WENT THROUGH A SERIES OF SESSIONS IN 2013 TO LEARN THE ROLES AND RESPONSIBILITIES OF BEING EFFECTIVE BOARD MEMBERS AFTER COMPLETING THE TRAINING, THEY WERE EACH MATCHED WITH A NONPROFIT ORGANIZATION AND WILL NOW SERVE ON THEIR BOARDS CENLA EXECBUILDERS, AN INSTITUTE FOR EXECUTIVE DIRECTORS OF LOCAL NONPROFIT ORGANIZATIONS, TRAINED 7 EXECUTIVE DIRECTORS IN 2013 THE EXECUTIVE DIRECTORS CONTINUE A PEER NETWORKING ARRANGEMENT ONCE TRAINING IS COMPLETE THROUGH ITS FREE TRAINING CLASSES, CDW TRAINED LOCAL NONPROFIT ORGANIZATIONS AND INDIVIDUALS IN ISSUES THAT THEY DEAL WITH EVERY DAY, INCLUDING GRANT WRITING, PROGRAM PLANNING, FINANCIAL MANAGEMENT, FUNDRAISING AND MARKETING 295 INDIVIDUALS TOOK THESE FREE COURSES IN 2013 CLASS REGISTRATIONS WERE UP 24% OVER 2012 AS CDW HAS EXTENDED ITS ONLINE WEBINAR OFFERINGS, MAKING TRAININGS MORE ACCESSIBLE TO THOSE IN THE SERVICE AREA FARTHER AWAY FROM ITS TRAINING FACILITIES THE CDW LEARNING LAB EXPANDED ITS LIBRARY OFFERINGS TO EBOOKS AND AUDIOBOOKS IN MID-2013, AGAIN MAKING ITS MATERIALS MORE CONVENIENTLY ACCESSIBLE TO INDIVIDUALS FARTHER AWAY FROM ITS FACILITIES UNDER ITS NONPROFIT WORKS PROGRAM, CDW AWARDED GRANTS TOTALING \$100,000 TO TWO LOCAL ORGANIZATIONS THE GRANTS ARE USED TO EXPAND THE GOVERNANCE, ORGANIZATIONAL DEVELOPMENT AND LEADERSHIP CAPACITIES OF THE ORGANIZATIONS THROUGH PERSONALIZED TECHNICAL ASSISTANCE AND TRAINING OVER A TWO-YEAR PERIOD AT THE BEGINNING OF ITS INITIATIVES, THE RAPIDES FOUNDATION SET LONG-TERM IMPACT GOALS IN 2013 TRF COMPLETED A PRIMARY DATA ASSESSMENT TO DETERMINE ITS PROGRESS TOWARD ITS LONG-TERM GOALS SELECTED GOALS FOR THE HEALTHY COMMUNITIES INITIATIVE ARE - GROW THE REAL MEDIAN HOUSEHOLD INCOME TO \$40,505 FROM \$36,818 IN 2005 THE LATEST REAL INCOME WAS \$36,917 - INCREASE THE IMPORTANCE OF CITIZEN-LED EFFORTS IN THE COMMUNITY TO 85% FROM 76% IN 2007 IN 2013 THE IMPORTANCE WAS MEASURED AT 78% - INCREASE THE NUMBER OF RESIDENTS WHO VOLUNTEER FREQUENTLY TO 25% FROM 15% IN 2007 IN 2013, FREQUENT VOLUNTEERS WERE TALLIED AT 12% - INCREASE THE NUMBER OF RESIDENTS WHO ENGAGE FREQUENTLY IN FUNDRAISING FOR COMMUNITY EFFORTS TO 72% FROM 69% IN 2007 IN 2013 FREQUENT FUNDRAISERS TOTALED 59% - INCREASE THE NUMBER OF LEADERS WHO REGULARLY PARTNER WITH OTHER ORGANIZATIONS TO ACCOMPLISH THEIR MISSIONS TO 58% FROM 48% IN 2007 LEADERS WHO PARTNER WERE 34% IN 2013 - INCREASE THE NUMBER OF COMMUNITY GROUPS ACHIEVING EXCELLENCE IN BEST PRACTICES FOR NONPROFIT MANAGEMENT TO 58% FROM 48% IN 2007 IN 2013 46% OF COMMUNITY GROUPS WERE ACHIEVING EXCELLENCE IN BEST PRACTICES	
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4d	Other program services (Describe in Schedule O) (Expenses \$ 2,276,253 including grants of \$ 1,921,093) (Revenue \$)
4e	Total program service expenses 9,605,298

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)? <i>If "Yes," complete Schedule A</i> 	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> 		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> 	Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> 		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 	Yes	
b 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? <i>If "Yes," complete Schedule D, Part VII</i> 		No
c 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? <i>If "Yes," complete Schedule D, Part VIII</i> 	Yes	
d 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? <i>If "Yes," complete Schedule D, Part IX</i> 		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 		No
f 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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> 	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> 	Yes	
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	Yes	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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>	22		No
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>	23	Yes	
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 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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>	25a		No
b	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>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29		No
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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
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>	32		No
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>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
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>	36		No
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> . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.		
2b	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 e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
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)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for 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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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 as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	16	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	15	
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	No
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	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
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	9	No

Section B. Policies

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
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?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
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	Yes
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes

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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. JOE ROSIER, PRESIDENT & CEO, 1101 FOURTH STREET, ALEXANDRIA, LA 71301 (318) 443-3394

Part VII

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

Check if Schedule O contains a response or note to any line in this Part VII

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
- 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, if any 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, or 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES R BAKER JR TRUSTEE	50	X		X				0	0	0
(2) JOAN BRUNSON MD TRUSTEE	50	X						0	0	0
(3) JACQUELYN DAENEN TRUSTEE	50	X						0	0	0
(4) LAURA DAUZAT TRUSTEE	50	X						0	0	0
(5) ROSA FIELDS TRUSTEE	50	X						0	0	0
(6) DAVID R GILCHRIST TRUSTEE	50	X		X				0	0	0
(7) CYNTHIA A GILLESPIE PHD TRUSTEE	50	X						0	0	0
(8) ROBERT HUGHES TRUSTEE	50	X						0	0	0
(9) ERNEST KELLY MD TRUSTEE	50	X						0	0	0
(10) CRAIG PEARCE MD TRUSTEE	50	X						0	0	0
(11) MICHAEL REESE TRUSTEE	50	X						0	0	0
(12) FRANKIE ROSENTHAL TRUSTEE	50	X						0	0	0
(13) TAMMI SALAZAR TRUSTEE	50	X		X				0	0	0
(14) DENNIS WIMMERT TRUSTEE	50	X						0	0	0
(15) HOWARD WOLD MD TRUSTEE	1 00	X		X				0	0	0
(16) JOSEPH R ROSIER JR PRESIDENT & CEO	40 00	X		X				329,064	0	32,553
(17) KATHLEEN F NOLEN DIR, ADMIN	40 00				X			181,175	0	21,358

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	667,273	207,233	107,002

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. **3**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
KALB-TV PO BOX 951 ALEXANDRIA LA 71309	OUTREACH SERVICES	190,905
BLUE CROSS BLUE SHIELD OF LA PO BOX 65007 DALLAS TX 752650007	HEALTH INSURANCE	150,909
EVALWORKS 150 SOLTERRA WAY DURHAM NC 27705	EVALUATION	142,677
PRC 11326 P STREET OMAHA NE 68137	ASSESSMENT	118,073
LAURA LINNAN 118 CAROL STREET CARRBORO NC 27510	EVALUATION	112,430

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ➤5

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c				
	d	Related organizations 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	199,621			
	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	199,621			
Program Service Revenue	2a	Business Code				
	b					
	c					
	d					
	e					
	f	All other program service revenue	4,071,690			4,071,690
	g	Total. Add lines 2a-2f	4,071,690			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	2,927,252		
4		Income from investment of tax-exempt bond proceeds				
5		Royalties				
6a		Gross rents				
b		Less rental expenses				
c		Rental income or (loss)				
d		Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory				
b		Less cost or other basis and sales expenses				
c		Gain or (loss)				
d		Net gain or (loss)	1,724,103			1,724,103
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18				
b		Less direct expenses				
c		Net income or (loss) from fundraising events				
9a		Gross income from gaming activities See Part IV, line 19				
b		Less direct expenses				
c		Net income or (loss) from gaming activities				
10a		Gross sales of inventory, less returns and allowances				
b		Less cost of goods sold				
c		Net income or (loss) from sales of inventory				
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d					
12	Total revenue. See Instructions	8,922,666	0	0	8,723,045	

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).

Check if Schedule O contains a response or note to any line in this Part IX

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 United States. See Part IV, line 21.	6,526,870	6,526,870		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	417,884	145,080	272,804	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	709,425	361,922	347,503	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	107,645	48,425	59,220	
9	Other employee benefits.	75,323	34,733	40,590	
10	Payroll taxes.	71,028	33,241	37,787	
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	4,585	1,657	2,928	
c	Accounting.	40,216	14,535	25,681	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	276,219	276,219		
12	Advertising and promotion.	456,293	366,525	89,768	
13	Office expenses.	43,145	22,557	20,588	
14	Information technology.	82,562	36,382	46,180	
15	Royalties.				
16	Occupancy.	125,739	61,156	64,583	
17	Travel.	25,986	25,591	395	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	138,777	69,279	69,498	
20	Interest.	6,585	2,380	4,205	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	49,744	17,980	31,764	
23	Insurance.	26,143	9,449	16,694	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).				
a	CONTRACT SERVICES	1,410,533	1,410,533		
b	PROGRAM SUPPLIES	127,546	127,546		
c	MEMBERSHIPS & DUES	20,879	7,750	13,129	
d	REFERENCE MATERIALS	4,400	3,829	571	
e	All other expenses	11,474	1,659	9,815	
25	Total functional expenses. Add lines 1 through 24e.	10,759,001	9,605,298	1,153,703	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		2,375,914	1	5,713,782
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	75,000
	4	Accounts receivable, net		126,631	4	208,869
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		23,096	9	27,592
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a3,450,640			
	b	Less: accumulated depreciation	10b1,601,499	1,979,036	10c	1,849,141
	11	Investments—publicly traded securities		181,524,125	11	202,523,424
	12	Investments—other securities. See Part IV, line 11.			12	
	13	Investments—program-related. See Part IV, line 11.		39,517,545	13	36,743,588
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11.		548,294	15	509,645
	16	Total assets. Add lines 1 through 15 (must equal line 34).		226,094,641	16	247,651,041
Liabilities	17	Accounts payable and accrued expenses		627,401	17	456,980
	18	Grants payable		2,898,147	18	3,394,078
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.			25	
	26	Total liabilities. Add lines 17 through 25.		3,525,548	26	3,851,058
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		222,569,093	27	243,664,630
	28	Temporarily restricted net assets			28	135,353
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ 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		222,569,093	33	243,799,983
	34	Total liabilities and net assets/fund balances		226,094,641	34	247,651,041

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,922,666
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,759,001
3	Revenue less expenses Subtract line 2 from line 1	3	-1,836,335
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	222,569,093
5	Net unrealized gains (losses) on investments	5	23,067,225
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	243,799,983

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separate basis	Yes	
2c	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	Yes	
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?		No
3b	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		

SCHEDULE A

(Form 990 or 990EZ)

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.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization THE RAPIDES FOUNDATION	Employer identification number 72-0423603
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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 - Non-functionally integrated
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)		
11g(ii)		
11g(iii)		

(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 monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
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 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2012 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2013. 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 ▶						
b 33 1/3% support test—2012. 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 ▶						
17a 10%-facts-and-circumstances test—2013. 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 ▶						
b 10%-facts-and-circumstances test—2012. 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 ▶						
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 ▶						

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. 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—2012. 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. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test		
Return Reference	Explanation	

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

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If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization THE RAPIDES FOUNDATION	Employer identification number 72-0423603
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		27,080													
c Total lobbying expenditures (add lines 1a and 1b)		27,080													
d Other exempt purpose expenditures		10,731,921													
e Total exempt purpose expenditures (add lines 1c and 1d)		10,759,001													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		687,950													
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		171,988													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	691,762	687,950	3,379,712
b Lobbying ceiling amount (150% of line 2a, column(e))					5,069,568
c Total lobbying expenditures	28,784	20,733	22,770	27,080	99,367
d Grassroots nontaxable amount	250,000	250,000	172,941	171,988	844,929
e Grassroots ceiling amount (150% of line 2d, column (e))					1,267,394
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1	Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

Part IV

[illegible]

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization THE RAPIDES FOUNDATION	Employer identification number 72-0423603
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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	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
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? ☐ Yes ☐ 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? ☐ Yes ☐ 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)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ 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 Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

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 XIII, 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), 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 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

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 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b

Assets included in Form 990, Part X ▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2013

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 XIII
- 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 XIII and complete the following table
- c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
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					

- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		59,900		59,900
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		3,390,740	1,601,499	1,789,241
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,849,141

Schedule D (Form 990) 2013

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	31,989,891
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	23,067,226
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	23,067,226
3	Subtract line 2e from line 1	3	8,922,665
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 XIII)	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	8,922,665

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	10,759,001
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 XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	10,759,001
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 XIII)	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	10,759,001

Part XIII

Supplemental Information

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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION AND ITS SUBSIDIARIES ARE NONPROFIT ORGANIZATIONS AND ARE 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 CONSOLIDATED FINANCIAL STATEMENTS, BUT EACH ENTITY IS REQUIRED TO FILE AN ANNUAL INFORMATION TAX RETURN THEY ARE ALSO REQUIRED TO REVIEW VARIOUS TAX POSITIONS THEY HAVE TAKEN WITH RESPECT TO THEIR EXEMPT STATUS AND DETERMINE WHETHER IN FACT THEY ARE TAX EXEMPT ENTITIES THE FOUNDATION AND ITS SUBSIDIARIES MUST ALSO CONSIDER WHETHER THEY HAVE NEXUS IN JURISDICTIONS IN WHICH THEY HAVE INCOME AND WHETHER A TAX RETURN IS REQUIRED IN THOSE JURISDICTIONS IN ADDITION, AS TAX EXEMPT ENTITIES, EACH ENTITY MUST ASSESS WHETHER IT HAS ANY TAX POSITIONS ASSOCIATED WITH UNRELATED BUSINESS INCOME SUBJECT TO INCOME TAX THE ENTITIES DO NOT EXPECT THEIR 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 ENTITIES' ACCOUNTING RECORDS THE FOUNDATION AND ITS SUBSIDIARIES EACH FILE U S FEDERAL FORM 990 FOR INFORMATIONAL PURPOSES THEIR FEDERAL INCOME TAX RETURNS FOR THE TAX YEARS 2010 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE SINCE ITS INITIAL INCORPORATION IN 1924, THE FOUNDATION HAS BEEN EXEMPT FROM FEDERAL AND STATE INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AS A PUBLIC CHARITY OPERATING A HOSPITAL DUE TO ITS CONTRIBUTION OF ITS HOSPITAL OPERATIONS TO THE PARTNERSHIP AND ITS NEW GRANT MAKING ACTIVITIES, IT REQUESTED A PRIVATE LETTER RULING FROM THE INTERNAL REVENUE SERVICE TO CONFIRM THE CONTINUATION OF ITS PUBLIC CHARITY STATUS THE SERVICE DECLINED TO ISSUE SUCH A RULING DUE TO THE NUMBER OF SIMILAR TRANSACTIONS AND ISSUED A REVENUE RULING (REV RUL 98-15) DEFINING THE REQUIREMENTS FOR WHOLE HOSPITAL JOINT VENTURES SUCH AS RAPIDES HEALTH SERVICES, LLC THE SERVICE DECLINED THE FOUNDATION'S REQUEST TO EXAMINE ITS OPERATIONS AND ENTER INTO A CLOSING AGREEMENT AFTER REV RUL 98-15, TWO COURT CASES FOCUSED ON THE CONTROL ISSUE IDENTIFIED BY THE RULING AS DETERMINATIVE OF WHETHER THE JOINT VENTURE JEOPARDIZED THE EXEMPT STATUS OF THE EXEMPT ORGANIZATION ONE OF THESE, ST DAVID'S HEALTH CARE SYSTEM, INC V UNITED STATES, INVOLVED FACTS VERY SIMILAR TO THOSE PRESENT IN THE FOUNDATION'S OWNERSHIP OF THE LLC, AND WAS A VICTORY FOR THE EXEMPT ORGANIZATION WHOSE STATUS HAD BEEN CHALLENGED COUNSEL FOR THE FOUNDATION HAS BEEN AT ALL RELEVANT TIMES AND REMAINS OF THE OPINION THAT ANY CHALLENGE TO THE FOUNDATION'S EXEMPT STATUS WOULD BE SIMILARLY DECIDED THIS OPINION IS BOLSTERED BY REV RUL 2004-51, WHICH, WHILE ADDRESSING ANCILLARY ACTIVITY JOINT VENTURES, REPRESENTS AN ACKNOWLEDGMENT BY THE SERVICE THAT SUFFICIENT CONTROL MAY BE MAINTAINED BY THE EXEMPT PARTNER IN SUCH A VENTURE EVEN THOUGH OWNERSHIP AND GOVERNANCE WERE SHARED 50-50 WITH THE FOR-PROFIT VENTURER IT SHOULD BE NOTED THAT EVEN IF THE FOUNDATION'S PUBLIC CHARITY STATUS SHOULD NOT CONTINUE, THE FOUNDATION BELIEVES THAT IT WOULD CONTINUE TO BE EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE CODE AS A PRIVATE FOUNDATION PRIVATE FOUNDATIONS ARE SUBJECT TO MORE RESTRICTIONS UNDER THE CODE THAN ARE PUBLIC CHARITIES THESE RESTRICTIONS INCLUDE STATUTORY PROHIBITIONS AGAINST SELF-DEALING, EXCESS BUSINESS HOLDINGS, JEOPARDY INVESTMENTS, AND TAXABLE EXPENDITURES IN ADDITION, PRIVATE FOUNDATIONS ARE SUBJECT TO AN EXCISE TAX ON THEIR NET INVESTMENT INCOME AND ARE REQUIRED TO MAKE ANNUAL DISTRIBUTIONS OF FIVE PERCENT (5%) OF THE AVERAGE MARKET VALUE OF THEIR NON-CHARITABLE-USE ASSETS FOR CHARITABLE, EDUCATIONAL, SCIENTIFIC, AND SIMILAR PURPOSES NON-CHARITABLE-USE ASSETS ARE ASSETS THAT ARE NOT USED OR HELD FOR USE DIRECTLY IN CARRYING ON THE ORGANIZATION'S EXEMPT PURPOSE, THEY INCLUDE ASSETS HELD FOR INVESTMENT AND THE PRODUCTION OF INVESTMENT INCOME PRIVATE FOUNDATIONS ARE REQUIRED TO PUBLISH A NOTICE THAT THEIR ANNUAL REPORTS ARE AVAILABLE FOR INSPECTION THESE FINANCIAL STATEMENTS DO NOT CONSIDER THE EFFECTS OF A POSSIBLE RETROACTIVE DETERMINATION BY THE INTERNAL REVENUE SERVICE THAT THE FOUNDATION IS NOT EXEMPT FROM TAXATION OR THAT IT IS A NONPROFIT PRIVATE FOUNDATION SUCH EFFECTS COULD INCLUDE INCOME TAXES ON ITS EARNINGS, A REQUIREMENT THAT IT DIVEST ITSELF OF A PORTION OF THE LLC, EXCISE TAXES ON NET INVESTMENT INCOME AND VARIOUS PENALTIES THE CONTRIBUTION AGREEMENT REQUIRES THAT THE PARTNERSHIP, AND THE OPERATING AGREEMENT OF THE LLC REQUIRES THAT THE LLC, OPERATE IN A FASHION SO AS NOT TO ADVERSELY AFFECT THE FOUNDATION'S TAX-EXEMPT STATUS, AND SUPPORT COMMUNITY, CIVIC, CHARITABLE AND CULTURAL ACTIVITIES AT A LEVEL AT LEAST EQUAL TO THAT OF THE RAPIDES REGIONAL MEDICAL CENTER IN THE YEAR ENDED JUNE 30, 1994 IT ALSO CALLS FOR IT TO PROVIDE \$2 8 MILLION OF UNCOMPENSATED CARE ANNUALLY TO THE ALEXANDRIA, LOUISIANA COMMUNITY, AS WELL AS CONTINUE HISTORIC LEVELS IN THE OTHER COMMUNITIES WHERE IT HAS HOSPITALS

[illegible]

SCHEDULE H
(Form 990)

Department of the Treasury
Internal Revenue Service

Hospitals

► Complete if the organization answered "Yes" to Form 990, Part IV, question 20.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule H (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
THE RAPIDES FOUNDATION

Employer identification number
72-0423603

Part I

Financial Assistance and Certain Other Community Benefits at Cost

		Yes	No
1a	Did the organization have a financial assistance policy during the tax year? If "No," skip to question 6a	1a Yes	
b	If "Yes," was it a written policy?	1b Yes	
2	If the organization had multiple hospital facilities, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year ☒ Applied uniformly to all hospital facilities ☐ Applied uniformly to most hospital facilities ☐ Generally tailored to individual hospital facilities		
3	Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year a Did the organization use Federal Poverty Guidelines (FPG) as a factor in determining eligibility for providing <i>free</i> care? If "Yes," indicate which of the following was the FPG family income limit for eligibility for <i>free</i> care ☐ 100% ☐ 150% ☒ 200% ☐ Other _____ % b Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care ☐ 200% ☐ 250% ☐ 300% ☐ 350% ☐ 400% ☐ Other _____ % c If the organization used factors other than FPG in determining eligibility, describe in Part VI the income based criteria for determining eligibility for free or discounted care Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care 4 Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?	3a Yes	
5a	Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	3b	No
b	If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?	4 Yes	
c	If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care?	5a Yes	
6a	Did the organization prepare a community benefit report during the tax year?	5b Yes	
b	If "Yes," did the organization make it available to the public?	5c	No
	Complete the following table using the worksheets provided in the Schedule H instructions Do not submit these worksheets with the Schedule H	6a Yes	
		6b Yes	

7

Financial Assistance and Certain Other Community Benefits at Cost

Financial Assistance and Means-Tested Government Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
a Financial Assistance at cost (from Worksheet 1)		335	684,330	10,357	673,973	0 990 %
b Medicaid (from Worksheet 3, column a)		11,997	14,655,181	12,303,670	2,351,511	3 450 %
c Costs of other means-tested government programs (from Worksheet 3, column b) . .						
d Total Financial Assistance and Means-Tested Government Programs . .		12,332	15,339,511	12,314,027	3,025,484	4 440 %
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4)			4,961,698	0	4,961,698	7 290 %
f Health professions education (from Worksheet 5)			946,857	88,747	858,110	1 260 %
g Subsidized health services (from Worksheet 6)						
h Research (from Worksheet 7)						
i Cash and in-kind contributions for community benefit (from Worksheet 8)			4,823,261	0	4,823,261	7 080 %
j Total Other Benefits			10,731,816	88,747	10,643,069	15 630 %
k Total. Add lines 7d and 7j . .		12,332	26,071,327	12,402,774	13,668,553	20 070 %

Part II

Community Building Activities

Complete this table if the organization conducted any community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1	Physical improvements and housing					
2	Economic development					
3	Community support					
4	Environmental improvements					
5	Leadership development and training for community members					
6	Coalition building					
7	Community health improvement advocacy					
8	Workforce development					
9	Other					
10	Total					

Part III

Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense

1

Did the organization report bad debt expense in accordance with Heathcare Financial Management Association Statement No. 15?

1

No

2

Enter the amount of the organization's bad debt expense. Explain in Part VI the methodology used by the organization to estimate this amount.

2

4,910,049

3

Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's financial assistance policy. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale, if any, for including this portion of bad debt as community benefit.

3

4

Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense or the page number on which this footnote is contained in the attached financial statements.

Section B. Medicare

5

Enter total revenue received from Medicare (including DSH and IME).

5

77,882,905

6

Enter Medicare allowable costs of care relating to payments on line 5.

6

68,296,607

7

Subtract line 6 from line 5. This is the surplus (or shortfall).

7

9,586,298

8

Describe in Part VI the extent to which any shortfall reported in line 7 should be treated as community benefit. Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6. Check the box that describes the method used.
☐ Cost accounting system ☐ Cost to charge ratio ☒ Other

Section C. Collection Practices

9a

Did the organization have a written debt collection policy during the tax year?

9a

Yes

b

If "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI.

9b

Yes

Part IV

Management Companies and Joint Ventures

(owned 10% or more by officers, directors, trustees, key employees, and physicians—see instructions)

(a) Name of entity	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership %	(e) Physicians' profit % or stock ownership %
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

Part V

Facility Information

Section A. Hospital Facilities

(list in order of size from largest to smallest—see instructions)
How many hospital facilities did the organization operate during the tax year?
1

Name, address, primary website address, and state license number

		Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (Describe)	Facility reporting group
	See Additional Data Table										

Part V Facility Information (continued)

Section B. Facility Policies and Practices

(Complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

RAPIDES REGIONAL MEDICAL CTR

Name of hospital facility or facility reporting group

If reporting on Part V, Section B for a single hospital facility only: line number of hospital facility (from Schedule H, Part V, Section A)

1

	Yes	No
Community Health Needs Assessment (Lines 1 through 8c are optional for tax years beginning on or before March 23, 2012)		
1 During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 9 If "Yes," indicate what the CHNA report describes (check all that apply)	1 Yes	
a ☒ A definition of the community served by the hospital facility		
b ☒ Demographics of the community		
c ☒ Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d ☒ How data was obtained		
e ☒ The health needs of the community		
f ☒ Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g ☒ The process for identifying and prioritizing community health needs and services to meet the community health needs		
h ☒ The process for consulting with persons representing the community's interests		
i ☒ Information gaps that limit the hospital facility's ability to assess the community's health needs		
j ☐ Other (describe in Part VI)		
2 Indicate the tax year the hospital facility last conducted a CHNA 20 <u>13</u>		
3 In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Part VI how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	3 Yes	
4 Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Part VI	4 Yes	
5 Did the hospital facility make its CHNA report widely available to the public? If "Yes," indicate how the CHNA report was made widely available (check all that apply)	5 Yes	
a ☒ Hospital facility's website (list url) <u>WWW.RAPIDESREGIONAL.COM</u>		
b ☐ Other website (list url) _____		
c ☒ Available upon request from the hospital facility		
d ☐ Other (describe in Part VI)		
6 If the hospital facility addressed needs identified in its most recently conducted CHNA, indicate how (check all that apply as of the end of the tax year)		
a ☒ Adoption of an implementation strategy that addresses each of the community health needs identified through the CHNA		
b ☒ Execution of the implementation strategy		
c ☐ Participation in the development of a community-wide plan		
d ☐ Participation in the execution of a community-wide plan		
e ☒ Inclusion of a community benefit section in operational plans		
f ☒ Adoption of a budget for provision of services that address the needs identified in the CHNA		
g ☒ Prioritization of health needs in its community		
h ☒ Prioritization of services that the hospital facility will undertake to meet health needs in its community		
i ☐ Other (describe in Part VI)		
7 Did the hospital facility address all of the needs identified in its most recently conducted CHNA? If "No," explain in Part VI which needs it has not addressed and the reasons why it has not addressed such needs	7	No
8a Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)?	8a	No
b If "Yes" to line 8a, did the organization file Form 4720 to report the section 4959 excise tax?	8b	
c If "Yes" to line 8b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$ _____		

Part V

Facility Information (continued)

Financial Assistance Policy		Yes	No	
9 Did the hospital facility have in place during the tax year a written financial assistance policy that Explained eligibility criteria for financial assistance, and whether such assistance includes free or discounted care?		9	Yes	
10 Used federal poverty guidelines (FPG) to determine eligibility for providing <i>free</i> care? If "Yes," indicate the FPG family income limit for eligibility for free care <u>200 00000000000000</u> % If "No," explain in Part VI the criteria the hospital facility used		10	Yes	
11 Used FPG to determine eligibility for providing <i>discounted</i> care? If "Yes," indicate the FPG family income limit for eligibility for discounted care <u> </u> % If "No," explain in Part VI the criteria the hospital facility used		11		No
12 Explained the basis for calculating amounts charged to patients? If "Yes," indicate the factors used in determining such amounts (check all that apply)		12	Yes	
a ☒ Income level				
b ☐ Asset level				
c ☒ Medical indigency				
d ☒ Insurance status				
e ☐ Uninsured discount				
f ☒ Medicaid/Medicare				
g ☒ State regulation				
h ☒ Residency				
i ☒ Other (describe in Part VI)				
13 Explained the method for applying for financial assistance?		13	Yes	
14 Included measures to publicize the policy within the community served by the hospital facility? If "Yes," indicate how the hospital facility publicized the policy (check all that apply)		14	Yes	
a ☒ The policy was posted on the hospital facility's website				
b ☒ The policy was attached to billing invoices				
c ☒ The policy was posted in the hospital facility's emergency rooms or waiting rooms				
d ☒ The policy was posted in the hospital facility's admissions offices				
e ☒ The policy was provided, in writing, to patients on admission to the hospital facility				
f ☒ The policy was available upon request				
g ☒ Other (describe in Part VI)				
Billing and Collections				
15 Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained actions the hospital facility may take upon non-payment?		15	Yes	
16 Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP				
a ☐ Reporting to credit agency				
b ☐ Lawsuits				
c ☐ Liens on residences				
d ☐ Body attachments				
e ☐ Other similar actions (describe in Section C)				
17 Did the hospital facility or an authorized third party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP?				
If "Yes," check all actions in which the hospital facility or a third party engaged				
a ☐ Reporting to credit agency				
b ☐ Lawsuits				
c ☐ Liens on residences				
d ☐ Body attachments				
e ☐ Other similar actions (describe in Section C)				

Part V

Facility Information (continued)

- 18
- Indicate which efforts the hospital facility made before initiating any of the actions listed in line 17 (check all that apply)
- a

☒

Notified individuals of the financial assistance policy on admission
- b

☒

Notified individuals of the financial assistance policy prior to discharge
- c

☒

Notified individuals of the financial assistance policy in communications with the individuals regarding the individuals' bills
- d

☒

Documented its determination of whether individuals were eligible for financial assistance under the hospital facility's financial assistance policy
- e

☐

Other (describe in Section C)

Policy Relating to Emergency Medical Care

		Yes	No
19	Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that requires the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy? If "No," indicate why	Yes	
a	☐ The hospital facility did not provide care for any emergency medical conditions		
b	☐ The hospital facility's policy was not in writing		
c	☐ The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Part VI)		
d	☐ Other (describe in Part VI)		

Charges to Individuals Eligible for Assistance under the FAP (FAP-Eligible Individuals)

20	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care		
a	☐ The hospital facility used its lowest negotiated commercial insurance rate when calculating the maximum amounts that can be charged		
b	☐ The hospital facility used the average of its three lowest negotiated commercial insurance rates when calculating the maximum amounts that can be charged		
c	☐ The hospital facility used the Medicare rates when calculating the maximum amounts that can be charged		
d	☒ Other (describe in Part VI)		
21	During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care? If "Yes," explain in Part VI		No
22	During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual? If "Yes," explain in Part VI		No

Part V

Facility Information (continued)

Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? 2

Name and address	Type of Facility (describe)
1RAPIDES AFTER HOURS 2389 HWY 28 EAST PINEVILLE, LA 71360	URGENT CARE CLINIC
2HP LONG URGENT CARE 105 NORTH THIRD STREET ALEXANDRIA, LA 71301	URGENT CARE CLINIC FOR UNINSURED, UNDERINSURED, AND MEDICAID
3	
4	
5	
6	
7	
8	
9	
10	

Part VI

Supplemental Information

Provide the following information

- 1
- Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7, Part II and Part III, lines 2, 3, 4, 8 and 9b
- 2
- Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B
- 3
- Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy
- 4
- Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves
- 5
- Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e g , open medical staff, community board, use of surplus funds, etc)
- 6
- Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served
- 7
- State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report

Form and Line Reference	Explanation
PART I, LINE 3C	THE RAPIDES HEALTHCARE SYSTEM (RHS) DOES NOT UTILIZE FPG AS CRITERIA FOR DISCOUNTED CARE ANY INDIVIDUAL AT INCOME OF 200% OR LESS OF FPG QUALIFIES FOR THE RHS FINANCIAL ASSISTANCE POLICIES (FAP) AND RECEIVES A 100% DISCOUNT ON THEIR BILL, OR FREE CARE THERE IS NO PROVISION FOR PARTIAL DISCOUNTS ON PATIENT BILLS UNDER THE FAP ALL UNINSURED PATIENTS WHO DO NOT QUALIFY UNDER THE FAP RECEIVE AN UNINSURED DISCOUNT ON THEIR BILLS
PART I, LINE 6A	THE COMMUNITY BENEFIT REPORT IS PREPARED BY RAPIDES HEALTHCARE SYSTEM, TAX ID #61-1267229

Form and Line Reference	Explanation
PART I, LINE 7	A THE COST FOR FINANCIAL ASSISTANCE WAS DERIVED USING A COST-TO-CHARGE RATIO FROM SCHEDULE H, WORKSHEET 2 APPLIED IN WORKSHEET 1 FAP-ELIGIBLE PATIENT REVENUE IS BASED ON GAAP, AND BAD DEBT IS NOT INCLUDED IN THIS CALCULATION NO EXTRAORDINARY ITEMS ARE INCLUDED IN THIS CALCULATION PERSONS SERVED ARE THE TOTAL FAP-ELIGIBLE INPATIENT ADMISSIONS PLUS TOTAL FAP-ELIGIBLE OUTPATIENT VISITS B UNREIMBURSED MEDICAID COSTS WERE DERIVED USING A COST-TO-CHARGE RATIO FROM SCHEDULE H WORKSHEET 2 APPLIED IN WORKSHEET 3 PATIENT REVENUE IS BASED ON GAAP, AND BAD DEBT IS NOT INCLUDED IN THIS CALCULATION NO EXTRAORDINARY ITEMS ARE INCLUDED IN THIS CALCULATION PERSONS SERVED ARE THE TOTAL MEDICAID INPATIENT ADMISSIONS PLUS TOTAL MEDICAID OUTPATIENT VISITS
PART III, LINE 4	EXCERPT FROM 2013 NOTES TO AUDITED FINANCIAL STATEMENTS OF RAPIDES HEALTHCARE SYSTEM, LLC "THE SYSTEM PROVIDES CARE WITHOUT CHARGE OR AT AMOUNTS LESS THAN ITS ESTABLISHED RATES TO PATIENTS MEETING CERTAIN CRITERIA UNDER ITS CHARITY CARE POLICY BECAUSE THE SYSTEM DOES NOT PURSUE COLLECTION OF AMOUNTS DETERMINED TO QUALIFY AS CHARITY CARE, THESE AMOUNTS ARE NOT REPORTED AS NET PATIENT SERVICE REVENUE THE SYSTEM'S DIRECT AND INDIRECT COSTS FOR SERVICES FURNISHED UNDER ITS CHARITY CARE POLICY ARE INCLUDED IN NOTE 3 ACCOUNTS RECEIVABLE ARE REDUCED BY AN ALLOWANCE FOR DOUBTFUL ACCOUNTS IN EVALUATING THE COLLECTABILITY OF ACCOUNTS RECEIVABLE, THE SYSTEM ANALYZES ITS PAST HISTORY AND IDENTIFIES TRENDS FOR EACH OF ITS MAJOR PAYER SOURCES OF REVENUES TO ESTIMATE THE APPROPRIATE ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS AND PROVISION FOR UNCOLLECTIBLE ACCOUNTS MANAGEMENT REGULARLY REVIEWS DATA ABOUT THESE MAJOR PAYER SOURCES OF REVENUES IN EVALUATING THE SUFFICIENCY OF THE ALLOWANCE FOR DOUBTFUL ACCOUNTS FOR RECEIVABLES ASSOCIATED WITH SERVICES PROVIDED TO PATIENTS WHO HAVE THIRD-PARTY COVERAGE, THE SYSTEM ANALYZES CONTRACTUALLY DUE AMOUNTS AND PROVIDES AN ALLOWANCE FOR DOUBTFUL ACCOUNTS AND A PROVISION FOR UNCOLLECTIBLE ACCOUNTS, IF NECESSARY (E G , FOR EXPECTED UNCOLLECTIBLE DEDUCTIBLES AND COPAYMENTS ON ACCOUNTS FOR WHICH THE THIRD-PARTY PAYER HAS NOT YET PAID, OR FOR PAYERS WHO ARE KNOWN TO BE HAVING FINANCIAL DIFFICULTIES THAT MAKE THE REALIZATION OF AMOUNTS DUE UNLIKELY) FOR RECEIVABLES ASSOCIATED WITH SELF-PAY PATIENTS (WHICH INCLUDES BOTH PATIENTS WITHOUT INSURANCE AND PATIENTS WITH DEDUCTIBLE AND COPAYMENT BALANCES DUE FOR WHICH THIRD-PARTY COVERAGE EXISTS FOR PART OF THE BILL), THE SYSTEM RECORDS A SIGNIFICANT PROVISION FOR UNCOLLECTIBLE ACCOUNTS IN THE PERIOD OF SERVICE ON THE BASIS OF ITS PAST EXPERIENCE, WHICH INDICATES THAT MANY PATIENTS ARE UNABLE OR UNWILLING TO PAY THE PORTION OF THEIR BILL FOR WHICH THEY ARE FINANCIALLY RESPONSIBLE THE DIFFERENCE BETWEEN THE STANDARD RATES (OR THE DISCOUNTED RATES IF NEGOTIATED OR PROVIDED BY POLICY) AND THE AMOUNTS ACTUALLY COLLECTED AFTER ALL REASONABLE COLLECTION EFFORTS HAVE BEEN EXHAUSTED IS CHARGED OFF AGAINST THE ALLOWANCE FOR DOUBTFUL ACCOUNTS THE SYSTEM'S ALLOWANCE FOR DOUBTFUL ACCOUNTS FOR SELF-PAY PATIENTS WAS APPROXIMATELY 95% OF SELF-PAY ACCOUNTS RECEIVABLE AT BOTH DECEMBER 31, 2013 AND 2012, RESPECTIVELY THE SYSTEM'S WRITE-OFFS INCREASED 25% IN 2013 AS COMPARED TO 2012 DUE TO AN INCREASE IN REVENUES GENERATED FROM PROVIDING SERVICES TO UNINSURED PATIENTS

Form and Line Reference	Explanation
PART III, LINE 8	EVEN THOUGH THE AMOUNT REPORTED FOR MEDICARE ACTIVITY IN SECTION B REFLECTS A SURPLUS FOR THE YEAR, IT SHOULD BE NOTED THAT THE AMOUNT OF PATIENT CARE COSTS DO NOT INCLUDE MEDICARE NON-ALLOWABLE EXPENSES WHICH WERE INCURRED BY THE SYSTEM IN TREATING MEDICARE PATIENTS THE AMOUNTS REPORTED ON PART III, LINES 5-7 HAVE BEEN DETERMINED FROM THE INDIVIDUAL FACILITY COST REPORT FOR RAPIDES REGIONAL MEDICAL CENTER
PART III, LINE 9B	UNINSURED PATIENTS ARE FIRST SCREENED TO DETERMINE IF THEY ARE ELIGIBLE FOR FEDERAL OR STATE GOVERNMENTAL HEALTHCARE PROGRAMS (MEDICAID, MEDICARE) WHILE ELIGIBILITY IS BEING DETERMINED, THEIR ACCOUNT IS "PENDING", AND NO BILL IS SENT TO THE PATIENT IF THE PATIENT IS FOUND NOT TO BE ELIGIBLE FOR SUCH A PROGRAM, THEN THEY ARE SCREENED FOR FINANCIAL ASSISTANCE UNDER THE DISCOUNT CHARITY POLICY FOR PATIENTS RHS DOES NOT PURSUE COLLECTION OF ACCOUNTS WHILE IT ATTEMPTS TO DETERMINE WHETHER UNINSURED OR UNDERINSURED PATIENTS MEET ITS GUIDELINES TO QUALIFY FOR GOVERNMENT ASSISTANCE OR FREE CHARITY CARE UNDER ITS FINANCIAL ASSISTANCE POLICY (FAP) THE RAPIDES HEALTHCARE SYSTEM CHARITY CARE POLICY CLEARLY DESCRIBES IN DETAIL THE PROCESS THAT IS FOLLOWED IN DETERMINING WHETHER A PATIENT IS QUALIFIED FOR CHARITY CARE UNTIL IT IS DETERMINED WHETHER A PATIENT ACCOUNT QUALIFIES FOR CHARITY CARE, THE ACCOUNT IS HELD IN A "PENDING" STATE, AND THE ACCOUNT IS NOT BILLED ONCE AN ACCOUNT IS APPROVED AS FAP-ELIGIBLE BY AN AUTHORIZED MANAGER, THE APPROPRIATE CODE IS POSTED TO THE ACCOUNT IN THE BILLING SYSTEM, THE ACCOUNT IS WRITTEN OFF, AND NO BILL IS SENT TO THE PATIENT IF AN UNINSURED OR UNDERINSURED PATIENT DOES NOT COMPLETE A FINANCIAL ASSISTANCE APPLICATION INITIALLY, THEY WILL BE BILLED, HOWEVER, THEY WILL RECEIVE A FAP APPLICATION AND COMMUNICATION WITH THEIR BILLS ENCOURAGING THEM TO APPLY ACCOUNTS ARE NOT SUBMITTED FOR COLLECTION PRIOR TO 120 DAYS FOLLOWING THE ISSUANCE OF THE FIRST PATIENT BILLING PATIENTS HAVE A TOTAL OF 240 DAYS FOLLOWING THE FIRST BILLING TO SUBMIT AN APPLICATION FOR FINANCIAL ASSISTANCE, AND SHOULD ANY COLLECTION ACTION BE IN PROCESS AT THE TIME AN APPLICATION IS SUBMITTED, SUCH ACTION WILL BE SUSPENDED WHILE THE APPLICATION IS PROCESSED

Form and Line Reference	Explanation
PART VI, LINE 2	IN ADDITION TO THE FORMAL COMMUNITY HEALTH NEEDS ASSESSMENT DIRECTED BY THE RAPIDES HEALTHCARE SYSTEM COMMUNITY BENEFIT COMMITTEE, THERE ARE A NUMBER OF WAYS THAT RAPIDES REGIONAL MEDICAL CENTER (RRMC) STAFF AND TRUSTEES ASSESS THE HEALTH CARE NEEDS OF ITS COMMUNITY ON AN ONGOING BASIS. RRMC TRUSTEES, EXECUTIVES AND MANAGERS NETWORK EXTENSIVELY WITH OTHERS IN THE COMMUNITY WHO SERVE POPULATIONS IN NEED, SUCH AS OTHER HEALTH CARE PROVIDERS, LAW ENFORCEMENT AGENCIES AND GOVERNMENT OFFICIALS. KEY EXECUTIVES AND MANAGERS ALSO SERVE ON BOARDS OF NON-PROFIT ORGANIZATIONS IN THE COMMUNITY WHO PROVIDE SERVICES TO POPULATIONS IN NEED. IN LATE 2012, RRMC AND THE OTHER LARGE ACUTE-CARE HOSPITAL IN THE COMMUNITY (A CHRISTUS FACILITY) BEGAN DISCUSSIONS WITH THE LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS ABOUT THE DESIGN OF A NEW HEALTH CARE SAFETY-NET SOLUTION FOR THE CENTRAL LOUISIANA REGION IN RESPONSE TO THE LOUISIANA GOVERNOR'S DECISION TO DISMANTLE THE STATE'S LONG-STANDING CHARITY HOSPITAL SYSTEM AND MOVE THE RESPONSIBILITY FOR PROVISION OF ALL HEALTH CARE FOR THE INDIGENT TO THE PRIVATE SECTOR. RRMC DISCUSSIONS WERE SPECIFICALLY ABOUT THE TRANSITION OF SERVICES PREVIOUSLY PERFORMED AT THE STATE-RUN HUEY P. LONG HOSPITAL FACILITY IN PINEVILLE, IN RAPIDES PARISH. BEGINNING IN DECEMBER 2013, THE PROVISION OF ACUTE CARE MEDICAL, PSYCHIATRIC, URGENT CARE AND EMERGENCY SERVICES, AS WELL AS PRIMARY CARE AND SPECIALTY CLINIC SERVICES FOR THE UN- AND UNDERINSURED AND MEDICAID POPULATIONS OF CENTRAL LOUISIANA BEGAN TO TRANSITION TO RRMC AND CHRISTUS HOSPITAL ORGANIZATIONS. AS A DIRECT PROVIDER OF PRIMARY CARE SAFETY NET SERVICES TO THE INDIGENT POPULATION WITHIN THE SERVICE AREA, RRMC STAFF IS NOW INTERFACING MORE REGULARLY WITH THAT POPULATION AS THEY SEEK ROUTINE CARE AND IS ABLE TO BETTER ASSESS AND ANTICIPATE SPECIALTY AND ACUTE MEDICAL NEEDS AND OFFER BOTH PREVENTIVE AND ACUTE SERVICES.
PART VI, LINE 3	THE CHARITY CARE POLICY (FINANCIAL ASSISTANCE POLICY), A PLAIN LANGUAGE SUMMARY OF THE POLICY, AND A CHARITY CARE APPLICATION ARE ALL AVAILABLE ON THE HOSPITAL WEBSITE. A PLAIN LANGUAGE SUMMARY OF THE POLICY IS ALSO DISPLAYED FOR DISTRIBUTION IN ALL ADMITTING LOCATIONS IN THE HOSPITAL, ALL WAITING ROOMS AT THE HOSPITAL, THE EMERGENCY ROOM, URGENT CARE FACILITIES, HOSPITAL-OWNED PHYSICIAN OFFICES, AND HOSPITAL CLINICS. ALSO IN THESE LOCATIONS IS A SIGN READING "RAPIDES REGIONAL MEDICAL CENTER PROVIDES FREE (CHARITY) CARE TO PATIENTS WHO NEED HEALTHCARE, BUT ARE UNABLE TO PAY. ASK US FOR MORE INFORMATION." THERE IS ALSO A POSTED NOTICE TO PATIENTS CONTAINING THE CURRENT POVERTY GUIDELINES SO THAT THEY MAY SEE WHETHER THEY WOULD QUALIFY BASED ON THEIR INCOME. IT READS: "OUR FACILITY OFFERS A CHARITY PROGRAM TO THOSE THAT ARE <200% OF THE POVERTY GUIDELINES AS DEFINED BELOW [FPG CHART]. ASK THE REPRESENTATIVE FOR A COPY OF OUR PLAIN LANGUAGE FINANCIAL ASSISTANCE POLICY AND APPLICATION IF YOU ARE INTERESTED." AT ADMISSION, ALL PATIENTS RECEIVE THE CHARITY CARE POLICY, A PLAIN LANGUAGE SUMMARY AND A CHARITY CARE APPLICATION. AS SOON AS POSSIBLE AFTER ADMISSION, ALL UNINSURED PATIENTS ARE SCREENED BY AN ON-SITE THIRD-PARTY FIRM HIRED SPECIFICALLY TO DETERMINE IF PATIENTS MEET GOVERNMENT PROGRAM ELIGIBILITY CRITERIA. THE FIRM'S PERSONNEL ARE SPECIFICALLY TRAINED IN MEDICAID, MEDICARE AND OTHER GOVERNMENT PROGRAM ELIGIBILITY CRITERIA AND APPLICATION PROCEDURES. IF THE PATIENT MEETS PROGRAM ELIGIBILITY CRITERIA, THEN ASSISTANCE IS PROVIDED TO THE PATIENT FOR ENROLLMENT. IF THE PATIENT DOES NOT MEET PROGRAM QUALIFICATIONS, THE PATIENT IS ENCOURAGED TO APPLY FOR FINANCIAL ASSISTANCE. IF THE PATIENT DOES NOT COMPLETE A CHARITY CARE APPLICATION AT THE TIME OF SERVICE, HE RECEIVES A COPY OF THE POLICY, A PLAIN LANGUAGE SUMMARY, AND AN APPLICATION WITH HIS BILLS. HE IS ALSO REMINDED OF THE HOSPITAL'S CHARITY CARE POLICY IN ANY CONVERSATION WITH STAFF CONCERNING BILLING.

Form and Line Reference	Explanation
PART VI, LINE 4	RAPIDES REGIONAL MEDICAL CENTER'S PRIMARY COMMUNITY SERVED INCLUDES A THREE-PARISH (COUNTY) SERVICE AREA IN CENTRAL LOUISIANA, INCLUDING AVOYELLES, GRANT AND RAPIDES PARISHES THIS DEFINED COMMUNITY CONSISTS OF THE AREA COMPOSED OF THE LOWEST NUMBER OF CONTIGUOUS ZIP CODES FROM WHICH THE HOSPITAL DRAWS AT LEAST 75 PERCENT OF ITS INPATIENTS THE POPULATION OF THE HOSPITAL'S SERVICE AREA IS ESTIMATED AT 196,000 PEOPLE IT IS PREDOMINANTLY NON-HISPANIC AND WHITE (OVER TWO-THIRDS), BUT ALSO HAS SUBSTANTIAL AFRICAN AMERICAN POPULATION (NEARLY ONE-THIRD IN AVOYELLES AND RAPIDES PARISHES) AS THROUGHOUT THE STATE AND NATION, OUR POPULATION IS AGING, WITH MORE THAN 12% CURRENTLY AGE 65 AND OLDER THIS IS PROJECTED TO INCREASE IN COMING YEARS, AS IS THE NEED FOR SERVICES TO MEET THE HEALTH NEEDS OF THIS OLDER POPULATION MEDIAN HOUSEHOLD INCOMES (\$32,321 TO \$40,470) ARE BELOW THE STATE AVERAGE AND FAR BELOW THE US MEDIAN HOUSEHOLD INCOME OF \$52,762 ADDITIONALLY, 16 4%-23 9% OF OUR POPULATION REMAINS BELOW THE POVERTY LEVEL IN TERMS OF EDUCATION LEVEL, ONLY 70 2% OF AVOYELLES RESIDENTS ARE HIGH-SCHOOL GRADUATES, 77 1% OF GRANT RESIDENTS, AND 81 8% OF RAPIDES RESIDENTS NATIONALLY, 85 4% OF THE US POPULATION HOLDS A HIGH-SCHOOL DEGREE IN TERMS OF HIGHER EDUCATION, ONLY 9 6% OF AVOYELLES RESIDENTS HOLD BACHELOR DEGREES, 10 6% OF GRANT RESIDENTS, AND 18 5% OF RAPIDES RESIDENTS NATIONALLY, 28 2% OF THE POPULATION HOLDS A BACHELOR DEGREE ALL THREE PARISHES ARE DESIGNATED AS PRIMARY CARE HRSAS (HEALTH PROFESSIONAL SHORTAGE AREAS) THE THREE PARISHES ARE SERVED BY TWO TERTIARY-CARE, ACUTE-CARE HOSPITALS RPMC AND ONE OTHER ALSO IN THE REGION ARE A VETERAN'S ACUTE-CARE HOSPITAL, A PHYSICIAN-OWNED SURGICAL HOSPITAL, A RURAL CRITICAL-ACCESS FACILITY, AND ONE SMALL RURAL ACUTE-CARE FACILITY
PART VI, LINE 5	RAPIDES REGIONAL MEDICAL CENTER MAINTAINS AN OPEN MEDICAL STAFF, MEDICAL STAFF CREDENTIALING IS STRICTLY BASED UPON EDUCATION, CERTIFICATION AND OTHER GENERALLY ACCEPTED OBJECTIVE PROFESSIONAL REQUIREMENTS THE HOSPITAL MAINTAINS AN OPEN EMERGENCY ROOM, TREATING ALL PATIENTS REGARDLESS OF THEIR ABILITY TO PAY THE HOSPITAL ACCEPTS MEDICARE, MEDICAID AND OTHER GOVERNMENT-INSURED PATIENTS, DESPITE THE FACT THAT PAYMENTS FROM THESE PROGRAMS DO NOT NORMALLY REIMBURSE THE HOSPITAL FULLY FOR THE COSTS OF SERVICES RENDERED TO PATIENTS THE BOARD OF DIRECTORS OF THE RAPIDES HEALTHCARE SYSTEM (RHS) AND THE BOARD OF TRUSTEES OF RAPIDES REGIONAL MEDICAL CENTER BOTH INCLUDE MEMBERS OF THE LOCAL COMMUNITY, WHO ARE FOCUSED ON THE QUALITY OF HEALTHCARE AND AVAILABILITY OF MEDICAL SERVICES IN THEIR COMMUNITY THE RHS BOARD HAS A STANDING COMMUNITY BENEFIT COMMITTEE BEGINNING IN DECEMBER 2013, RAPIDES REGIONAL (UNDER A CONTRACT WITH THE STATE OF LOUISIANA AND IN PARTNERSHIP WITH CHRISTUS CABRINI HOSPITAL) PROVIDES ACUTE CARE MEDICAL, URGENT CARE AND EMERGENCY SERVICES, AS WELL AS PRIMARY CARE AND SPECIALTY CARE CLINIC SERVICES FOR THE UN- AND UNDERINSURED AND MEDICAID POPULATIONS OF CENTRAL LOUISIANA BOTH BOARDS OF DIRECTORS AND THE HOSPITAL MANAGEMENT TEAM ARE HEAVILY FOCUSED ON QUALITY AND SAFETY, AND THE HOSPITAL INVESTS IN SERVICES AND TECHNOLOGY NECESSARY TO PROVIDE THE BEST CARE POSSIBLE FOR PATIENTS FOR THE THIRD YEAR, U S NEWS AND WORLD REPORTS' 2012-2013 RANKINGS OF BEST HOSPITALS RECOGNIZED RAPIDES REGIONAL AS NO 3 IN LOUISIANA ADDITIONALLY, FOR THE THIRD YEAR, THE HOSPITAL WAS NAMED A TOP PERFORMER ON KEY QUALITY MEASURES FOR EXCELLENCE IN ACCOUNTABILITY MEASURE PERFORMANCE BY THE JOINT COMMISSION FOR THE SECOND YEAR, RAPIDES REGIONAL WAS RECOGNIZED IN MODERN HEALTHCARE MAGAZINE AS RECEIVING THE 2013/2014 CONSUMER CHOICE AWARD IN ITS MARKET BASED ON NATIONAL RESEARCH CORPORATION CONSUMER SURVEYS ON QUALITY HEALTHCARE SERVICES THE HOSPITAL RECEIVED THE 2013 HEALTHGRADES PATIENT SAFETY EXCELLENCE AWARD, WHICH RECOGNIZES HOSPITALS THAT ARE IN THE TOP 10% IN THE NATION FOR PATIENT SAFETY RAPIDES REGIONAL MEDICAL CENTER IS CERTIFIED AS LOUISIANA'S ONLY LEVEL II TRAUMA CENTER, WHICH BENEFITS CENTRAL LOUISIANA BY PROVIDING ACCESS TO TRAUMA CARE DURING THE CRITICAL FIRST 60 MINUTES FOLLOWING A TRAUMATIC INJURY, THEREBY REDUCING MORTALITY RATES FROM SUCH INJURIES IN THE REGION THE FACILITY IS ALSO CERTIFIED AS AN ADVANCED PRIMARY STROKE CENTER AND AN ACCREDITED CYCLE III CHEST PAIN CENTER THE ONLY ONES IN CENTRAL LOUISIANA RAPIDES WAS RECOGNIZED BY THE AMERICAN HEART ASSOCIATION AND THE AMERICAN STROKE ASSOCIATION WITH THE 2013 "SILVER PLUS GET WITH THE GUIDELINES" AWARD FOR ADHERENCE TO STROKE PERFORMANCE ACHIEVEMENT INDICATORS WITH AN ANNUAL PAYROLL OF \$22 2 MILLION (RAPIDES FOUNDATION 26% OWNERSHIP SHARE), RHS IS A SIGNIFICANT EMPLOYER IN ITS COMMUNITIES AND PAID \$508,163 (RAPIDES FOUNDATION 26% SHARE) IN PROPERTY TAXES DURING 2013 THAT SUPPORTED SUCH EFFORTS AS SCHOOLS, ROADS AND OTHER INFRASTRUCTURE PROJECTS IN ADDITION TO THE COMMUNITY BENEFIT PROVIDED BY RAPIDES HEALTHCARE SYSTEM, THE RAPIDES FOUNDATION'S 2013 PHILANTHROPIC ACTIVITIES PROVIDED AN ADDITIONAL \$9 6 MILLION IN COMMUNITY BENEFIT TO ITS NINE-PARISH SERVICE AREA THIS INCLUDED GRANTS OF \$6 5 MILLION AND DIRECT CHARITABLE ACTIVITIES OF \$3 1 MILLION IN THREE PRIMARY AREAS OF FOCUS HEALTHY PEOPLE, HEALTHY COMMUNITIES, AND EDUCATION

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
THE RAPIDES FOUNDATION

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Employer identification number
72-0423603

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

31

3

Enter total number of other organizations listed in the line 1 table

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	PRIOR TO FUNDING, GRANTEES DEVELOP AND SUBMIT FOR APPROVAL A WORK PLAN AND BUDGET FOR USE OF THE GRANT FUNDS AWARDED ON A QUARTERLY OR SEMI-ANNUAL BASIS, THE RAPIDES FOUNDATION (TRF)REQUIRES THAT GRANTEES SUBMIT NARRATIVE REPORTS AND BUDGET EXPENDITURE REPORTS, WHICH COMPARE ACTUAL ACTIVITIES COMPLETED TO APPROVED WORK PLANS AND ACTUAL EXPENDITURES TO APPROVED BUDGETS AT THE END OF THE GRANT TERM, THE GRANTEES ARE REQUIRED TO SUBMIT SIMILAR CUMULATIVE REPORTS DETAILING THE INTERVENTIONS COMPLETED, EVALUATING THEIR EFFECTIVENESS AND ITEMIZING EXPENSES COMPARED TO THE APPROVED BUDGETS UNSPENT FUNDS MUST BE REPAID TO THE FOUNDATION IN ACCORDANCE WITH WRITTEN GRANT AGREEMENTS GRANTEES MAY SUBMIT REQUESTS TO APPROVE BUDGET LINE ITEM CHANGES AS A PRACTICE TRF DOES NOT APPROVE WORK PLAN OR BUDGET CHANGES WHICH DIVERGE FROM THE ORIGINAL GRANT PURPOSE AND INTENT TRF, AT ITS EXPENSE AND OPTION, PERFORMS RANDOM, PERIODIC REVIEWS OF THE GRANTEES' INTERNAL RECORDS TO VERIFY THE ACCURACY OF REPORTING IF APPROPRIATE, REPAYMENT OF INAPPROPRIATE EXPENDITURES IS REQUESTED FAILURE TO REPORT EXPENDITURES OR TO REPAY UNSPENT OR INAPPROPRIATELY SPENT FUNDS WILL RESULT IN 1) WITHHOLDING OF ADDITIONAL PAYMENTS ON EXISTING GRANTS OR 2) PREVENT CONSIDERATION OF FUTURE GRANT REQUESTS LARGE GRANT INITIATIVES ARE EVALUATED BY TRF UTILIZING THIRD-PARTY EVALUATION FIRMS THE EVALUATIONS MEASURE THE EFFECTIVENESS OF THE CHOSEN INTERVENTION IN ACHIEVING THE INITIATIVE INTENDED OUTCOMES AS WELL AS THE EFFECTIVENESS OF THE INITIATIVE IMPLEMENTATION EVALUATIONS SERVE TO PROVIDE TRF FEEDBACK WHICH CAN BE UTILIZED TO IMPROVE PROGRAM IMPLEMENTATION
SCHEDULE I, PART II	DURING 2013, THE RAPIDES FOUNDATION RECORDED AMENDMENTS TO GRANTS IN THE AMOUNT OF \$622,697 THE AMENDMENTS LARGELY RELATED TO PRIOR YEAR GRANTS AND COULD NOT BE ALLOCATED AMONG CURRENT YEAR GRANTS THEREFORE, ON SCHEDULE I PART II, THERE ARE THREE NEGATIVE GRANT AMOUNTS THAT CORRESPOND TO THE AMOUNT OF AMENDMENTS PER EACH GRANT PURPOSE

Additional Data

Software ID:
Software Version:
EIN: 72-0423603
Name: THE RAPIDES FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLEN PARISH SCHOOL BOARD PO DRAWER C OBERLIN, LA 70655	72-6000020	GOVERNMENT AGENCY	145,800				INCREASE EDUCATION ATTAINMENT & ACHIEVEMENT, PREVENT TOBACCO USE & PROMOTE PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AVOYELLES PARISH SCHOOL BOARD 221 TUNICA DRIVE WEST MARKSVILLE,LA 71351	72-6000115	GOVERNMENT AGENCY	158,500				INCREASE EDUCATION ATTAINMENT & ACHIEVEMENT, PREVENT TOBACCO USE & PROMOTE PHYSICAL ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BATON ROUGE AIDS SOCIETY 4560 NORTH BLVD STE 100 BATON ROUGE, LA 70806	72-1436877	501(C)(3)	134,000				TEEN PREGNANCY PREVENTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAYOU DES GLAISES BAPTIST CHURCH 6434 HWY 451 MOREAUVILLE, LA 71355	72-0990530	501(C)(3)	8,000				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATAHOULA PARISH SCHOOL BOARD PO BOX 690 HARRISONBURG, LA 71340	72-6000268	GOVERNMENT AGENCY	95,500				INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT, PREVENT TOBACCO USE, PROMOTE PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENLA EDUCATIONAL COMMUNITY SERVICE FOUNDATION PO BOX 208 ALEXANDRIA,LA 71309	92-0188753	501(C)(3)	25,000				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL LA ECONOMIC DEVELOPMENT ALLIANCE PO BOX 465 ALEXANDRIA,LA 71309	65-1267691	501(C)(3)	884,750				INCREASE MEDIUM HOUSEHOLD INCOME AND TO RAISE STANDARD OF LIVING

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL LOUISIANA AHEC 2225 NORTH BOLTON AVENUE ALEXANDRIA,LA 71303	72-1204210	501(C)(3)	150,000				PREVENT TOBACCO USE AND PROMOTE QUITTING

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL LOUISIANA AIDS SUPPORT SERVICES 1785 JACKSON STREET ALEXANDRIA,LA 71301	72-1097079	501(C)(3)	9,287				TEEN PREGNANCY PREVENTION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
C M A P E X P R E S S 1101 FOURTH STREET SUITE 101A ALEXANDRIA,LA 71301	02-0751416	509(A)(1)	1,475,000				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY, IMPROVE ACCESS TO AND USE OF PRIMARY CARE, PROMOTE EARLY DETECTION OF CANCER AMONG ADULTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY COUNSELING AGENCY 1604 MURRAY STREET ALEXANDRIA, LA 71301	72-0677893	501(C)(3)	50,000				TO INCREASE CIVIC ENGAGEMENT AND SOCIAL CAPITAL NETWORKS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST PENTECOSTAL CHURCH OF ALEXANDRIA 2817 RAPIDES AVENUE ALEXANDRIA, LA 71301	72-0678432	501(C)(3)	8,000				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRACE CHRISTIAN SCHOOL 4900 JACKSON STREET ALEXANDRIA, LA 71301	72-6063680	501(C)(3)	7,000				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRANT PARISH SCHOOL BOARD P O BOX 208 COLFAX, LA 71417	72-6000494	GOVERNMENT AGENCY	125,100				PREVENT TOBACCO USE, PROMOTE PHYSICAL ACTIVITY, INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSE OF PRAISE FULL GOSPEL 2521 ENGLAND DRIVE ALEXANDRIA, LA 71301	90-0783748	501(C)(3)	25,000				PROMOTE INCREASED PHYSICAL ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LA COMMUNITY & TECH COLLEGE SYSTEM 265 SOUTH FOSTER DRIVE BATON ROUGE, LA 70806	20-5432053	GOVERNMENT AGENCY	200,000				IMPROVE ACCESS TO AND USE OF PRIMARY CARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA STATE UNIVERSITY ALEXANDRIA 8100 HWY 71 SOUTH ALEXANDRIA, LA 71302	72-6000848	501(C)(3)	277,428				IMPROVE ACCESS TO AND USE OF PRIMARY CARE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LASALLE PARISH SCHOOL BOARD P O DRAWER 90 JENA,LA 71342	72-6000656	GOVERNMENT AGENCY	86,900				INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATCHITOCHES PARISH SCHOOL BOARD PO BOX 16 NATCHITOCHES, LA 71458	72-0629556	GOVERNMENT AGENCY	184,500				PREVENT TOBACCO USE, PROMOTE PHYSICAL ACTIVITY, INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NSU COLLEGE OF NURSING 1800 LINE AVENUE SHREVEPORT,LA 71101	72-6000783	GOVERNMENT AGENCY	200,000				IMPROVE ACCESS TO AND USE OF PRIMARY CARE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAPIDES PARISH SCHOOL BOARD P O BOX 1230 ALEXANDRIA,LA 71309	72-6001133	GOVERNMENT AGENCY	446,500				INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT, PREVENT TOBACCO USE, PROMOTE PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHERN UNIVERSITY AGRICULTRAL RESEARCH & EXTENSION CENTER PO BOX 10010 BATON ROUGE,LA 70813	72-6000817	509(A)(1)	16,311				PROMOTE HEALTHY EATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWEST LOUISIANA AHEC 103 INDEPENDENCE BLVD LAFAYETTE, LA 70506	72-1191867	501(C)(3)	30,000				PREVENT TOBACCO USE AND PROMOTE QUITTING

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ORCHARD FOUNDATION 1101 FOURTH STREET SUITE 101C ALEXANDRIA,LA 71301	87-0730768	509(A)(1)	1,695,000				INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT, INCREASE MEDIUM HOUSEHOLD INCOME AND TO RAISE STANDARD OF LIVING

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TASTE OF SAINT JOHN 531 SAINT JOHN STREET MARKSVILLE, LA 71351	27-0561552	501(C)(3)	25,000				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOWN OF OLLA PO BOX 223 OLLA, LA 71465	72-6001034	GOVERNMENT AGENCY	25,000				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOWN OF TULLOS P O BOX 749 TULLOS, LA 71479	72-0568783	GOVERNMENT AGENCY	20,406				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VERNON PARISH SCHOOL BOARD 201 BELVIEW ROAD LEESVILLE, LA 71446	72-6001443	GOVERNMENT AGENCY	221,500				INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT, PREVENT TOBACCO USE, PROMOTE PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VILLAGE OF MOREAUVILLE P O BOX 57 MOREAUVILLE,LA 71355	72-0720280	GOVERNMENT AGENCY	25,000				PREVENT TOBACCO USE, PROMOTE PHYSICAL ACTIVITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINN PARISH SCHOOL BOARD P O BOX 430 WINNFIELD,LA 71483	72-6001620	GOVERNMENT AGENCY	88,200				INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF CENTRAL LOUISIANA 724 SCOTT STREET ALEXANDRIA, LA 71301	72-0408980	501(C)(3)	50,000				TO INCREASE CIVIC ENGAGEMENT AND SOCIAL CAPITAL NETWORKS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VARIOUS 2013 GRANT AMENDMENTS			-179,336				INCREASE EDUCATIONAL ATTAINMENT & ACHIEVEMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VARIOUS 2013 GRANT AMENDMENTS			-211,990				TO INCREASE CIVIC ENGAGEMENT AND SOCIAL CAPITAL NETWORKS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VARIOUS 2013 GRANT AMENDMENTS			-231,371				PROMOTE EATING HEALTHY & INCREASED PHYSICAL ACTIVITY

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
THE RAPIDES FOUNDATION

Employer identification number
72-0423603

Part I

Questions Regarding Compensation

	Yes	No
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 idemnification 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 in 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	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☒ 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?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
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	4c	No
Only 501(c)(3) and 501(c)(4) organizations only 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?	5a	No
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b	No
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?	6a	No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6b	No
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	7	No
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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)JOSEPH R ROSIER JR PRESIDENT & CEO	(i)	299,064	30,000	0	25,500	7,053	361,617	0
	(ii)	0	0	0	0	0	0	0
(2)KATHLEEN F NOLEN DIR, ADMIN	(i)	181,175	0	0	18,118	3,240	202,533	0
	(ii)	0	0	0	0	0	0	0
(3)ANNETTE BEUCHLER DIR, PROG & COMM	(i)	157,034	0	0	15,703	6,930	179,667	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization THE RAPIDES FOUNDATION	Employer identification number 72-0423603
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Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE RAPIDES FOUNDATION'S TRUSTEES ARE THE MEMBERS OF THE ORGANIZATION

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE RAPIDES FOUNDATION'S TRUSTEES, WHO ARE THE MEMBERS OF THE ORGANIZATION, HOLD AN ANNUAL MEETING EACH DECEMBER TO ELECT NEW MEMBERS OF THE ORGANIZATION. EACH TRUSTEE, OR MEMBER, IS ELECTED FOR A TERM OF THREE YEARS AND MAY BE RE-ELECTED FOR ONE ADDITIONAL TERM.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	A FINAL COPY OF THE FORM 990 IS FURNISHED TO THE AUDIT COMMITTEE OF THE RAPIDES FOUNDATION BOARD (TRF) 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 ALL TRF BOARD MEMBERS RECEIVE THE FINAL FORM 990 COPY WHEN IT IS SENT TO THE AUDIT COMMITTEE, AND ALL BOARD MEMBERS ARE INVITED TO ATTEND THE AUDIT COMMITTEE MEETING TO REVIEW THE FORM IN DETAIL

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE RAPIDES FOUNDATION 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 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 TRUSTEE BOARD AND COMMITTEE MEETING, BECAUSE THE FIRST AGENDA ITEM IS ONE IN WHICH THE MEETING CHAIRMAN ASKS TRUSTEES TO DISCLOSE ANY POTENTIAL CONFLICTS WITH LISTED AGENDA ITEMS A TRUSTEE 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 TRUSTEES DETERMINE WHETHER A CONFLICT ACTUALLY EXISTS IF A CONFLICT IS DETERMINED TO EXIST, THEN THE CONFLICTED TRUSTEE IS NOT ALLOWED TO BE PRESENT DURING BOARD DISCUSSION NOR VOTE ON THE ISSUE CREATING THE CONFLICT EACH YEAR, TRUSTEES AND KEY EMPLOYEES ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE TO DISCLOSE BUSINESS AND PERSONAL RELATIONSHIPS THAT COULD BE POTENTIAL CONFLICTS OF INTEREST

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE RAPIDES FOUNDATION BOARD COMPENSATION COMMITTEE, WHICH IS COMPOSED OF THE INDEPENDENT MEMBERS OF ITS EXECUTIVE COMMITTEE, PERIODICALLY ENGAGES A THIRD-PARTY COMPENSATION CONSULTANT TO PROVIDE MARKET INFORMATION CONCERNING PAY AND BENEFITS AND MAKE COMPENSATION STRUCTURE RECOMMENDATIONS FOR ALL ORGANIZATION POSITIONS. THE CONSULTANT IS PROVIDED WITH JOB DESCRIPTIONS FOR ALL 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. IN INTERIM YEARS, INCREASES IN PAY RANGES ARE RECOMMENDED TO THE BOARD BY MANAGEMENT BASED ON SURVEY INFORMATION OF SIMILAR ORGANIZATIONS. THE CEO AND TWO DIRECTORS OF THE ORGANIZATION ARE CONSIDERED KEY EMPLOYEES. THE CEO RECOMMENDS THE PAY FOR THE TWO DIRECTORS AND A SALARY BUDGET FOR THE REMAINING EMPLOYEES TO THE COMPENSATION COMMITTEE FOR APPROVAL. THE COMPENSATION COMMITTEE INDEPENDENTLY DISCUSSES ITS RECOMMENDATIONS FOR CEO PAY. MINUTES OF ALL MEETINGS ARE RECORDED AND MAINTAINED.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE RAPIDES FOUNDATION MISSION, PHILANTHROPIC OBJECTIVES, GUIDING ORGANIZATIONAL OBJECTIVES, STAFF CODE OF ETHICS AND CONDUCT, TRUSTEE CODE OF ETHICS AND CONDUCT, AND ANNUAL REPORT (INCLUDING FINANCIAL STATEMENTS) ARE ALL AVAILABLE ON THE ORGANIZATIONS WEBSITE AT WWW.RAPIDESFOUNDATION.ORG

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
THE RAPIDES FOUNDATION

Employer identification number
72-0423603

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on 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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) CMAP EXPRESS 1101 FOURTH STREET ALEXANDRIA, LA 71301 02-0751416	HEALTHCARE ACCESS	LA	501(C)(3)	LINE 11A, I	THE RAPIDES FOUNDATION		No
(2) THE ORCHARD FOUNDATION 1101 FOURTH STREET ALEXANDRIA, LA 71301 87-0730768	EDUCATION	LA	501(C)(3)	LINE 11A, I	THE RAPIDES FOUNDATION		No

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on 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) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) RAPIDES HEALTHCARE SYSTEM LLC 211 4TH STREET ALEXANDRIA, LA 71301 61-1267229	HOSPITAL	LA	N/A	RELATED	6,260,731	39,440,756		No			No	26 000 %

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on 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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, 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 related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

Yes

1g

No

1h

No

1i

No

1j

Yes

1k

No

1l

No

1m

Yes

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE ORCHARD FOUNDATION	B	1,393,233	GRANT AGREEMENT
(2) THE ORCHARD FOUNDATION	J	345,747	COST ACCOUNTING SYSTEM
(3) CMAP EXPRESS	B	1,086,503	GRANT AGREEMENT
(4) CMAP EXPRESS	J	709,602	COST ACCOUNTING SYSTEM
(5) CMAP EXPRESS	M	47,992	WRITTEN CONTRACT
(6) RAPIDES HEALTHCARE SYSTEM	F	7,259,089	LETTER AGREEMENT

Schedule R (Form 990) 2013

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 72-0423603

Name: THE RAPIDES FOUNDATION

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
THE ORCHARD FOUNDATION	B	1,393,233	GRANT AGREEMENT
THE ORCHARD FOUNDATION	J	345,747	COST ACCOUNTING SYSTEM
CMAP EXPRESS	B	1,086,503	GRANT AGREEMENT
CMAP EXPRESS	J	709,602	COST ACCOUNTING SYSTEM
CMAP EXPRESS	M	47,992	WRITTEN CONTRACT
RAPIDES HEALTHCARE SYSTEM	F	7,259,089	LETTER AGREEMENT

**THE RAPIDES FOUNDATION
AND SUBSIDIARIES
ALEXANDRIA, LOUISIANA
DECEMBER 31, 2013 AND 2012**

THE RAPIDES FOUNDATION AND SUBSIDIARIES

ALEXANDRIA, LOUISIANA

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AUDITED FINANCIAL STATEMENTS

May __, 2014

The Board of Directors
The Rapides Foundation
Alexandria, Louisiana

Independent Auditor's Report

Report on the Financial Statements

We have audited the accompanying consolidated financial statements of The Rapides Foundation and Subsidiaries, which comprise the consolidated statements of financial position as of December 31, 2013 and 2012, and the related consolidated statements of activities, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of The Rapides Foundation and Subsidiaries as of December 31, 2013 and 2012, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Other Information

Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements taken as a whole. The consolidating information on pages 16 through 18 is presented for purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the consolidated financial statements taken as a whole.

Shreveport, Louisiana

THE RAPIDES FOUNDATION AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2013 AND 2012

<u>ASSETS</u>	<u>2013</u>	<u>2012</u>
Cash and cash equivalents-Note 4	6,330,201	3,030,109
Marketable securities-Note 5	202,523,424	181,524,125
Investments at cost plus equity in undistributed earnings-Note 6	37,187,588	39,961,544
Grants receivable	135,057	-
Accounts receivable	87,232	61,507
Prepaid expenses	41,466	38,223
Property and equipment, net-Note 8	1,860,663	1,993,566
Assets whose use is limited-Note 9	<u>65,645</u>	<u>104,295</u>
Total assets	<u>248,231,276</u>	<u>226,713,369</u>
 <u>LIABILITIES AND NET ASSETS</u>		
<u>Liabilities:</u>		
Accounts payable	285,196	431,586
Payroll taxes and benefits	154,456	164,145
Grants payable-Note 10	2,356,578	2,098,147
Annuity obligations payable-Note 11	<u>65,645</u>	<u>104,295</u>
Total liabilities	2,861,875	2,798,173
 <u>Net assets:</u>		
Unrestricted	243,836,386	222,908,902
Temporarily restricted-Note 3	<u>1,533,015</u>	<u>1,006,294</u>
Total net assets	<u>245,369,401</u>	<u>223,915,196</u>
Total liabilities and net assets	<u>248,231,276</u>	<u>226,713,369</u>

The accompanying notes are an integral part of the consolidated financial statements.

THE RAPIDES FOUNDATION AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF ACTIVITIES
FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012

	2013		
	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
<u>Revenues, gains, and other support:</u>			
Net investment income-Note 14	31,836,169	62	31,836,231
Contributions	<u>326,334</u>	<u>627,740</u>	<u>954,074</u>
Total revenues, gains, and other support	32,162,503	627,802	32,790,305
<u>Net assets released from restrictions</u>	<u>101,081</u>	<u>(101,081)</u>	<u>-</u>
Total revenues, gains, and other support	32,263,584	526,721	32,790,305
<u>Program expenses:</u>			
Grants	4,453,597	-	4,453,597
Direct charitable activities	4,755,240	-	4,755,240
Program development	<u>692,106</u>	<u>-</u>	<u>692,106</u>
Total program expenses	9,900,943	-	9,900,943
<u>Administrative expenses</u>	<u>1,435,157</u>	<u>-</u>	<u>1,435,157</u>
<u>Change in net assets</u>	20,927,484	526,721	21,454,205
<u>Net assets at beginning of year</u>	<u>222,908,902</u>	<u>1,006,294</u>	<u>223,915,196</u>
<u>Net assets at end of year</u>	<u>243,836,386</u>	<u>1,533,015</u>	<u>245,369,401</u>

The accompanying notes are an integral part of the consolidated financial statements

2012		
<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
24,492,150	91	24,492,241
<u>221,950</u>	<u>382,984</u>	<u>604,934</u>
24,714,100	383,075	25,097,175
<u>60,286</u>	<u>(60,286)</u>	<u>-</u>
24,774,386	322,789	25,097,175
5,235,361	-	5,235,361
4,212,005	-	4,212,005
<u>575,928</u>	<u>-</u>	<u>575,928</u>
10,023,294	-	10,023,294
<u>1,408,466</u>	<u>-</u>	<u>1,408,466</u>
13,342,626	322,789	13,665,415
<u>209,566,276</u>	<u>683,505</u>	<u>210,249,781</u>
<u>222,908,902</u>	<u>1,006,294</u>	<u>223,915,196</u>

THE RAPIDES FOUNDATION AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012

	<u>2013</u>	<u>2012</u>
<u>Cash flows from operating activities:</u>		
Change in net assets	21,454,205	13,665,415
Adjustments to reconcile change in net assets to net cash (used) by operating activities:		
Depreciation	164,979	181,049
Net realized and unrealized (gains)	(25,320,417)	(15,958,785)
Equity in earnings of investment in closely held entities	(4,529,132)	(6,287,696)
<u>Changes in operating assets and liabilities:</u>		
Accounts receivable	(25,725)	(11,742)
Grants receivable	(135,057)	-
Prepaid expenses	(3,243)	11,122
Accounts payable	(146,390)	(50,446)
Payroll taxes and benefits payable	(9,689)	19,257
Grants payable	<u>258,431</u>	<u>620,420</u>
Net cash (used) by operating activities	(8,292,038)	(7,811,406)
<u>Cash flows from investing activities:</u>		
Purchases of property and equipment	(32,076)	(90,108)
Purchases of marketable securities	(24,400,612)	(95,644,340)
Proceeds from sale of marketable securities	28,721,730	93,164,636
Distributions from investment reported under the equity method	<u>7,303,088</u>	<u>5,949,882</u>
Net cash provided by investing activities	<u>11,592,130</u>	<u>3,380,070</u>
<u>Net increase (decrease) in cash and cash equivalents</u>	3,300,092	(4,431,336)
<u>Cash and cash equivalents at beginning of the year</u>	<u>3,030,109</u>	<u>7,461,445</u>
<u>Cash and cash equivalents at end of the year</u>	<u><u>6,330,201</u></u>	<u><u>3,030,109</u></u>

The accompanying notes are an integral part of the consolidated financial statements.

THE RAPIDES FOUNDATION AND SUBSIDIARIES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

DECEMBER 31, 2013 AND 2012

1. Organization and Significant Accounting Policies

Organization

On September 1, 1994, Rapides Regional Medical Center, a Louisiana nonprofit corporation, amended its articles of incorporation and changed its corporate name to the "Rapides Foundation" (the "Foundation"). At that time, it also contributed certain assets and liabilities related to its healthcare operations to Central Louisiana Healthcare System Limited Partnership, doing business as Columbia Regional Healthcare System (the "Partnership"), which continued those healthcare operations under the trade name "Rapides Regional Medical Center."

Transfer of those healthcare operations was accomplished through execution of a "Contribution Agreement" between and among the Foundation, Columbia/HCA Healthcare Corporation ("Columbia/HCA") and a number of corporations controlled by Columbia/HCA. As a result of that agreement, the Foundation contributed certain assets (principally all of the Foundation's accounts and notes receivable, inventory, prepaid expenses, and property and equipment as well as certain common stock holdings) to the Partnership, and certain liabilities of the Foundation (principally accounts payable and accrued expenses) were assumed by the Partnership.

In exchange, the Foundation received \$60,563,578 in cash, a 50% limited partnership interest in the Partnership, and the right to "put" all or part of its limited partnership interest for \$74,600,000 during the next seven (7) years, should the Foundation desire to sell that interest. That Base Purchase Price increased by the percentage increase in the Partnership's working capital after September 1, 1994, but not less than 6% per year, compounded quarterly and reduced by cash distributions to the Foundation (but in no event reduced below the Base Purchase Price). The purchase price for any partial sale of partnership interest was proportionate to the total consideration otherwise calculated.

On May 31, 1997, in connection with the Partnership's sale of Ville Platte Medical Center and Columbia/HCA's sale of Savoy Medical Center to the Partnership, Columbia/HCA and the Foundation entered into an agreement to adjust and establish both a new Base Purchase Price and "put" working capital base. Accordingly, the Base Purchase Price amount was increased by \$6,445,000, and the Base Line Working Capital for purposes of measuring the increase from August 31, 1994, was set at \$13,744,183.

The Contribution Agreement and the Partnership Agreement executed pursuant thereto provided for the Foundation to appoint one-half (½) of the members to the Partnership's governing board, which approved capital expenditures, sales in excess of 10% of total Partnership assets, new debt in excess of \$10 million, discontinuation of any services at Rapides Hospital, selection of the Partnership's CEO, entry into other Partnership or business combinations, and declaration of cash distributions to the partners.

In addition, the Partnership was required to operate its hospitals in accordance with Revenue Ruling 69-545 (the basic community benefit standard for charitable tax exempt health care organizations) and to continue providing charity care and community support for civic and cultural matters at pre-venture levels.

1. Organization and Significant Accounting Policies (Continued)

On February 28, 1998, Columbia/HCA and the Foundation reorganized by merging the Partnership into a newly formed Limited Liability Company, Central Louisiana Healthcare System, LLC, whose name was later changed to Rapides Healthcare System, LLC (the "LLC"). Columbia/HCA later changed its name to HCA, Inc. (HCA). Under its Operating Agreement, the LLC is managed by a 15 member board of governors. One-third of the members are appointed by HCA, the Foundation and the members of the medical staffs of the LLC hospitals, respectively. Certain major transactions (as identified above for the Partnership's governing board) require approval of the owners of the LLC (HCA and the Foundation).

The LLC carried forward and assumed the Partnership's obligation to operate its hospitals in accordance with Revenue Ruling 69-545 and to continue providing charity care and to support community, civic, charitable and cultural activities at pre-venture levels.

In addition to its healthcare operations, the Foundation develops public initiatives and makes grants to public agencies or nonprofit organizations that are exempt under Section 501(c)(3) of the Internal Revenue Code (and not a private foundation as described in Section 509(a) of the code). It makes grants in the following areas of interest: healthy people, education, and healthy communities.

Significant Accounting Policies

Basis of accounting

The Foundation's financial statements are presented on the accrual basis of accounting in accordance with generally accepted accounting principles of the United States of America. Accordingly, they reflect revenues and related receivables when earned rather than when received and expenses and related payables when incurred rather than when paid.

Financial statement presentation

The Foundation is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets, based upon the existence or absence of donor-imposed restrictions, as follows:

Unrestricted net assets - Net assets that are not subject to donor-imposed stipulations. Some unrestricted net assets may be designated by the Board for specific purposes.

Temporarily restricted net assets - Net assets subject to donor-imposed stipulations that may or will be met by actions of the Foundation, and/or by the passage of time.

Permanently restricted net assets - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Foundation. Generally, donors permit all or part of the income earned on these assets to be used for general or specific purposes.

Consolidation

The consolidated financial statements include the accounts of The Rapides Foundation and its Subsidiaries, CMAP Express and The Orchard Foundation. All significant intercompany accounts and transactions have been eliminated in consolidation.

Cash and cash equivalents

It is the Foundation's policy to define all highly liquid investments with an initial maturity of three months or less as "cash and cash equivalents."

1. Organization and Significant Accounting Policies (Continued)

Contributions

Contributions are recognized when the donor makes a promise to give to the Foundation that is, in substance, unconditional. All contributions are considered to be available for unrestricted use unless specifically restricted by a donor. Amounts received that are designated for future periods or restricted by the donor for specific purposes are reported as temporarily restricted or permanently restricted support that increases those net asset classes. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as released from restrictions.

Contributions of property and equipment are recorded at their estimated fair value at the date of the donation in accordance with generally accepted accounting principles in the United States. They are reported as increases in unrestricted net assets unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as restricted contributions. Absent donor stipulations regarding how long those donated assets must be maintained, the Foundation reports expirations or donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Foundation reclassifies temporarily restricted net assets to unrestricted net assets at that time.

Depreciation

The cost of purchased property and equipment or the fair market value of donations is depreciated over the estimated useful lives of the assets using the straight-line method. Depreciation is recorded for the number of months in use during the year of acquisition or disposition. It is the policy of the Foundation to capitalize property and equipment over \$1,000.

Income and other taxes

The Foundation and its subsidiaries are nonprofit organizations and are 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 consolidated financial statements, but each entity is required to file an annual information tax return. They are also required to review various tax positions they have taken with respect to their exempt status and determine whether in fact they are tax exempt entities. The Foundation and its subsidiaries must also consider whether they have nexus in jurisdictions in which they have income and whether a tax return is required in those jurisdictions. In addition, as tax exempt entities, each entity must assess whether it has any tax positions associated with unrelated business income subject to income tax. The entities do not expect their positions to change significantly over the next twelve months. Any penalties related to late filing or other requirements would be recognized as penalties expense in the entities's accounting records.

The Foundation and its subsidiaries each file U.S. federal Form 990 for informational purposes. Their federal income tax returns for the tax years 2010 and beyond remain subject to examination by the Internal Revenue Service.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reported period. Actual results could differ from those estimates.

2. Income Tax Status

Since its initial incorporation in 1924, the Foundation has been exempt from federal and state income tax under Section 501(c)(3) of the Internal Revenue Code as a public charity operating a hospital. Due to its contribution of its hospital operations to the Partnership and its new grant making activities, it requested a private letter ruling from the Internal Revenue Service to confirm the continuation of its public charity status. The Service declined to issue such a ruling due to the number of similar transactions and issued a Revenue Ruling (Rev. Rul. 98-15) defining the requirements for whole hospital joint ventures such as Rapides Health Services, LLC. The Service declined the Foundation's request to examine its operations and enter into a closing agreement.

After Rev. Rul. 98-15, two court cases focused on the control issue identified by the ruling as determinative of whether the joint venture jeopardized the exempt status of the exempt organization. One of these, *St. David's Health Care System, Inc. v. United States*, involved facts very similar to those present in the Foundation's ownership of the LLC, and was a victory for the exempt organization whose status had been challenged. Counsel for the Foundation has been at all relevant times and remains of the opinion that any challenge to the Foundation's exempt status would be similarly decided. This opinion is bolstered by Rev. Rul. 2004-51, which, while addressing ancillary activity joint ventures, represents an acknowledgment by the Service that sufficient control may be maintained by the exempt partner in such a venture even though ownership and governance were shared 50-50 with the for-profit venturer. It should be noted that even if the Foundation's public charity status should not continue, the Foundation believes that it would continue to be exempt from income tax under Section 501(c)(3) of the Code as a private foundation.

Private foundations are subject to more restriction under the Code than are public charities. These restrictions include statutory prohibitions against self-dealing, excess business holdings, jeopardy investments, and taxable expenditures. In addition, private foundations are subject to an excise tax on their net investment income and are required to make annual distributions of five percent (5%) of the average market value of their non-charitable-use assets for charitable, educational, scientific, and similar purposes.

Non-charitable-use assets are assets that are not used or held for use directly in carrying on the organization's exempt purpose; they include assets held for investment and the production of investment income. Private foundations are required to publish a notice that their annual reports are available for inspection.

These financial statements do not consider the effects of a possible retroactive determination by the Internal Revenue Service that the Foundation is not exempt from taxation or that it is a nonprofit private foundation. Such effects could include income taxes on its earnings, a requirement that it divest itself of a portion of the LLC, excise taxes on net investment income and various penalties.

The Contribution Agreement requires that the Partnership, and the Operating Agreement of the LLC requires that the LLC, operate in a fashion so as not to adversely affect the Foundation's tax-exempt status, and support community, civic, charitable and cultural activities at a level at least equal to that of the Rapides Regional Medical Center in the year ended June 30, 1994. It also calls for it to provide \$2.8 million of uncompensated care annually to the Alexandria, Louisiana community, as well as continue historic levels in the other communities where it has hospitals.

3. Temporarily Restricted Funds

Temporarily restricted net assets consisted of funds received for the following programs as of December 31:

3. Temporarily Restricted Funds (Continued)

	<u>2013</u>	<u>2012</u>
Nursing Coalition	135,353	-
Diet and Physical Exercise	391,985	87,835
Cancer Screening	83,846	64,900
Kagan Leadership	-	183,679
CTE CC	180,000	100,000
Construction Technology	4,187	5,924
Work Ready Network	383,866	329,726
Welding	1,803	-
Rapides Public Education	60,947	60,885
Science, Technology, Engineering & Math Initiative		
Career and Technical Education	160,031	8,425
CART Scholar's Project	<u>130,997</u>	<u>164,920</u>
Total temporarily restricted net assets	<u>1,533,015</u>	<u>1,006,294</u>

4. Financial Instruments and Cash

The Foundation's financial instruments include cash and investments. It estimates that fair value of all financial instruments at December 31, 2013 and 2012, does not materially differ from aggregate carrying values of its financial instruments recorded in the accompanying statements of financial position. The estimated fair value of investments has been determined by the Foundation using available market information. Fair values of all other financial instruments approximate their carrying values.

At times throughout the year, the Foundation may maintain certain bank accounts in excess of federally insured limits. The risk is mitigated by maintaining deposits in only well capitalized financial institutions.

5. Marketable Securities

Marketable securities are reported in these financial statements at fair market value.

	<u>Market</u>	<u>Cost</u>	<u>Market Over (Under) Cost</u>
Year Ended December 31, 2013			
Investment cash	3,268,160	3,268,160	-
Domestic equity	111,710,940	86,426,464	25,284,476
International equity	27,703,382	21,343,643	6,359,739
Domestic fixed income	31,103,428	29,284,880	1,818,548
Equity real estate	9,923,419	7,155,640	2,767,779
Alternative investments	<u>18,814,095</u>	<u>16,246,599</u>	<u>2,567,496</u>
	<u>202,523,424</u>	<u>163,725,386</u>	<u>38,798,038</u>
Year Ended December 31, 2012			
Investment cash	2,143,949	2,143,949	-
Domestic equity	96,202,723	91,930,675	4,272,048
International equity	23,916,619	21,078,536	2,838,083
Domestic fixed income	31,736,987	27,536,183	4,200,804
Equity real estate	9,682,931	6,736,640	2,946,291
Alternative investments	<u>17,840,916</u>	<u>16,859,624</u>	<u>981,292</u>
	<u>181,524,125</u>	<u>166,285,607</u>	<u>15,238,518</u>

6. **Investments at Cost Plus Equity in Undistributed Earnings**

A summary of closely held healthcare investments follows:

	<u>2013</u>	<u>2012</u>
30.25% interest in Central Louisiana Rehab Associates, L.P. reported under the equity method	444,000	444,000
Rapides Healthcare System, LLC, 2,810 units, 26% interest, reported under the equity method	<u>36,743,588</u>	<u>39,517,544</u>
	<u>37,187,588</u>	<u>39,961,544</u>

A summary of equity in earnings from closely held healthcare investments is provided below:

	<u>2013</u>	<u>2012</u>
Central Louisiana Rehab Associates, L.P.	44,000	44,000
Rapides Healthcare System, LLC	<u>4,485,132</u>	<u>6,243,696</u>
	<u>4,529,132</u>	<u>6,287,696</u>

7. **Fair Value of Financial Instruments**

The Foundation adopted FASB Accounting Standards Codification Topic 820, "*Fair Value Measurements*" (Topic 820). Topic 820 requires disclosures that stratify balance sheet amounts measured at fair value based on the inputs used to derive fair value measurements. These strata included:

- Level 1 valuations, where the valuation is based on quoted market prices for identical assets or liabilities traded in active markets (which include exchanges and over-the-counter markets with sufficient volume),
- Level 2 valuations, where the valuation is based on quoted market prices for similar instruments traded in active markets, quoted prices for identical or similar instruments in markets that are not active and model-based valuation techniques for which all significant assumptions are observable in the market, and
- Level 3 valuations, where the valuation is generated from model-based techniques that use significant assumptions not observable in the market, but observable based on Foundation-specific data. These unobservable assumptions reflect the Foundation's own estimates for assumptions that market participants would use in pricing the asset or liability. Valuation techniques typically include option pricing models, discounted cash flow models and similar techniques, but may also include the use of market prices of assets or liabilities that are not directly comparable to the subject asset or liability.

Fair values of assets and liabilities measured on a recurring basis at December 31, 2013 and 2012 are as follows:

7. Fair Value of Financial Instruments (Continued)

	December 31, 2013			
	Level 1	Level 2	Level 3	Total
Investment Cash	-	3,268,160	-	3,268,160
Equities:				
Common stock	21,217,696	-	-	21,217,696
Mutual funds	58,988,178	78,439,366	-	137,427,544
Depository receipts	344,444	-	-	344,444
Limited partnership	-	9,162,152	-	9,162,152
Total equities	80,550,318	87,601,518	-	168,151,836
Fixed income:				
CMO	-	760,204	-	760,204
Corporate bonds	7,883,431	12,268,255	-	20,151,686
FHLMC	-	18,687	-	18,687
FNMA	-	10,256	-	10,256
GNMA I	-	7,806	-	7,806
GNMA II	-	16,408	-	16,408
Government issues	-	9,365,051	-	9,365,051
Other asset backed	-	210,063	-	210,063
Near cash	-	563,267	-	563,267
Total fixed income	7,883,431	23,219,997	-	31,103,428
Totals	<u>88,433,749</u>	<u>114,089,675</u>	<u>-</u>	<u>202,523,424</u>

	December 31, 2012			
	Level 1	Level 2	Level 3	Total
Investment Cash	-	2,143,949	-	2,143,949
Equities:				
Common stock	16,755,501	-	-	16,755,501
Mutual funds	55,565,930	66,906,356	-	122,472,286
Depository receipts	84,570	-	-	84,570
Limited partnership	-	8,330,832	-	8,330,832
Total equities	72,406,001	75,237,188	-	147,643,189
Fixed income:				
CMO	-	902,443	-	902,443
Corporate bonds	8,806,253	10,536,460	-	19,342,713
FHLMC	-	44,767	-	44,767
FNMA	-	14,302	-	14,302
GNMA I	-	8,716	-	8,716
GNMA II	-	21,852	-	21,852
Government issues	-	10,502,125	-	10,502,125
Other asset backed	-	10,233	-	10,233
Near cash	-	889,836	-	889,836
Total fixed income	8,806,253	22,930,734	-	31,736,987
Totals	<u>81,212,254</u>	<u>100,311,871</u>	<u>-</u>	<u>181,524,125</u>

8. **Property and Equipment**

A summary of property and equipment follows.

	<u>2013</u>	<u>2012</u>
Land	59,900	59,900
Furniture and equipment	802,003	796,312
Building	<u>2,666,819</u>	<u>2,666,819</u>
	3,528,722	3,523,031
Less-accumulated depreciation	<u>(1,668,059)</u>	<u>(1,529,465)</u>
	<u>1,860,663</u>	<u>1,993,566</u>

Depreciation expense was \$164,979 and \$181,049 for the years ended December 31, 2013 and 2012.

9. **Assets Whose Use is Limited**

An analysis of assets whose use is limited follows:

	<u>2013</u>	<u>2012</u>
Retired executive compensation	<u>65,645</u>	<u>104,295</u>

10. **Grants Payable**

Grants payable are accrued after all approvals have been given, a grant agreement has been executed and all contingencies, if any, have been met.

	<u>Net Award</u>	<u>Paid</u>	<u>Payable December 31</u>
2013	<u>3,411,285</u>	<u>3,402,855</u>	<u>2,356,578</u>
2012	<u>4,681,018</u>	<u>4,060,598</u>	<u>2,098,147</u>

Grants awarded with contingencies not met (and not recorded in the financial statements) at December 31, were as follows:

2013	1,755,750
2012	1,023,809

11. **Annuity Obligations**

The Foundation has annuity obligations to an executive who retired prior to 1994 in the amount of \$3,940 per month (including interest computed as 9.9%). At December 31, 2013, eighteen (18) payments remained. See Note 9 for limited use assets that have been designated for payment of this obligation.

12. **Benefit Plans**

Retirement

The Foundation has a tax deferred annuity plan (Internal Revenue Code Section 403(b)) that covers all employees working over 1,000 hours per year. Retirement costs are allocated between administrative and program expenses, which are accrued and funded on a current basis. The plan does not provide for any prior service cost. Retirement contributions were \$226,132 and \$214,372 for the years ended December 31, 2013 and 2012.

12. Benefit Plans (Continued)

Health Insurance

The Foundation provides a health reimbursement account and funds a portion of medical and hospital insurance coverage to its employees and their dependents.

Compensated Absences

Employees of the Foundation are entitled to paid vacation and paid sick days depending on their length of service.

Since sick days are not vested, no related liability has been recorded in the accompanying financial statements. The Foundation's policy is to recognize the cost of sick days when actually paid to employees.

Vacation days are vested at ten days for the first year of employment, increasing on employment anniversaries thereafter, up to a maximum annual accrual of twenty days. Employees can accumulate vacation days up to twice their annual rate. The vacation accrual is calculated as the employee's hourly rate multiplied by the number of vested vacation hours. Accrued vacation is included in payroll taxes and benefits payable in the financial statements.

13. Contingencies

The Foundation evaluates contingencies based upon the available evidence. Management believes that allowances for loss contingencies reported in these financial statements are reasonable. To the extent that resolution of contingencies results in amounts which vary from management estimates, future earnings will be charged or credited. The principal contingencies are described below:

Contribution Agreement

The contribution agreement provides that the Partnership will assume the Foundation's liabilities listed therein. All other known or unknown liabilities existing at the time of execution or arising at a later date remain obligations of the Foundation. As a result of its obligations under the contribution agreement, the Foundation is contingently liable for its healthcare operations including but not limited to the following areas.

Third party revenues

Reimbursements are subject to examination and retroactive adjustments by agencies administering the programs. No provision has been made in these financial statements for such contingencies.

Professional liability risk

The Foundation is covered under Louisiana Patients' Compensation Fund which was established by the State of Louisiana to provide medical professional liability to healthcare providers. The Fund provides for \$400,000 coverage for each claim. In connection with the establishment of the Fund, the State of Louisiana enacted legislation limiting the amount of a participating healthcare provider's liability to \$100,000 per claim. The Foundation has not included a provision for professional liability losses in these financial statements and is contingently liable for such losses and related defense cost not underwritten by the Louisiana Patients' Compensation Fund.

14. **Net Investment Income**

An analysis of net investment income is provided below:

	<u>2013</u>	<u>2012</u>
<u>Investment income</u>		
Income-cash and investments	2,997,981	3,156,659
Net realized and unrealized gains	25,320,417	15,958,785
Equity in jointly owned companies	<u>4,529,132</u>	<u>6,287,696</u>
	32,847,530	25,403,140
<u>Investment expenses</u>		
Investment management and custody	591,561	519,703
Other	<u>419,738</u>	<u>391,196</u>
	<u>1,011,299</u>	<u>910,899</u>
Net investment income	<u><u>31,836,231</u></u>	<u><u>24,492,241</u></u>

15. **Subsequent Events**

In accordance with FASB Accounting Standards Codification Topic 740 "*Subsequent Events*," the Foundation evaluated events and transactions that occurred after the balance sheet date but before the financial statements were made available for potential recognition or disclosure in the financial statements. The Foundation evaluated such events through May __, 2014, the date which the financial statements were available to be issued, and noted no subsequent events.

SUPPLEMENTARY INFORMATION

THE RAPIDES FOUNDATION AND SUBSIDIARIES

DETAILS OF CONSOLIDATED STATEMENT OF FINANCIAL POSITION

DECEMBER 31, 2013

<u>ASSETS</u>	<u>The Rapides Foundation</u>	<u>C MAP E xpress</u>	<u>The Orchard Foundation</u>	<u>Eliminations Dr (Cr)</u>	<u>Consolidated</u>
<u>Assets:</u>					
Cash and cash equivalents	5,713,782	225,682	390,737	-	6,330,201
Marketable securities	202,523,424	-	-	-	202,523,424
Investments at cost plus equity in undistributed earnings	37,187,588	-	-	-	37,187,588
Grants receivable	75,000	497,557	600,000	(1,037,500)	135,057
Accounts receivable	-	150,298.00	1,149	-	87,232
Due from CMAP Express	150,298	58,571.00	-	(150,298)	-
Due from The Orchard Foundation	58,571	-	-	(58,571)	-
Due from The Rapides Foundation	-	208,869.00	-	-	-
Prepaid expenses	27,592	15,466	394	-	41,466
Property and equipment, net	849,141	10,063	1,459	-	1,860,663
Assets whose use is limited	65,645	-	-	-	65,645
Total assets	247,651,041	753,865	1,072,739	(1,246,369)	248,231,276
<u>LIABILITIES AND NET ASSETS</u>					
<u>Liabilities:</u>					
Accounts payable	236,879	236,879.00	582	-	285,196
Payroll, taxes and benefits	154,456	154,456.00	-	-	154,456
Grants payable	3,394,078	65,645.00	-	1,037,500	2,356,578
Due to The Orchard Foundation	-	-	-	-	-
Due to The Rapides Foundation	-	150,298	58,571	208,869	-
Annuity obligations payable	65,645	-	-	-	65,645
Total liabilities	3,851,058	190,033	67,153	1,246,369	2,861,875
<u>Net assets:</u>					
Unrestricted	243,664,630	88,001	83,755	-	243,836,386
Temporarily restricted	135,353	475,831	921,831	-	1,533,015
Total net assets	243,799,983	563,832	1,005,586	-	245,369,401
Total liabilities and net assets	247,651,041	753,865	1,072,739	1,246,369	248,231,276

THE RAPIDES FOUNDATION AND SUBSIDIARIES

DETAILS OF CONSOLIDATED STATEMENT OF ACTIVITIES-UNRESTRICTED

FOR THE YEAR ENDED DECEMBER 31, 2013

	<u>The Rapides Foundation</u>	<u>C M A P E x p r e s s</u>	<u>The Orchard Foundation</u>	<u>Eliminations Dr (Cr)</u>	<u>Consolidated</u>
<u>Revenues, gains and other support:</u>					
Net investment income	31,836,169	-	-	-	31,836,169
Contributions	-	454,628	433,910	562,204	326,334
Total revenues, gains and other support	31,836,169	454,628	433,910	562,204	32,162,503
<u>Net assets released from restrictions</u>	18,369	Unrealized Gains 31,854,538.00 + 23,559,519.00 - Total Rev. pg. 9 8,295,019.00 *			101,081
Total revenues, gains and other support	31,854,538				263,584
<u>Program expenses:</u>					
Grants	6,526,870	-	-	(2,073,273)	4,453,597
Direct charitable activities	2,386,322	1,071,797	1,347,121	(50,000)	4,755,240
Program development	692,106	-	-	-	692,106
Total program expenses	9,605,298	TR pg 10 97	1,347,121	(2,123,273)	9,900,943
<u>Administrative expenses</u>	1,153,703	TR pg 10 00	226,654	-	1,435,157
<u>Change in net assets</u>	21,095,537	(151,761)	(16,292)	-	20,927,484
<u>Net assets, beginning of year</u>	222,569,093	239,762	100,047	-	222,908,902
<u>Net assets, end of year</u>	243,664,630	88,001	83,755	-	243,836,386

THE RAPIDES FOUNDATION AND SUBSIDIARIES

DETAILS OF CONSOLIDATED STATEMENT OF ACTIVITIES-TEMPORARILY RESTRICTED

FOR THE YEAR ENDED DECEMBER 31, 2013

	<u>The Rapides Foundation</u>	<u>CMAP Express</u>	<u>The Orchard Foundation</u>	<u>Eliminations Dr (Cr)</u>	<u>Consolidated</u>
<u>Revenues, gains and other support:</u>					
Net investment income	-	-	62	-	62
Contributions	<u>153,722</u>	<u>843,304</u>	<u>1,191,783</u>	<u>1,561,069</u>	<u>627,740</u>
Total revenues, gains and other support	153,722	843,304	1,191,845	1,561,069	627,802
<u>Net assets released from restrictions</u>	<u>(18,369)</u>	<u>(520,208)</u>	<u>(1,123,573)</u>	<u>(1,561,069)</u>	<u>(101,081)</u>
Total revenues, gains and other support	135,353	323,096	68,272	-	526,721
<u>Program expenses:</u>					
Grants	-	-	-	-	-
Direct charitable activities	-	-	-	-	-
Program development	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total program expenses	-	-	-	-	-
<u>Administrative expenses</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
<u>Change in net assets</u>	135,353	323,096	68,272	-	526,721
<u>Net assets, beginning of year</u>	<u>-</u>	<u>152,735</u>	<u>853,559</u>	<u>-</u>	<u>1,006,294</u>
<u>Net assets, end of year</u>	<u><u>135,353</u></u>	<u><u>475,831</u></u>	<u><u>921,831</u></u>	<u><u>-</u></u>	<u><u>1,533,015</u></u>