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990-PF

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

F	_	lendar year 2013 or tax year beginning		, 2013,	, and endir			, 20
	Name	of foundation				/	Employer identifi	cation number
_		HELIS FOUNDATION					72-602053	
	Numb	er and street (or P O box number if mail is not delivered	d to street address)		Room/suite	: E	3 Telephone number	er (see instructions)
							(50	4) 523-1831
_	228	ST. CHARLES AVENUE			912			
	City o	town, state or province, country, and ZIP or foreign po	stal code					
							If exemption applica pending, check here	tion is
_	NEW	ORLEANS, LA 70130						
G	Che	ck all that apply Initial return	Initial return	of a former p	ublic chari	ty [1 Foreign organizat	ions, check here . ▶
		Final return	Amended ref	turn			2 Foreign organiza	
_		Address change	Name change				85% test, check h computation .	
H	_Che	ck type of organization X Section 501((c)(3) exempt private f				If private foundation	status was terminated
1	s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pr				•)(1)(A), check here .
ı			unting method Ca	ash <u>X</u> Acc	rual	F	If the foundation is	in a 60-month termination
			ther (specify)	-			under section 507(b)	(1)(B), check here .
_			column (d) must be on	cash basis)				
L	'art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	estment	(c)	Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in	expenses per	incom		(-,	income	purposes
_		column (a) (see instructions))	books					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule) If the foundation is not required to	32,855,609.					
	2	Check ► L attach Sch B						
	3	Interest on savings and temporary cash investments	72.		72.			ATCH 1
	4	Dividends and interest from securities	1,051,101.	1,05	1,101.		····	ATCH 2
	5 a	Gross rents						
	b	Net rental income or (loss)	740.000					
ne		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	749,000.					
Revenue	_	assets on line 6a			2 222			- "
Re	7	Capital gain net income (from Part IV, line 2).			9,000.			
	8	Net short-term capital gain					1000	
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·				- 	47-5-5	
		and allowances · · · ·	<u> </u>		<u> </u>	} 	NUV 2 6 2	14 13
		Cross profit or (loss) (ottook askedida)					, 2 0 /	1.4 - 1
	11	Gross profit or (loss) (attach schedule)	668,346.	26	6,850.			100
	12	Other income (attach schedule) ATCH 3	35,324,128.		7,023.			The same of the sa
-	13	Total Add lines 1 through 11	0		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u>- </u>	
	14	Other employee salaries and wages						
nses					-+		_	
ě	16a	Lenal fees (attach schedule)	1,373.			-		1,373
Ä	ь	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule)ATCH 4 Other professional fees (attach schedule) * Interest Taxes (attach schedule) (see instructions)ATCH 6 Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule)ATCH 7 Total operating and administrative expenses Add lines 13 through 23 Contributions, gifts, grants paid	106,446.	5	3,212.			53,234
Š	ີ	Other professional fees (attach schedule) *	115,058.		5,058.		, <u> </u>	
rati	17	Interest	423.		423.			
ist	18	Taxes (attach schedule) (see instructions)ATCH 6	44,011.	2	5,467.			
Ë	19	Depreciation (attach schedule) and depletion		_				
þ	20	Occupancy						
Ď	21	Travel, conferences, and meetings	_					
a	22	Printing and publications						
ing	23	Other expenses (attach schedule) ATCH .7.	18,571.	1	8,416.			155
rat	24	Total operating and administrative expenses.						-
96		Add lines 13 through 23	285,882.	21	2,576.			54,762
J	25	Contributions, gifts, grants paid	2,548,220.					2,548,220
_	26	Total expenses and disbursements Add lines 24 and 25	2,834,102.	21	2,576.		ō	2,602,982
_	27	Subtract line 26 from line 12					 	
	а	Excess of revenue over expenses and disbursements	32,490,026.					
	b	Net investment income (if negative, enter -0-)		1,85	4,447.			
	_	Adjusted not income (if possitive enter 0.)						

JSA For Paperwork Reduction Act Notice, see instructions. 3E1410 1 000 77571B 2JJG

Part II

1

2

11

12

15

16

17

18

21

22

23

24

25 26

Liabilities 19 20

Balances

Fund

þ 27

₹ 30

31

Beginning of year

(a) Book Value

821,190.

52,919.

492,381.

41,074,828.

42,481,918.

11,710,154.

30,771,764.

42,481,918.

42,481,918.

40,600.

Attached schedules and amounts in the

amounts only (See instructions)

Balance Sheets description column should be for end-of-year

Accounts receivable ▶______ Less allowance for doubtful accounts ▶ ______ Pledges receivable
______ Less allowance for doubtful accounts ▶ _____ Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts ▶ _____

9 Prepaid expenses and deferred charges ATCH 8 . .

10 a Investments - U.S. and state government obligations (attach schedule) b Investments - corporate stock (attach schedule) ATCH 9

c Investments - corporate bonds (attach schedule).

Investments - other (attach schedule) ATCH 10

▶_

Total assets (to be completed by all filers - see the

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule)

Other liabilities (describe
______)

Foundations that follow SFAS 117, check here. and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg , and equipment fund Retained earnings, accumulated income, endowment, or other funds . . .

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see

Total liabilities (add lines 17 through 22)

_____ATCH_11____)

Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)

Less accumulated depreciation

Land, buildings, and equipment basis

(attach schedule) Other assets (describe

Pa	art III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with		
	end-of-year figure reported on prior year's return)	1	42,481,918
	Enter amount from Part I, line 27a	2	32,490,026
	Other increases not included in line 2 (itemize) ▶ ATCH 12	3	28,479
4	Add lines 1, 2, and 3	4	75,000,423
	Decreases not included in line 2 (itemize) ► ATCH 13	5	31,976,098
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	43,024,325

P	aq	e	3

2-story br	I describe the kind(s) of property sold in ick warehouse, or common stock, 200		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
a SEE PART IV SCHEE	ULE				
b					
c					
<u> </u>					
9			ļ		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
	(or allowable)	piec expones en seus	1	(0) \$100 (1) 111110	
o	·				
				_	
d	•	<u> </u>		<u> </u>	
	showing gain in column (h) and owne	ed by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any		(k), but not less t Losses (from co	than -0-) or
ı					
)					
·					
1					
)			 		
Capital gain net income or		gain, also enter in Part I, line 7			740 000
Not alread to see annied a see	•	(loss), enter -0- in Part I, line 7	2		749,000.
	or (loss) as defined in sections 13	zzz(5) and (6) tructions) If (loss), enter -0- in			
			3		0
raiti, iiile o			_ J		U
Part V Qualification U	Inder Section 4940(e) for Reprivate foundations subject to the	educed Tax on Net Investment le section 4940(a) tax on net invest		me)	
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Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ction	<u>s)</u>
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		18,5	44.
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2		18,5	44.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-		18,5	44.
6	Credits/Payments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 52, 919.			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		52,9	19.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		34,3	375.
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 34,375. Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			ļ
	definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			ŀ
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			٠.,
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	37	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	_X	٠,,
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	- 5		Х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or	ŀ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	١.	x	
	with the state law remain in the governing instrument?	6	x	 -
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		-
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	LA,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0.	x	
_	of each state as required by General Instruction G? If "No," attach explanation.	8b		
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete			x
	Part XIV	9_		 ^
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and	4.	х	
	addresses ATCH 14	10	On DE	(2042)

Page 4

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4b | X

Form 990-PF(2013)

Х

Х

Form 990-PF (2013)	THE	HELIS	FOUNDATION

Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	red (continued)		
5a	During the year did the foundation pay or incur any amou	nt to				
	(1) Carry on propaganda, or otherwise attempt to influer	ice legislation (section	4945(e))?	. Yes X No	,	
	(2) Influence the outcome of any specific public ele-	ction (see section 4	955), or to carry or	1,		
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or other				,	
	(4) Provide a grant to an organization other than a			· — —		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				,	
	(5) Provide for any purpose other than religious, ch			. — —		
	purposes, or for the prevention of cruelty to children of					
h	If any answer is "Yes" to 5a(1)-(5), did any of the					
	Regulations section 53 4945 or in a current notice regard				5b	l x
	Organizations relying on a current notice regarding disast	=				
	If the answer is "Yes" to question 5a(4), does the				_	
·	because it maintained expenditure responsibility for the gi		•			
	If "Yes," attach the statement required by Regulations section		,			
6.5	Did the foundation, during the year, receive any fund	, ,	otly to nay premium	e		
va	on a personal benefit contract?					
	Did the foundation, during the year, pay premiums, direct				6b	
U	If "Yes" to 6b, file Form 8870	ary or munectly, on a p	bersonal benefit contrat	⁴ '	- 00	<u> </u>
7.2	At any time during the tax year, was the foundation a pa	rty to a prohibited tay	shelter transaction?	Yes X No	,	`
	If "Yes," did the foundation receive any proceeds or have				7b	
	Information About Officers, Directors					l
	and Contractors					
1	List all officers, directors, trustees, foundation n	nanagers and their (b) Title, and average	(c) Compensation (see	(d) Contributions to		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other all	se account, lowances
		devoted to position	enter -o-y	and deferred compensation		
ATC	 Н 17		0	d		0
	•					
2	Compensation of five highest-paid employees	(other than thos	e included on line	e 1 - see instruction	ons). If no	one, enter
	"NONE."			(d) Contributions to		
la	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expens	
,	Trains and dealess of sacrifications and training and the sacrification and the sacrific	devoted to position	(0) 00	plans and deferred compensation	otner all	lowances
	NONE					
Tota	I number of other employees paid over \$50,000 .			<u>.</u>		
					Form 99	0-PF (2013)

Form 990-PF (2013)

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions

Page 8

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn founda	itions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	42,796,987.
b	Average of monthly cash balances	1b	1,956,386.
С	Fair market value of all other assets (see instructions)	1c	595,363.
d	Total (add lines 1a, b, and c)	1d	45,348,736.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	45,348,736.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4	680,231.
5		5	44,668,505.
_6	Minimum investment return. Enter 5% of line 5	6	2,233,425.
Pari	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ □ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	2,233,425.
2 a	Tax on investment income for 2013 from Part VI, line 5 2a 18,544.		
b	Income tax for 2013 (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2b	2c	18,544.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,214,881.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,214,881.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	2,214,881.
Par	XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,602,982.
b	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,602,982.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	18,544.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,584,438.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating	whether the foundation

THE HELIS FOUNDATION

Form 990-PF (2013) Page 9

Pa	rt XIII Undistributed Income (see instru	ictions)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
•	line 7				2,214,881.
2	Undistributed income, if any, as of the end of 2013				
	Enter amount for 2012 only			1,540,863.	
	Total for pnor years 20 11 ,20 10 ,20 09				
3	Excess distributions carryover, if any, to 2013				
	From 2008				
	From 2009				
C	From 2010				
	From 2011				
	From 2012	0			
	Total of lines 3a through e	0			
4	Qualifying distributions for 2013 from Part XII, line 4 > \$ 2,602,982.				
•	Applied to 2012, but not more than line 2a			1,540,863.	
D	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2013 distributable amount				1,062,119.
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b			_	
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				<u>-</u>
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions				
	4a from line 2a Taxable amount - see instructions				
T	Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be				
	distributed in 2014				1,152,762.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014.				
	Subtract lines 7 and 8 from line 6a	0		_	
	Analysis of line 9				
	Excess from 2009	ļ			
	Excess from 2010				
c d	Excess from 2011 Excess from 2012				
	Excess from 2013				
				<u> </u>	

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

SEE ATTACHMENT 20 JSA 3E1490 1 000

c Any submission deadlines

SEE ATTACHMENT 20

SEE ATTACHMENT 20

factors

Part XV Supplementary Information 3. Grants and Contributions Paid Du	ring the Year or Appr	oved for Fut	ure Payment	
Recipient	If recipient is an individual,	Foundation	Surrent or	· · · · · ·
3 Grants and Contributions Paid Dui Recipient Name and address (home or business)	any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Tourplant	_	
ATTACHMENT 21				576,0
THE THE THE TENT OF THE TENT O				2.5,5
ATTACHMENT 22				1,492,6
ATTACIENT 22				1,152,0
ATTACHMENT 23		1		479,5
ATTACHMENT 25				475,5
			į	
		1		
		l i		
Total			▶ 3a	2,548,2
b Approved for future payment				
		1 1		
		1		
	1			
	1	1 1		
			l I	

Part XVI-	A Analysis of Income-Produ					
Enter gross	amounts unless otherwise indicated	(a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
ь						
c				-		
d				-		
					·	
f	 -		-			
	and contracts from government agencies			-		
	ship dues and assessments			14	72.	
	n savings and temporary cash investments			14	1,051,101.	- 1
	Is and interest from securities al income or (loss) from real estate		<u> </u>	+	1,031,101.	
	-financed property					-
	lebt-financed property					
	I income or (loss) from personal property					
	vestment income			18	668,346.	
	oss) from sales of assets other than inventory			18	749,000.	
	me or (loss) from special events	-		+	, 15, 000.	
	rofit or (loss) from sales of inventory				- "	
	venue a			1		
			··-			
						_
е						
2 Subtotal	Add columns (b), (d), and (e)				2,468,519.	
	dd line 12, columns (b), (d), and (e)					2,468,519.
	neet in line 13 instructions to verify calc					
art XVI-	B Relationship of Activities	s to the Ac	complishment of E	xempt Purp	oses	
Line No.	Explain below how each activit	ty for which	n income is reported	ın column (e	e) of Part XVI-A contrib	ited importantly to th
▼	accomplishment of the foundation					· •
				, p	, ramao ror odon parposo	
1	N/A					
			· · · · · · · · · · · · · · · · · · ·			
						<u> </u>
						
	<u> </u>					
		_				
						
-						
		 .				

THE HELIS FOUNDATION Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

	ın sect	organization direct ion 501(c) of the Co cations?				-					Yes	No
	-		na foundation to	a noncharita	hle exempt o	organization	. of					
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash									1a(1)		х	
									1a(2)		_ <u>x</u>	
						· · · · · ·				(-/		
b Other transactions (1) Sales of assets to a noncharitable exempt organization									1b(1)		х	
		chases of assets fro								1b(2)		Х
		ntal of facilities, equi								1b(3)		X
		mbursement arrange								1b(4)	_	Х
		ns or loan guarantee								1b(5)		X
		formance of service										- <u>x</u>
										1		- X
		g of facilities, equipn										
		answer to any of the of the goods, other										
		n any transaction or										
			1	oncharitable exe								
(a) Li	ne no	(b) Amount involved	(c) Name of h	ionenantable exe	mpi organization		Description of transfe	ers, transa	ictions, and snar	ing arra	ngeme	nis
		N/A				N/2	A					
							- 					-
			ļ							_		
	-+											
												
			<u> </u>									
2a	Is the	foundation directly	or indirectly af	filiated with,	or related to	o, one or m	nore tax-exempt	organi	zations			
	describ	ed in section 501(c)) of the Code (o	ther than sec	tion 501(c)(3))) or in sec	tion 527?		[Y	es X	No
b	If "Yes	" complete the follo	wing schedule									
		(a) Name of organization		(b) T	Type of organizat	ion	(c) Descrip	ption of relations	ship		
						_						
	Under	penalties of perjury, I declar	are that I have exami	ned this return, in	icluding accompan	ying schedules	and statements, and t	o the best	of my knowledg	e and I	oelief, it	is true
C:		t, and complete Declaration o	f preparer (other than t	axpayer) is based or	n all information of	which preparer I	has any knowledge					
Sigr		91/4			-17-14				May the IRS	discus eparer		return below
Her	e Tagr	nature of officer or trustee		Date		Title			(see instruction	_	Yes	No
										, L		
		Print/Type preparer's na	ame	Preparer's	ignature/)	(, (Date		heck if f	ΡΠΝ		
Paic	ı	RYAN HOOKS		I K	yun 0.4	DOTA	111/12/0014		_ ,	P007	4682	:5
Pre	parer		PMG, LLP		1,		<u> </u>	Firm's El				
_	Only		1 MAIN STR	EET SIITT	E 2150			7 11113 21			<u>- : </u>	
		, , ,	TON ROUGE,	LA			70801	Phone no	225-3	79-5	004	
								CHOILE III			0-PF	(2013

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Employer identification number Name of the organization THE HELIS FOUNDATION 72-6020536 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor,

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

during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or

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

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

Name of organization THE HELIS FOUNDATION

Employer identification number

			72-6020536
Part I	Contributors (see instructions) Use duplicate copies of Pa	rt I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ADRIENNE H MALVIN LIVING TRUST 228 ST. CHARLES AVENUE, SUITE 912 NEW ORLEANS, LA 70130	\$879,511.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	ADRIENNE H MALVIN LIVING TRUST 228 ST. CHARLES AVENUE SUITE 912 NEW ORLEANS, LA 70130	\$31,976,098.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

Name of organization THE HELIS FOUNDATION

Employer identification number

72-6020536

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	ırt II ıf addıtıonal space ıs nee	ded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ 2	AHMLT - ASSETS DEEMED DISTRIBUTED JEWELRY HOUSEHOLD FURNISHINGS	\$786,405.	_01/01/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$,
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

72-6020536

Part III	Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) > \$									
	Use duplicate copies of Part III if additional space is needed									
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
	Transferee's name, address, a	nship of transferor to transferee								
				····						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
		(e) Transf	er of gift							
	(5)									
	Transferee's name, address, a	nship of transferor to transferee								
(a) No		<u> </u>								
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
		(e) Transf	er of gift							
	Transferee's name, address, a	nd ZIP + 4	Relation	nship of transferor to transferee						
(a) No. from										
From Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
		(e) Transf	er of gift							
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee						
			-							

· SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10 ▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	Name of estate or trust Employer						yer identification number		
Short-Term Capital Gains and Losses - Assets Held One Year or Less See Instructions for how to figure the amounts to enter on the lines below Good G			72-60205	36					
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. This form may be easier to complete if you round off cents to whole dollars. The form may be easier to complete if you round off cents to whole dollars. The form may be easier to complete if you round off cents to whole dollars. The form may be easier to complete if you round off cents to whole dollars. The form may be easier to complete if you round off cents to whole dollars. The form shares to the form of the form o	$\overline{}$								
the lines below This form may be easier to complete if you round off cents (rawes price) and the price of the	Par	Short-Term Capital Gains and Losses - Ass	ets Held One Year	r or Less					
1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with Box A checked. 2 Totals for all transactions reported on Form(s) 8949 with Box B checked. 3 Totals for all transactions reported on Form(s) 8949 with Box C checked. 4 Short-term capital gain or (loss) from Porms 4684, 6252, 6781, and 8824	the li This	nes below form may be easier to complete if you round off cents	Proceeds	Cost	Adjustments to gain or loss f Form(s) 8949, P	rom art I,	Subtract column (e) from column (d) and combine the result with		
with Box A checked. 2 Totals for all transactions reported on Form(s) 8949 with Box B checked. 3 Totals for all transactions reported on Form(s) 8949 with Box C checked. 4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 6 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2012 Capital Loss Carryover Worksheet 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h) Enter here and on line 17, column (3) on the back. 7 Net short-term capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents (salles proce) 8a Totals for all long-term transactions reported on Form 1099-8 for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box Echecked. 10 Totals for all transactions reported on Form(s) 8949 with Box Echecked. 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824. 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 13 Capital gain distributions. 14 Gain from Form 4797, Part I. 15 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2012 Capital Loss Carryover Worksheet. 15 (Inches the part of the part o		1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions							
with Box B checked		with Box A checked							
with Box C checked		with Box B checked							
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 6 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2012 Capital Loss Carryover Worksheet . 7 Net short-term capital gain or (loss). Combine lines 1 a through 6 in column (h) Enter here and on line 17, column (3) on the back . 7 Net short-term capital gains or (loss). Combine lines 1 a through 6 in column (h) Enter here and on line 17, column (3) on the back . 7 16, 208. Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars 8 Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked . 10 Totals for all transactions reported on Form(s) 8949 with Box F checked . 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . 12 Again from Form 4797, Part I . 13 Capital gain distributions . 14 Gain from Form 4797, Part I . 15 Long-term capital gain or (loss) Combine lines 8a through 15 in column (h) Enter here and on the capital gain or (loss) Combine lines 8a through 15 in column (h) Enter here and on the capital gain or (loss) Combine lines 8a through 15 in column (h) Enter here and on the capital gain or (loss) Combine lines 8a through 15 in column (h) Enter here and on the capital gain or (loss) Combine lines 8a through 15 in column (h) Enter here and on the capital gain or (loss) Combine lines 8a through 15 in column (h) Enter here and on the capital gain or (loss) Combine lines 8a through 15 in column (h) E	3	Totals for all transactions reported on Form(s) 8949 with Box C checked	16,208.	_			16,208.		
Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2012 Capital Loss Carryover Worksheet Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h) Enter here and on line 17, column (3) on the back. This fort column (3) on the back. This form may be easier to complete if you round off cents to whole dollars Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b Totals for all transactions reported on Form(s) 8949 with Box E checked. Totals for all transactions reported on Form(s) 8949 with Box F checked. Totals for all transactions reported on Form(s) 8949 with Box F checked. The form capital gain or (loss) from partnerships, S corporations, and other estates or trusts. Totals for all transactions reported on Forms 2439, 4684, 6252, 6781, and 8824. The form capital gain or (loss) from partnerships, S corporations, and other estates or trusts. The form all form form 4797, Part I. Gain from Form 4797, Part I. Gain from Form 4797, Part I. Gain from Form 4797, Part I. Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2012 Capital Loss Carryover Worksheet. Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on the following carryover Worksheet. The following form form 4797, Part I. Gain from Form 4797, Part I. Long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on the following carryover Worksheet.									
The short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back.		Short-term capital loss carryover Enter the amount	nt, if any, from lin	e 9 of the 2012	Capital Loss		()		
See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars 8a Totals for all long-term transactions reported on Form 1099-8 for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box E checked. 10 Totals for all transactions reported on Form(s) 8949 with Box F checked. 11 Long-term capital gain or (loss) from partnerships, S corporations, and other estates or trusts. 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 15 (a) (e) (cost body) Adjustments to gain or loss from form(s) substitute to gain or loss from gain and rots substitute to gain or loss for line 2, column (g) 17 Totals for all transactions reported on Form(s) 8949 with Box E checked. 18 Totals for all transactions reported on Form(s) 8949 with Box E checked. 19 Totals for all transactions reported on Form(s) 8949 with Box F checked. 10 Totals for all transactions reported on Form(s) 8949 with Box F checked. 11 Long-term capital gain or (loss) from partnerships, S corporations, and other estates or trusts. 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 13 Capital gain distributions. 14 Gain from Form 4797, Part I. 15 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2012 Capital Loss Carryover Worksheet 15 (16 Net long-term capital gain or (loss), Combine lines 8a through 15 in column (h) Enter here and on	7	Net short-term capital gain or (loss). Combine line	es 1a through 6 in	column (h) Enter	here and on		16 208		
See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b Totals for all transactions reported on Form(s) 8949 with Box D checked. 10 Totals for all transactions reported on Form(s) 8949 with Box F checked. 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824. 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 13 Capital gain distributions. 14 Gain from Form 4797, Part I. 15 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2012 Capital Loss Carryover Worksheet. 15 (In) Gain or (loss) Subtract column (g) Subtract column (g) and combine the result with column (g) and combine the result with column (g) and c	Par	Long-Term Capital Gains and Losses - Ass	ets Held More Th	an One Year			10,7200.		
1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked	See the li	instructions for how to figure the amounts to enter on nes below form may be easier to complete if you round off cents	(d) Proceeds	(e) Cost	Adjustments to gain or loss t Form(s) 8949, P	from art II,	Subtract column (e) from column (d) and combine the result with		
with Box D checked	8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions							
9 Totals for all transactions reported on Form(s) 8949 with Box Echecked									
with Box F checked	9	Totals for all transactions reported on Form(s) 8949 with Box E checked							
Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	10		4,358,011.	3,625,219.			732,792.		
13 Capital gain distributions	11	Long-term capital gain or (loss) from Forms 2439, 46	884, 6252, 6781, and	d 8824		11			
14 Gain from Form 4797, Part I	12	Net long-term gain or (loss) from partnerships, S corp	porations, and other e	estates or trusts		12			
15 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2012 Capital Loss Carryover Worksheet	13	Capital gain distributions				13			
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on		Long-term capital loss carryover. Enter the amount	it, if any, from line	14 of the 2012	Capital Loss				
	16	Net long-term capital gain or (loss). Combine lines	s 8a through 15 in	column (h) Enter	here and on		722 792		

Sched	ule D (Form 1041) 2013				Page 2
	Summary of Parts I and II Caution: Read the instructions before completing this pa	art.	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17	,		16,208.
	Net long-term gain or (loss):				
	Total for year	18a			732,792.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b			,,,,,,,
	28% rate gain	18c			
	Total net gain or (loss). Combine lines 17 and 18a,	19		-	749,000.
	If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4		rm 990-T. Part I. line	4a) If lines 18a and 1	
gains, neces	go to Part V, and do not complete Part IV. If line 19, column (3), is a n sary	et los	s, complete Part IV ar	nd the Capital Loss Ca	erryover Worksheet, as
	t IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F				,
a Note	The loss on line 19, column (3) or b \$3,000	nage		20 (10-T line 34) is a loss	complete the Capita
Loss	Carryover Worksheet in the instructions to figure your capital loss carryover	page		10 1, mile 04), 10 d 1000	, complete the capital
Par	Tax Computation Using Maximum Capital Gains Rate	s			- <u>-</u>
Form	1041 filers. Complete this part only if both lines 18a and 19 in col	umn (2) are gains, or an a	amount is entered in	Part I or Part II and
here	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	e tha	n zero.		
Caut	ion: Skip this part and complete the <mark>Schedule D Tax Worksheet</mark> in the i	nstru	ctions if		
	ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or				
	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	990-T trusts. Complete this part only if both lines 18a and 19 a	_	•		
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and c	omplete the Schedi	ule D Tax Workshee	et in the instructions
ıı eıtı	ner line 18b, col (2) or line 18c, col (2) is more than zero				
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	. 21		
22	Enter the smaller of line 18a or 19 in column (2)				
	but not less than zero				
23	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) . 23				
24	Add lines 22 and 23				
25	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 25				
26	Subtract line 25 from line 24 If zero or less, enter -0		. 26		
27	Subtract line 26 from line 21 If zero or less, enter -0		. 27	,	
28	Enter the smaller of the amount on line 21 or \$2,450		. 28		
29	Enter the smaller of the amount on line 27 or line 28		. 29		
30	Subtract line 29 from line 28 If zero or less, enter -0- This amount is			▶ 30	
31	Enter the smaller of line 21 or line 26				
32	Subtract line 30 from line 26		32		
33	Enter the smaller of line 21 or \$11,950				
34	Add lines 27 and 30				
35	Subtract line 34 from line 33 If zero or less, enter -0		35		
36	Enter the smaller of line 32 or line 35				
37	Multiply line 36 by 15%			37	
38	Enter the amount from line 31				
39	Add lines 30 and 36				
40	Subtract line 39 from line 38 If zero or less, enter -0-				
41	Multiply line 40 by 20%		• ———	▶ 41	
41 42	Figure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule for		1 1		
72	and Trusts (see the Schedule G instructions in the instructions for Form 1041)				
42			•		
43 44	Add lines 37, 41, and 42		·		
44	Figure the tax on the amount on line 21. Use the 2013 Tax Rate Schedule for		1 1		
A E	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		• -	Schodula	

G, line 1a (or Form 990-T, line 36)

Sales and Other Dispositions of Capital Assets

▶Information about Form 8949 and its separate instructions is at www.irs gov/form8949.

Department of the Treasury Internal Revenue Service Name(s) shown on return

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No 1545-0074

Name(s) shown on return THE HELIS FOUNDATION					Social security number or taxpayer identification number 72 - 6020536			
Most brokers issue their own substitute the statement even if it is not reported to the transactions for which basis was r	o the IRS Befo	re you check B	lox A, B, or C below	ı, detern	nine whei	ther you receive	ed any statement(s) and, if so,
Part I Short-Term. Transact transactions, see pag		ng capital as	sets you held o	one ye	ar or le	ss are short	-term For long	-term
Note . You may aggre reported to the IRS a Schedule D, line 1a,	and for whic	h no adjustr	nents or codes	are re	quired	Enter the to	otal directly on	
You must check Box A, B, or C be	low. Check o	only one box.	If more than one	e box a	pplies fo	or your short-	term transactions	S,
complete a separate Form 8949,	page 1, for e	ach applicab	le box If you ha	ve mor	e short-	term transact	tions than will fit o	n this page
for one or more of the boxes, com	plete as mar	ny forms with	the same box ch	ecked	as you n	eed		
(A) Short-term transactions repo	orted on Form((s) 1099-B show	wing basis was repo	orted to t	he IRS (s	see Note above	e)	
(B) Short-term transactions repo	orted on Form(s	s) 1099-B show	ring basis was not i	reported	f to the IF	≀s		
X (C) Short-term transactions not	reported to you	on Form 1099	-B					
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	Cost	(e) or other See the	If you enter an a enter a co	any, to gain or loss amount in column (g), de in column (f) irate instructions	(h) Gain or (loss) Subtract column (e)
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed (Mo, day, yr)	(sales price) (see instructions)	see Co	elow and blumn (e) separate uctions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
HRJ GLOBAL BUY-OUT US								
LP - K-1		12/31/2013	156.					156.
PORTFOLIO ADVISORS REA								
ESTATE FUND IV - K-		12/31/2013	16,052.					16,052.
	İ							
	ļ. <u>-</u>							
				_				
	-							

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

16,208.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)▶ Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side)
THE HELIS FOUNDATION

Social security number or taxpayer identification number 72 - 6020536

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a, you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

 (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- X (F) Long-term transactions not reported to you on Form 1099-B

Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)	(Mo, day, yr)	(Mo, day, yr)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
36,135.214 SHRS							
FIDELITY ADVISOR -	VARIOUS	02/26/2013	461,085.	430,817.			30,268.
31,485.568 SHRS LOOMIS							
SAYLES BOND INSTL -	VARIOUS	02/26/2013	476,652.	437,459.			39,193.
3,253.544 SHRS AMERICA							
CAPITAL WORLD GRTH	VARIOUS	10/14/2013	140,000.	160,335.			-20,335.
1,578.947 SHRS POLARIS							
GLOBAL VALUE - THF	VARIOUS	10/14/2013	29,975.	33,789.			-3,814.
5,832.212 SHRS VANGUAR						•	
GLOBAL EQUITY - THF	VARIOUS	10/14/2013	129,975.	132,625.			-2,650.
FIDELITY CAPITAL GAIN							
DISTRIBUTION - THF	VARIOUS	12/31/2013	72.				72.
CHARLES SCHWAB CAPITAL						,	
GAIN DISTRIBUTION -	VARIOUS	12/31/2013	66,855.				66,855.
104,711.805 SHRS							-
FIDELITY ADVISOR ST	VARIOUS	02/26/2013	1,336,123.	1,217,593.			118,530.
91541.488 SHRS LOOMIS							
SAYLES BOND INSTL -	VARIOUS	02/26/2013	1,385,898.	1,212,601.			173,297.
FIDELITY CAPITAL GAIN							
DISTRIBUTION - DHH	VARIOUS	12/31/2013	209.				209.
CHARLES SCHWAB CAPITAL							
GAIN DISTRIBUTION -	VARIOUS	12/31/2013	202,925.				202,925.
HRJ GLOBAL BUY-OUT US							
LP - K-1		12/31/2013	42,949.		İ		42,949.
HRJ GLOBAL BUY-OUT III			·				
ASIA LP - K-1		12/31/2013	7,499.				7,499.
HRJ GLOBAL ASIA LP NEW							
MONEY - K-1		12/31/2013	24,997.				24,997.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶		4,358,011.	3625219.			732,792.	

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.)
THE HELIS FOUNDATION

Social security number or taxpayer identification number

72-6020536

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a, you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(E) Long-term transactions re X (F) Long-term transactions n			_	mas not repor			
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sh' XÝZ Ćo)	(Mo, day, yr)	disposed (Mo , day, yr)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
HRJ GLOBAL BUYOUT III EUROPE LP - K-1		12/31/2013	23,114.				23,114
PORTFOLIO ADVISORS REA ESTATE FUND IV - K-		12/31/2013	29,683.				29,683
	_						
					:		
						1	
-							
2 Totals. Add the amounts in colu (subtract negative amounts) E include on your Schedule D, lin- checked), line 9 (if Box E above	nter each tota e 8b (if Box I	al here and D above is					

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis a reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

INVESTMENTS
CASH
I ON TEMPORARY CASH INVESTME
NO
INTEREST
ı
PART I
990PF,
FORM

NET INVESTMENT INCOME	20.	72.
REVENUE AND EXPENSES PER BOOKS	20.	72.
		TOTAL
DESCRIPTION	WHITNEY NATIONAL BANK FIDELITY INVESTMENTS	

ATTACHMENT 1 PAGE 21

п
SECURITIES
FROM
INTEREST
訓
DIVIDENDS A
1
PART I
990PF,
FORM 9

NET INVESTMENT INCOME	18,468. 1,030,953. 1,680.	1,051,101.
REVENUE AND EXPENSES PER BOOKS	18,468. 1,030,953. 1,680.	1,051,101.
DESCRIPTION	INTEREST FROM SECURITIES DIVIDENDS FROM SECURITIES DIVIDENDS FROM ADRIENNE H MALVIN LIVING	TOTAL

ATTACHMENT 2 PAGE 22

THE HELIS FOUNDATION

FORM 990PF, PART I - OTHER INCOME

	NET	INVESTMENT	INCOME	2,741.	16,122.	57,902.	-231,246.	358,399.	21,918.	47,733.	-6,719.	266,850.
REVENUE	AND	EXPENSES	PER BOOKS	-75,439.	-13,541.	57,902.	278,093.	358,399.	21,918.	47,733.	-6,719.	668,346.
												TOTALS
			DESCRIPTION	HRJ PARTNERSHIP INVESTMENTS	PORT ADV REAL ESTATE FD IV	PORT ADV PRIV EQTY FD V	SILVER CREEK	ALPHAQUEST ORIGINAL	PROTEGE PARTNERS OF FUND	PORT ADV PRIV EQTY 2ND FD	PORT ADV PRIV EQTY FD VII	

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066

CHARITABLE PURPOSES	53,234.	53,234.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	53,212.	53,212.
REVENUE AND EXPENSES PER BOOKS	106,446.	106,446.
		TOTALS
DESCRIPTION	TAX & AUDIT FEES	

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE AND EXPENSES INVESTMENT PER BOOKS	96,000. 19,058. 19,058.	115,058.
DESCRIPTION	CONSULTING FEES CONSULTING FEES - AHMLT	TOTALS

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	25,467.	25,467.
REVENUE AND EXPENSES PER BOOKS	18,544.	44,011.
		TOTALS
DESCRIPTION	FEDERAL EXCISE TAX FOREIGN TAXES	

ATTACHMENT 7 PAGE 27

EXPENSES	
OTHER	
-1	I
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PART	
990PF,	
FORM	

CHARITABLE PURPOSES 147. 5.	155.
NET INVESTMENT INCOME 390. 6,928. 4,116. 6,928.	18,416.
REVENUE AND EXPENSES PER BOOKS 537. 537. 6,928. 4,116. 6,928. 54.	18,571.
	TOTALS
DESCRIPTION BANK FEES FILING FEE ASSET INSURANCE STORAGE - AHMLT ASSET INSURANCE - AHMLT BANK FEE - AHMLT	

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CHARGES
PREPAID EXPENSES AND DEFERRED
AND
EXPENSES
PREPAID
- II
PART
NRM 990PF,
FORM

ENDING <u>FMV</u>	34,375.	34,375.
ENDING BOOK VALUE	34,375.	34,375.
DESCRIPTION	PREPAID FEDERAL EXCISE TAX	TOTALS

ATTACHMENT 9 PAGE 29

STOCK	
CORPORATE	
미	l
II	
PART	
990PF,	
FORM	

ESCRIPTION						
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	2 T & E C E
SECURITIES	
HANCOCK	

ENDING	FMV
ENDING	BOOK VALUE

312,440.	312,440.
492,381.	492,381.

- OTHER INVESTMENTS PART II FORM 990PE,

PARTNERSHIP INVESTMENTS MUTUAL FUNDS DESCRIPTION JEWELRY

BOOK VALUE

ENDING FMV

ENDING

533,655. 10,389,616. 34,554,400.

512,096. 9,010,100. 31,840,531.

45,477,671.

41,362,727.

TOTALS

THE HELIS FOUNDATION

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OTHER	
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99005	
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FORM	
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	RECEIVA
NOI	INTEREST
DESCRIPTION	ACCRUED

RECEIVABLE	
RECEI	70
INTEREST	ION COSTS
ACCRUED	SYNDICATION

TOTALS

DING	VALUE
ENI	BOOK

ENDING <u>FMV</u>

> 16,546. 4,023.

16,546. 4,023.

20,569.

20,569.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

DISTRIBUTION RECEIVED PURSUANT TO TRUST TERMS. NET INCOME TAXABLE TO SUCCESSORS OF TRUST PROPERTY PURSUANT TO REGULATION SECTION 1.641(B)-3(B)-(D)

28,479.

TOTAL

28,479.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

ASSETS DEEMED DISTRIBUTED EFFECTIVE DECEMBER 31, 2012 IN ACCORDANCE WITH TRUST TERMS PURSUANT TO REGULATION SECTION 1.641(B)-3(B)-(D)

31,976,098.

TOTAL

31,976,098.

LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

PART VII-A,

FORM 990PF,

NAME AND ADDRESS

ADRIENNE H MALVIN LIVING TRUST 228 ST. CHARLES AVENUE, SUITE 912 NEW ORLEANS, LA 70130

ATTACHMENT 14 PAGE 34

ATTACHMENT 15

FORM 990PF, PART VII-A, LINE 16 - LIST OF FOREIGN COUNTRIES

CAYMAN ISLANDS BAHAMAS Helis Foundation E.I.N. #72-6020536 Attachment to Form 990-PF Part VII-B, Question 5c on page 6

Expenditure Responsibility Statement For the year 2013

Pursuant to IRC Regulation § 53.4945-5(d)(2), the Helis Foundation provides the following information:

(i) Grantee:

Kemper and Leila Williams Foundation

533 Royal Street

New Orleans, LA 70130

(ii) Amount of Grant:

December 20, 2013 \$150,000

(iii) Purpose of Grant:

The Kemper and Leila Williams Foundation is also known as The Historic New Orleans Collection. The Historic New Orleans Collection is a museum, research center, and publisher dedicated to the study and preservation of the history and culture of New Orleans and the Gulf South region. This grant is supported as follows: \$150,000 used towards the purchase of the painting, Bayou Scene, 1881,

by William Henry Buck (1840-1888).

(iv) and (vi) Reports:

The Kemper and Leila Williams Foundation submitted a complete report of its expenditure intention on December 20, 2013. The Collection's portion of the purchase was

applied on December 19, 2013.

(v) Diversions:

To the knowledge of the grantor, no funds have been diverted to any activity other than the activity for which the

grant was originally made.

(vii) Verification:

The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

Helis Foundation E.I.N. #72-6020536 Attachment to Form 990-PF Part VII-B, Question 5c on page 6

Expenditure Responsibility Statement For the year 2013

Pursuant to IRC Regulation § 53.4945-5(d)(2), the Helis Foundation provides the following information:

(i) Grantee: Kemper and Leila Williams Foundation

533 Royal Street

New Orleans, LA 70130

(ii) Amount of Grant: December 14, 2012 \$200,000

(iii) Purpose of Grant: The Kemper and Leila Williams Foundation is also known

as The Historic New Orleans Collection. The Historic New Orleans Collection is a museum, research center, and publisher dedicated to the study and preservation of the history and culture of New Orleans and the Gulf South region. This grant is supported as follows: \$165,000 used

towards the purchase of the painting, Basin Street

Cemetery by George Ralston Crawford and the remaining \$35,000 for the charitable purpose for the conservation, maintenance, installation, and display of art and art objects purchased by the Diana Helis Henry Art Fund of the Helis

Foundation.

(iv) and (vi) Reports: The Kemper and Leila Williams Foundation submitted a

complete report of its expenditure intention on December 26, 2012. The Collection's portion of the purchase was applied on December 21, 2012. Annual report was

provided on December 16, 2013.

(v) Diversions: To the knowledge of the grantor, no funds have been

diverted to any activity other than the activity for which the

grant was originally made.

(vii) Verification: The grantor has no reason to doubt the accuracy or

reliability of the report from the grantee; therefore, no

independent verification of the report was made.

Helis Foundation E.I.N. #72-6020536 Attachment to Form 990-PF Part VII-B, Question 5c on page 6

Expenditure Responsibility Statement For the year 2013

Pursuant to IRC Regulation § 53.4945-5(d)(2), the Helis Foundation provides the following information:

(i) Grantee:

Kemper and Leila Williams Foundation

533 Royal Street

New Orleans, LA 70130

(ii) Amount of Grant:

December 19, 2011 \$100,000

(iii) Purpose of Grant:

The Kemper and Leila Williams Foundation is also known as The Historic New Orleans Collection. The Historic New Orleans Collection is a museum, research center, and publisher dedicated to the study and preservation of the history and culture of New Orleans and the Gulf South region. This grant is supported as follows: \$75,000 used

towards the purchase of the painting by William Woodward known as S.S. Atenas Moored at Old 1

Woodward, known as S.S. Atenas Moored at Old Havana Harbor and the remaining \$25,000 for the charitable purpose for the conservation, maintenance, installation, and display of art and art objects purchased by the Diana Helis

Henry Art Fund of the Helis Foundation.

(iv) and (vi) Reports:

The Kemper and Leila Williams Foundation submitted a complete report of its expenditure intention on December 16, 2013. The Collection's portion of the purchase was applied on December 21, 2011. The Kemper and Lelia Williams Foundation submitted a second and final report regarding expenditure of the funds on December 16, 2013.

(v) Diversions:

To the knowledge of the grantor, no funds have been diverted to any activity other than the activity for which the grant was originally made.

(vii) Verification:

The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

ATTACHMENT 17

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0	
COMPENSATION	0	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	VICE PRESIDENT 1.00	SECRETARY 1.00	TREASURER 1.00	GRAND TOTALS
NAME AND ADDRESS	DAVID A. KERSTEIN 228 ST. CHARLES AVENUE, SUITE 902 NEW ORLEANS, LA 70130	MICHAEL F. SCHOTT 228 ST. CHARLES AVENUE, SUITE 912 NEW ORLEANS, LA 70130	LINDA A. REEG 228 ST. CHARLES AVENUE, SUITE 912 NEW ORLEANS, LA 70130	JANE C. FIEGLER 228 ST. CHARLES AVENUE SUITE 912 NEW ORLEANS, LA 70130	

THE HELIS FOUNDATION

72-6020536

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

ATTACHMENT 18

NAME AND ADDRESS

TYPE OF SERVICE

COMPENSATION

METIS FINANCIAL LLC 4908 SUNNY PLACE METAIRIE, LA 70006 INVESTMENT CONSULTAN

115,058.

TOTAL COMPENSATION

115,058.

ATTACHMENT 19

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

ATTACHMENT 20

77571B 2JJG

THE HELIS FOUNDATION E.I.N. # 72-6020536 FORM 990-PF DECEMBER 31, 2013

PART XV

- 2a) DAVID A. KERSTEIN, PRESIDENT THE HELIS FOUNDATION 228 ST. CHARLES AVENUE, SUITE 912 NEW ORLEANS, LOUISIANA 70130 (504) 523-1831
- 2b) APPLICATION SHOULD BE IN APPROPRIATE TYPED LETTER FORM. INCLUDE BROCHURES OR OTHER PERTINENT INFORMATION AND ESTABLISH THE QUALIFICATIONS OF THE APPLICANT TO RECEIVE FUNDS FROM A PRIVATE FOUNDATION AS PROVIDED FOR UNDER THE INTERNAL REVENUE CODE AND APPLICABLE REGULATIONS.
- 2c) THERE ARE NO SUBMISSION DEADLINES.
- 2d) THERE ARE NO RESTRICTIONS OR LIMITATIONS ON AWARDS EXCEPT THAT THE ORGANIZATION MUST BE QUALIFIED AS PROVIDED FOR UNDER THE INTERNAL REVENUE CODE AND APPLICABLE REGULATIONS.

	IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER	ORGANIZATIONAL STATUS OF	PURPOSE OF GRANT OR	
RECIPIENT	OR SUBSTANTIAL CONTRIBUTOR	RECIPIENT	CONTRIBUTION	<u>AMOUNT</u>
AMERICAN HEART ASSOCIATION 110 VETERANS BLVD SUITE 160 METAIRIE, LA 70005	N/A	PUBLIC	•	2,500 00
AMERICAN RED CROSS 2640 CANAL STREET NEW ORLEANS, LA 70119	N/A	PUBLIC	•	5,000 00
BRIDGE HOUSE CORPORATION '4150 EARHART BLVD NEW ORLEANS, LA 70125	N/A	PUBLIC	•	10,000 00
BUREAU OF GOVERNMENTAL RESEARCH 938 LAFAYETTE STREET, SUITE 200 NEW ORLEANS, LA 70113	N/A	PUBLIC	•	50,000 00
BOY SCOUTS OF AMERICA 4200 S 1-10 SERVICE ROAD W #117 METAIRIE, LA 70001	N/A	PUBLIC	•	3,000 00
CHILDREN'S BUREAU OF NEW ORLEANS 2626 CANAL STREET SUITE 201 NEW ORLEANS, LA 70119	N/A	PUBLIC	•	10,000 00
CHILDREN'S HOSPITAL 200 HENRY CLAY AVENUE NEW ORLEANS, LA 70118	N/A	PUBLIC	•	1,000 00
CRIMESTOPPERS P O BOX 55249 METAIRIE, LA 70055-5249	N/A	PUBLIC	•	15,000 00
EARLY CHILDHOOD & FAMILY LEARNING FOUNDATION 1700 JOSEPHINE STREET SUITE 200 NEW ORLEANS, LA 70113	N/A	PUBLIC	•	5,000 00
JUNIOR ACHIEVEMENT OF GREATER NEW ORLEANS 5100 ORLEANS AVNUE NEW ORLEANS, LA 70124	N/A	PUBLIC	•	10,000 00
KIPP NEW ORLEANS SCHOOLS 1607 S CARROLLTON AVENUE NEW ORLEANS, LA 70118	N/A	PUBLIC	•	10,000 00
LEUKEMIA SOCIETY OF AMERICA, INC - LA CHAPTER 3636 SOUTH I-10 SERVICE RD , SUITE 304 METAIRIE, LA 70001	N/A	PUBLIC	•	20,000 00
LIBERTY'S KITCHEN INC 422 1/2 SOUTH BROAD NEW ORLEANS, LA 70119	N/A	PUBLIC	•	10,000 00
LOUISIANA MUSEUM FOUNDATION 1000 BOURBON STREET, #B429 NEW ORLEANS, LA 70115	N/A	PUBLIC	•	1,000 00
METROPOLITAN CRIME COMMISSION, INC 1615 POYDRAS STREET, SUITE 1060 NEW ORLEANS, LA 70112	N/A	PUBLIC	•	8,500 00
NATIONAL JEWISH HEALTH 1400 JACKSON STREET DENVER, COLORADO 80206	N/A	PUBLIC	•	10,000 00
NEIGHBORHOOD HOUSING SERVICES OF NEW ORLEANS 4528 FRERET STREET NEW ORLEANS, LA 70115	N/A	PUBLIC	•	10,000 00
NEW ORLEANS POLICE AND JUSTICE FOUNDATION, INC 400 POYDRAS STREET, SUITE 2105 NEW ORLEANS, LA 70130	N/A	PUBLIC	•	30,000 00

RECIPIENT OZANAM INN 843 CAMP STREET NEW ORLEANS, LA 70130	IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER OR SUBSTANTIAL CONTRIBUTOR N/A	ORGANIZATIONAL STATUS OF <u>RECIPIENT</u> PUBLIC	PURPOSE OF GRANT OR CONTRIBUTION •	<u>AMOUNT</u> 10,000 00
PRESERVATION RESOURCE CENTER OF NEW ORLEANS 923 TCHOUPITOULAS STREET NEW ORLEANS, LA 70130	N/A	PUBLIC	•	50,000 00
PUBLIC AFFAIR'S RESEARCH COUNCIL OF LOUISIANA INC PO BOX 14776 BATON ROUGE, LA 70898	N/A	PUBLIC	•	10,000 00
SECOND HARVESTER OF GREATER N O & ACADIANA 700 EDWARDS AVENUE NEW ORLEANS, LA 70123	N/A	PUBLIC	•	50,000 00
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, 1N 38105-1942	N/A	PUBLIC	•	10,000 00
LIGHTHOUSE FOR THE BLIND IN NEW ORLEANS 123 STATE STREET NEW ORLEANS, LA 70118	N/A	PUBLIC	•	15,000 00
THE NATIONAL WORLD WAR II MUSEUM 945 MAGAZINE STREET NEW ORLEANS, LA 70130	N/A	PUBLIC	•	57,500 00
TOURO INFIRMARY FOUNDATION 1401 FOUCHER STREET NEW ORLEANS, LA 70115-3593	N/A	PUBLIC	•	7,500 00
UNITED WAY FOR THE GREATER NEW ORLEANS AREA 2515 CANAL STREET NEW ORLEANS LA 70119	N/A	PUBLIC	•	125,000 00
UNITED WAY - PLAQUEMINES LEGACY CAMPAIGN 2515 CANAL STREET NEW ORLEANS, LA 70119	N/A	PUBLIC	•	30,000 00
			-	

[•] QUALIFYING DISTRIBUTION (CONTRIBUTION) MADE TO EACH ENTITY TO ACCOMPLISH THE RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES OF SUCH ENTITY

576,000 00

RECIPIENT OR SUBSTANTIAL CONTRIBUTOR RECIP	PIENT CONTRIBUTIO	N AMOUNT
		MA MAGENT
ARTS COUNCIL OF NEW ORLEANS N/A PUE 935 GRAVIER STREET, SUITE 850 NEW ORLEANS, LA 70112	LIC *	2,500 00
CITY PARK OF NEW ORLEANS N/A PUE #1 PALM DRIVE NEW ORLEANS, LA 70124	LIC *	30,000 00
CONTEMPORARY ARTS CENTER N/A PUE 900 CAMP STREET NEW ORLEANS, LA 70130	SLIC •	200,000 00
HERMANN-GRIMA GALLIER HISTORIC HOUSES N/A PUE 820 ST LOUIS STREET NEW ORLEANS, LA 70112	slic *	20,000 00
KEMPER AND LELIA WILLIAMS FOUNDATION N/A PRIV 533 ROYAL STREET NEW ORLEANS, LA 70130	ATE *	125,000 00
KID smart N/A PUE 1920 CLIO STREET NEW ORLEANS, LA 70113	slic •	6,500 00
LONGUE VUE HOUSE AND GARDENS CORP N/A PUE NO 7 BAMBOO ROAD NEW ORLEANS, LA 70124-1065	LIC *	12,500 00
LOUISIANA ENDOWMENT FOR THE HUMANITIES N/A PUE 938 LAFAYETTE STREET, SUITE 300 NEW ORLEANS, LA 70113	BLIC *	75,000 00
LOUISIANA MUSEUM FOUNDATION N/A PUE 1000 BOURBON STREET, #B429 NEW ORLEANS, LA 70115	BLIC •	2,500 00
NEW ORLEANS BOTANICAL GARDENS FOUNDATION N/A PUE #1 PALM DRIVE, CITY PARK NEW ORLEANS, LA 70124	BLIC •	10 000 00
NEW ORLEANS MUSEUM OF ART N/A PUE CITY PARK I COLLINS DIBOLL CIRCLE	BLIC •	600,000 00
NEW ORLEANS, LA 70179-0123 PROSPECT 2 NEW ORLEANS N/A PUE US BIENNIAL, INC	BLIC •	8,000 00
401 BROADWAY, SUITE 2313 NEW YORK, NY 10013 THE GOOD SHEPHERD SCHOOL N/A PUE	BLIC •	20,000 00
A JESUIT NATIVITY MISSION SCHOOL 353 BARONNE STREET NEW ORLEANS, LA 70112		20,000 00
THE NEW ORLEANS CENTER FOR CREATIVE ARTS INSTITUTE N/A PUE 2800 CHARTRES STREET NEW ORLEANS, LA 70117	BLIC •	25,000 00
AND FOUNDATION INC 1205 NORTH RAMPART STREET	BLIC *	80,000 00
UNIVERSITY OF NEW ORLEANS 925 CAMP STREET	BLIC •	239,679 89
NEW ORLEANS, LA 70130 THE TRUST FOR PUBLIC LAND 1137 BARRONE STREET NEW ORLEANS, LA 70113	BLIC •	20,000 00

THE HELIS FOUNDATION 1.D. # 72-6020536 2013

IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER OR SUBSTANTIAL CONTRIBUTOR

ORGANIZATIONAL STATUS OF <u>RECIPIENT</u> PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

RECIPIENT

YOUNG ASPIRATIONS/YOUNG ARTIST P O BOX 52617 NEW ORLEANS, LA 70152-2617

I/A

PUBLIC

16,000 00

1,492,679 89

[•] QUALIFYING DISTRIBUTION (CONTRIBUTION) MADE TO EACH ENTITY TO ACCOMPLISH THE RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES OF SUCH ENTITY

	IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER	ORGANIZATIONAL STATUS OF	PURPOSE OF GRANT OR	
RECIPIENT	OR SUBSTANTIAL CONTRIBUTOR	RECIPIENT	CONTRIBUTION	<u>AMOUNT</u>
ARTS COUNCIL OF NEW ORLEANS 935 GRAVIER STREET, SUITE 850 NEW ORLEANS, LA 70112	N/A	PUBLIC	•	2,500 00
CITY PARK OF NEW ORLEANS #1 PALM DRIVE NEW ORLEANS, LA 70124	N/A	PUBLIC	•	5,000 00
CONTEMPORARY ARTS CENTER 900 CAMP STREET NEW ORLEANS, LA 70130	., N/A	PUBLIC	•	50,000 00
HERMANN-GRIMA GALLIER HISTORIC HOUSES 820 ST LOUIS STREET NEW ORLEANS, LA 70112	N/A	PUBLIC	•	5,000 00
KEMPER AND LELIA WILLIAMS FOUNDATION 533 ROYAL STREET NEW ORLEANS, LA 70130	N/A	PRIVATE	•	25,000 00
KID smART 1920 CLIO STREET NEW ORLEANS, LA 70113	N/A	PUBLIC	•	1,000 00
LONGUE VUE HOUSE AND GARDENS CORP NO 7 BAMBOO ROAD NEW ORLEANS, LA 70124-1065	N/A	PUBLIC	•	2 500 00
LOUISIANA ENDOWMENT FOR THE HUMANITIES 938 LAFAYETTE STREET, SUITE 300 NEW ORLEANS, LA 70113	N/A	PUBLIC	•	21,000 00
LOUISIANA MUSEUM FOUNDATION 1000 BOURBON STREET, #B429 NEW ORLEANS, LA 70115	N/A	PUBLIC	*	2,500 00
NEW ORLEANS BOTANICAL GARDENS FOUNDATION #1 PALM DRIVE, CITY PARK NEW ORLEANS, LA 70124	N/A	PUBLIC	•	5,000 00
THE NEW ORLEANS CENTER FOR CREATIVE ARTS INSTITUTE 2800 CHARTRES STREET NEW ORLEANS, LA 70117	N/A	PUBLIC	•	5,000 00
THE NEW ORLEANS JAZZ & HERITAGE FESTIVAL AND FOUNDATION INC 1205 NORTH RAMPART STREET	N/A	PUBLIC	•	20,000 00
NEW ORLEANS, LA 70116 NEW ORLEANS MUSEUM OF ART CITY PARK	N/A	PUBLIC	•	150,000 00
I COLLINS DIBOLL CIRCLE NEW ORLEANS, LA 70179-0123		DI TOLIGO	_	200000
PROSPECT 2 NEW ORLEANS U.S. BIENNIAL, INC 401 BROADWAY, SUITE 2313 NEW YORK, NY 10013	N/A	PUBLIC	•	2,000 00
THE GOOD SHEPHERD SCHOOL A JESUIT NATIVITY MISSION SCHOOL 353 BARONNE STREET NEW ORLEANS, LA 70112	N/A	PUBLIC	٠	5,000 00
THE OGDEN MUSEUM OF SOUTHERN ART UNIVERSITY OF NEW ORLEANS 925 CAMP STREET	N/A	PUBLIC	٠	169,039 70
NEW ORLEANS, LA 70130 THE TRUST FOR PUBLIC LAND 1137 BARRONE STREET NEW ORLEANS, LA 70113	N/A	PUBLIC	•	5,000 00

THE HELIS FOUNDATION I.D. # 72-6020536 2013

IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER OR SUBSTANTIAL CONTRIBUTOR

N/A

ORGANIZATIONAL STATUS OF RECIPIENT PURPOSE OF GRANT OR CONTRIBUTION

<u>AMOUNT</u>

RECIPIENT

YOUNG ASPIRATIONS/YOUNG ARTIST P O BOX 52617 NEW ORLEANS, LA 70152-2617

PUBLIC

4,000 00

479,539 70

[•] QUALIFYING DISTRIBUTION (CONTRIBUTION) MADE TO EACH ENTITY TO ACCOMPLISH THE RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES OF SUCH ENTITY

THE HELIS FOUNDATION

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of F	Kind of Property		Description or Date D acquired			Date sold		
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		36,135.214 PROPERTY TY	SHRS FIDELI	TY ADVISOR		Р	VARIOUS	02/26/20
461,085.		430,817.	II. DECORII	120			30,268.	
		31,485.568 PROPERTY TY			D INSTL	Р	VARIOUS	02/26/2
476,652.		437,459.	FE: SECORII	IES			39,193.	
		3,253.544 S			ORLD GR	Р	VARIOUS	10/14/2
140,000.		160,335.					-20,335.	
		1,578.947 S			UE - TH	P	VARIOUS	10/14/2
29,975.		33,789.					-3,814.	
		5,832.212 S			UITY -	Р	VARIOUS	10/14/2
129,975.		132,625.					-2,650.	
		FIDELITY CA PROPERTY TY			N - THF	P	VARIOUS	12/31/2
72.			11. 0200.11				72.	
		CHARLES SCH			IBUTION	P	VARIOUS	12/31/2
66,855.			II. BEGNII	120			66,855.	
		104,711.805 PROPERTY TY			STRATE	P	VARIOUS	02/26/2
1,336,123.		1,217,593.	. D.				118,530.	
		91541.488 S PROPERTY TY			INSTL	P	VARIOUS	02/26/2
1,385,898.		1,212,601.	IB. BECKII	100			173,297.	
		FIDELITY CA			N - DHH	P	VARIOUS	12/31/2
209.		FROFERIT	FE. SECORTI	165			209.	
		CHARLES SCH			IBUTION	P	VARIOUS	12/31/2
202,925.		PROPERTY	PE: SECORII	165			202,925.	
		HRJ GLOBAL PROPERTY TY				P		12/31/2
156.		FAOPERII IY	FE: SECURII	160			156.	
77571B 2	JJG							PAGE

THE HELIS FOUNDATION 72-6020536
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

KIIIU OI I	Property	Description or Date Dacquired				D acquired			D acquired			
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess FMV o adj ba	ver	Gain or (loss)					
42,949.		HRJ GLOBAL PROPERTY TY	BUY-OUT US	LP - K-1		P	42,949.	12/31/201				
12,313.		HRJ GLOBAL I			K-1	P	22,913.	12/31/201				
7,499.							7,499.					
24,997.		HRJ GLOBAL A			(-1	P	24,997.	12/31/201				
24,997.		HRJ GLOBAL			- K-1	P		12/31/201				
23,114.		PROPERTY TY	PE: SECURIT	TIES			23,114.					
16,052.		PORTFOLIO A			UND IV	- P	16,052.	12/31/201				
10,032.		PORTFOLIO A			UND IV	- P		12/31/201				
29,683.		PROPERTY TY	PE: SECURIT	TIES			29,683.					
'OTAL GAIN(L	oss)						749,000.	=				
						- [

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

If you are	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 2.86	omplete o	only Part I and check the	nis box	▶ 🗓		
	filing for an Additional (Not Automatic) 3-Mo Note Part II unless you have already been gra				i8.		
Electronic fi a corporation 8868 to req Return for instructions)	ling (e-file). You can electronically file Form in required to file Form 990-T), or an addition puest an extension of time to file any of the Transfers Associated With Certain Personal. For more details on the electronic filing of the tomatic 3-Month Extension of Time. On	8868 if yo nal (not au forms liste I Benefit (nis form, vis	u need a 3-month automatic) 3-month extered in Part I or Part II w Contracts, which museit www.irs.gov/efile ar	omatic extension of time to file (6 nsion of time. You can electronica vith the exception of Form 8870, it be sent to the IRS in paper and click on e-file for Chanties & Non	months for lly file Form Information format (see		
	n required to file Form 990-T and requesting						
Part I only					▶□		
All other cor	porations (including 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must use	Form 7004 to request an extension	of time		
to file ıncom	e tax returns			Enter filer's Identifying number, se	e instructions		
Type or	Name of exempt organization or other filer, see in	structions.		Employer identification number (EIN)	or		
print				70 (000506			
File by the	THE HELIS FOUNDATION Number, street, and room or suite no If a P O. bo.	v coo inctru	dian	72-6020536			
due date for	228 ST. CHARLES AVENUE	x, see iiisuud	ctions.	Social security number (SSN)			
filing your return See	City, town or post office, state, and ZIP code For	a foreign ad	dress see instructions				
instructions	NEW ORLEANS, LA 70130	a foreign aa	aress, see mondedons				
Enter the Re	eturn code for the return that this application	is for (file a	separate application f	or each return)	0 4		
					· ——		
Application		Return	Application		Return		
ls For		Code	is For		Code		
	r Form 990-EZ	01	Form 990-T (corpora	tion)	07		
Form 990-B		02	Form 1041-A	I . I . B	08		
Form 4720 Form 990-PI		03	Form 4720 (other tha	an individual)	09		
	(sec. 401(a) or 408(a) trust)	04 05	Form 5227 Form 6069		10		
	(trust other than above)	06	Form 8870		12		
10,111,002,7	(in Edit of itel and it doors)		11011110010		<u> </u>		
The book	s are in the care of MICHAEL F. SCH	OTT					
Telephon	e No. ▶ 504 523-1831	1	FAX No. ▶ 504 68	1-3376			
	anization does not have an office or place of				▶ □		
● If this is fo	or a Group Return, enter the organizati <u>on'</u> s fo	ur digit Gro	oup Exemption Number	(GEN) . If th			
for the whole	e group, check this box ▶ 🔲 . li	f it is for pa	art of the group, check	this box and at	tach		
a list with the	e names and EINs of all members the extens	on is for	<u> </u>				
1 I reque	est an automatic 3-month (6 months for a cor	poration re	equired to file Form 99	0-T) extension of time			
until	08/15_, 20_14, to file the	exempt org	ganization return for th	e organization named above. The e	extension is		
	organization's return for:						
▶ ×	calendar year 20 13 or						
▶∟⊥	tax year beginning	, 20	, and ending	, 20			
2 If the ta	ax year entered in line 1 is for less than 12 m	onths, ched	ck reason Initial i	return Final return			
	hange in accounting period						
	3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
	undable credits See instructions.	4700		3a \$	52,919.		
	application is for Form 990-PF, 990-T, ted tax payments made include any prior year		•		52,919.		
	e due. Subtract line 3b from line 3a. Include				32, 313.		
	onic Federal Tax Payment System). See instru			3c \$	0		
Caution. If yo	u are going to make an electronic funds withdrawa	l (direct deb	it) with this Form 8868, s	ee Form 8453-EO and Form 8879-EO f	or payment		
instructions							
For Privacy A	Act and Paperwork Reduction Act Notice, see instr	uctions.		Form 8868	(Rev. 1-2014)		

Form 8	868 (Rev.	1-2014)				· Page 2
• If y	ou are fil	ling for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part I	l and check this box	▶ X
		mplete Part II if you have already been gra				
		ing for an Automatic 3-Month Extension, o			, ,	
Part	[[A	dditional (Not Automatic) 3-Month Ex	ctension c	of Time. Only file the orig	inal (no copies needed).	
				Ei	nter filer's identifying number, see	instructions
	1	Name of exempt organization or other filer, see in	structions.		Employer identification number (E	
Туре	or					
print		THE HELIS FOUNDATION			72-6020536	
File by t	, ha	Number, street, and room or suite no. If a P O bo	Social security number (SSN)			
due dat	te for	228 ST. CHARLES AVENUE				
filing yo		City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions.		
instruct	ions	NEW ORLEANS, LA 70130				
Enter	the Retu	irn code for the return that this application	is for (file a	a separate application for ea	ach return)	0 4
Appl	ication		Return	Application		Return
ls Fo	r		Code	ls For		Code
Form	1 990 or	Form 990-EZ	01	は ない はい はい はい これ	大学 かいい 人 だいに 一巻	"""""
Form	1 990-BL		02	Form 1041-A		08
Form	n 4720 (i	ndividual)	03	Form 4720 (other than in	dividual)	09
Form	990-PF		04	Form 5227		10
Form	1 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
		trust other than above)	06	Form 8870		12
		complete Part II if you were not already are in the care of ▶ MICHAEL F. SCH		n automatic 3-month exter	sion on a previously filed Forn	n 8868.
• If the for the list will 4	his is for e whole on th the na I request For caler If the tax	ization does not have an office or place of a Group Return, enter the organization's for group, check this box	ur digit Gro f it is for pa n is for. ntil ing	oup Exemption Number (GE art of the group, check this large of the group, and a second of the group, and a second of the group, and a second of the group.	N) If this box ▶ and attained and attained and ending, if this box	
	State in d	ange in accounting period detail why you need the extension ADDIT TA NECESSARY TO COMPLETE A FI			RECEIVE PENDING	
	•	oplication is for Forms 990-BL, 990-PF, 9 dable credits. See instructions	90-T, 4720	O, or 6069, enter the ten	tative tax, less any	52,919.
	estimate	application is for Forms 990-PF, 990-T, d tax payments made. Include any pripal previously with Form 8868		•	dable credits and	52,919.
C	Balance	Due. Subtract line 8b from line 8a Include iic Federal Tax Payment System). See instru		ent with this form, if requir		0
	,	Signature and Verifica		st he completed for D		
knowle	edge and l	of perjury, I declare that I have examined the belief, it is true correct, and complete, and that I	his form, in	cluding accompanying sched ed to prepare this form	lules and statements, and to the $1/2$	best of my
Signatu	ire 🕨 🦽	x an ferral		Title	Date ► // O	(Rev. 1-2014)