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# Form **990-EZ**

# **Short Form Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

			lendar year, or tax year beginning $Jul 1$ , 2013, and ending $Jun 30$	,	2014					
┡		of applicable	C Name of organization	Employer id	entification number					
<b> -</b>	1	s change change	The Mothers Club of Edward Douglas White Catholic High School	72-145	1681					
⊢	Initial re	_		Telephone number						
<u> </u>	Termin		811 Jackson St.	(985)	446-0994					
<b>-</b>	1	led return	City or town, state or province, country, and ZIP or foreign postal code	<u> </u>	<del> </del>					
-				Group Exe	emption •					
<u>_</u>	_	unting Meth			rganization is not					
1			/A required to							
j					or 990-PF).					
		•	(cited dilly dile)		·					
K		of organiz								
L			, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.	▶ S	55,318.					
P:	ert l		ue, Expenses, and Changes in Net Assets or Fund Balances (see the instruct							
17.5	J1 L F		the organization used Schedule O to respond to any question in this Part I							
_	1		ons, gifts, grants, and similar amounts received	. 1	55,083.					
	2		service revenue including government fees and contracts	. 2	33,003.					
	3	_	nip dues and assessments	. 3						
	4		nt income	. 4	235.					
	5 a		ount from sale of assets other than inventory							
	h		t or other basis and sales expenses	-						
			s) from sale of assets other than inventory (Subtract line 5b from line 5a)	5 6						
	6			-	<del></del>					
R		6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000)   6a								
E V	1		ome from fundraising events (not including \$ of contributions	-						
2014 mczm <mx< td=""><th>  "</th><td></td><td>raising events reported on line 1) (attach Schedule G if the sum</td><td></td><td></td></mx<>	"		raising events reported on line 1) (attach Schedule G if the sum							
20 1			oss income and contributions exceeds \$15,000) 6 b							
<b>₽</b> 3	С	_	ct expenses from gaming and fundraising events 6 c	1						
	d	Net incom	ne or (loss) from gaming and fundraising events (add lines 6a and	7						
$\mathcal{C}$	"	6b and su	btract line 6c)	. 6 d						
DE.	7 a	Gross sale	es of inventory, less returns and allowances							
$\Box$	Ь	Less cost	t of goods sold	7						
ก๊า	C	Gross pro	fit or (loss) from sales of inventory (Subtract line 7b from line-7a)	. 7c						
SCANNED 	8	Other reve	enue (describe in Schedule O)	ue 8						
	9		enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	55,318.					
<u></u>	10		d cimilar amounts paid (list in Schodulo O)	. 10	39,095.					
80	11	Benefits p	d similar amounts paid (list in Schedule O)	. 11						
E	12	Salaries, d	other compensation, and employee benefits	. 12	-					
X P E N	13	Profession	nal fees and other payments to independent contractors OGDEN, UT	. 13						
Ŋ	14		by, rent, utilities, and maintenance	. 14	6,372.					
S	15	Printing, p	oublications, postage, and shipping	15	0,5,2.					
S	16		enses (describe in Schedule O)		3,663.					
	17		enses. Add lines 10 through 16	<b>►</b> 17	49,130.					
	18		(deficit) for the year (Subtract line 17 from line 9)	. 18	6,188.					
ASSETT	19	Net asset	s or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year							
E E	'	figure rep	orted on prior year's return)	. 19	35,909.					
TT S	20	Other cha	nges in net assets or fund balances (explain in Schedule O)	. 20						
	21		s or fund balances at end of year. Combine lines 18 through 20	▶ 21	42,097.					
BA	A Fo		rk Reduction Act Notice, see the senarate instructions		Form 990-F7 (2013)					

Form	990-EZ (2013) The Mothers Club	of Edward Douglas W	<u>hite Catholic H</u>	igh School 72-	-145	1681 Page 2
Pa	til Balance Sheets (see the instruction used Sched	ructions for Part II)	on in this Dart II			. П
	Check if the organization used Sched	ule O to respond to any questi		A) Beginning of year		(B) End of year
22	Cash, savings, and investments			21,483		28,049.
23	Land and buildings			14,426	-	14,048.
24	Other assets (describe in Schedule O)			0.	24	0.
25	Total assets			35,909	25	42,097.
26	Total liabilities (describe in Schedule O).			0.	26	0.
27	Net assets or fund balances (line 27 of c	olumn (B) must agree with line	∍ 21)	35,909	27	42,097.
Pai	Statement of Program Service A	ccomplishments (see the ins	structions for Part III)	<b></b>		Expenses
	Check if the organization used Sche	edule O to respond to any que	stion in this Part III			uired for section 501
What	is the organization's primary exempt purpose? Su	pport for EDW Cath	olıc HS			and 501(c)(4)
Desc	rnbe the organization's program service acc sured by expenses. In a clear and concise n	omplishments for each of its th	ree largest program se	rvices, as	4947	(a)(1) trusts, optional
bene	fited, and other relevant information for eac	h program title.	storiaca, the number of	persons	for ot	hers)
28	Payments to assist esucaa	tion and religious	3			
	advancement of high school					
	White Catholic High School	1				
	(Grants \$ 0.) If the	s amount includes foreign grai	nts, check here		28 a	39,095.
29						
				<b>-</b>		
	(Grants \$ ) If the	s amount includes foreign grai	nts, check here		29 a	
30						
	(Grants \$ ) If the	s amount includes foreign gran	nts, check here	· · · · · · •	30 a	
31	Other program services (describe in Sched					
20		s amount includes foreign gran			31 a	
32					32	39,095.
Pai	List of Officers, Directors, Check if the organization used Sche					
	Check if the organization asca cont	conc o to respond to any que	don in this rait iv	· · · · · · · · · · ·	<u></u>	<u> </u>
		(h) Average house par	(a) Banadahla assassas	(d) Health benefits,		
	(a) Name and Title	(b) Average hours per week devoted to	(c) Reportable compensation (Forms W-2/1099-MISC)	Contributions to employ	ee	(e) Estimated amount of other compensation
		(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and defer compensation	ee	(e) Estimated amount of other compensation
	y Solgnet	week devoted to position	(Forms W-2/1099-MISC)	contributions to employ benefit plans, and defer	ee	(e) Estimated amount of other compensation
Pre	y Solgnet sident	week devoted to	(Forms W-2/1099-MISC)	contributions to employ benefit plans, and defer compensation	ee	(e) Estimated amount of other compensation
<u>Pre</u>	y <u>Solgnet</u> sident ri Konur	week devoted to position  3.00	(Forms W-2/1099-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and defer compensation	ree Ted	other compensation
Pre Ter 1st	y Solgnet sident ri Konur V-Pres	week devoted to position	(Forms W-2/1099-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and defer compensation	ree Ted	other compensation
Pre Ter 1st	y Solgnet sident ri Konur V-Pres lia Benoit	3.00	(Forms W-2/1089-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and defer compensation	0 . 0 .	O .
Ter 1st Tar 2nd	y Solgnet sident ri Konur V-Pres ia Benoit V-Pres	week devoted to position  3.00	(Forms W-2/1099-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and defer compensation	O.	other compensation
Ter 1st Tar 2nd Ela	y Solgnet sident Li Konur V-Pres Lia Benoit V-Pres	3.00 3.00 3.00	(Forms W-2/1099-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and defer compensation	0. 0.	O.  O.
Ter 1st Tar 2nd Ela	y Solgnet sident ri Konur V-Pres ia Benoit V-Pres line Waguespack	3.00	(Forms W-2/1089-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and defer compensation	0 . 0 .	O .
Present 1st Tar 2nd Elas Tree And	y Solgnet sident ri Konur V-Pres ia Benoit V-Pres line Waguespack asurer	3.00 3.00 3.00	(Forms W-2/1099-MISC) (If not paid, enter -0-)  0	contributions to employ benefit plans, and defer compensation	0. 0.	0 . 0 . 0 .
Present 1st Tar 2nd Elas Tree And	y Solgnet sident ri Konur V-Pres ia Benoit V-Pres line Waguespack	3.00 3.00 3.00	(Forms W-2/1099-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and defer compensation	0. 0.	O.  O.
Present 1st Tar 2nd Elas Tree And	y Solgnet sident ri Konur V-Pres ia Benoit V-Pres line Waguespack asurer	3.00 3.00 3.00	(Forms W-2/1099-MISC) (If not paid, enter -0-)  0	contributions to employ benefit plans, and defer compensation	0. 0.	0 . 0 . 0 .
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Part V   Other Information (Note the Shodule A and personal banefit contract statement requirements in the notifications for Part V (hose) if the organization used Schedule (D or respond to any question in this Part V   Vest   Note	Fo	rm 990-EZ (2013) The Mothers Club of Edward Douglas White Catholic High School 72-145168	1	Р	age 3
33 Did the urganization inappage in any significant distuly not inserted to the IRS?  18 Yes, Provide detailed description of each orbity in Schedule O.  34 Was any significant durages nade to the organization of the chappe of Schedule of Des institutions.  35 Did the organization interes of the description of each orbity in Schedule O.  35 Did the organization have unrelated business gross recome of \$1,000 or more during the year from business activities.  35 Did the organization have unrelated business gross recome of \$1,000 or more during the year from business activities.  35 Did the organization interes of \$6,04 to \$100,000 or more during the year from business activities.  35 Did the organization undergo a \$6,04 to \$100,000 or more during the year from Schedule O.  35 Did the organization undergo a \$6,04 to \$100,000 or more during the year from Schedule O.  35 Did the organization undergo a Schedule N.  35 Did the organization undergo a selection \$100,000 or more during the year from \$90 or for the year? If Yes, complete schedule C. Part III.  36 Did the organization undergo a selection \$100,000 or the schedule Organization undergo a selection \$100,000 organization undergo a selection \$100,000 organization undergo and selections. The selection \$100,000 organization undergo a selection \$100,000 organization undergo and selections. The selection \$100,000 organization undergo and selection \$100,000 organization undergo and selection \$100,000 organization the selection \$100,000 organization undergo and selection \$100,000 organization selection \$100,000 organization undergo and selection \$100,000 organization undergo and selection \$100,000 organization undergo	P	art V Other Information (Note the Schedule A and personal benefit contract statement requirements in			
33 Use the organization engage in any syndroctant activity not previously reported to the IRS7  34 Were any spiring of Valence and the organization previously reported to the IRS7  35 Use the organization shall be the organization shall be though on Scholds 0 (see extinution)  35 Such as those reported on lines 2, 8a, and 7a, among others?  35 Did the organization as excelled business spiring snowed 19 IRS7  35 Use 11 Yes, 1 to into 28a, has the organization fleval englished business spiring snowed 19 IRS7  35 Use 11 Yes, 1 to into 28a, has the organization fleval englished business spiring snowed 19 IRS7  35 Use 11 Yes, 1 to into 28a, has the organization fleval englished business spiring snowed 19 IRS7  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assest during the year? If Yes, complete Schedule C, Part III .  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assest during the year? If Yes, complete spinicality parts of Schedule N .  37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 19 IRS7  38 a Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by his return?  38 a Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by his return?  38 a Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by his return?  39 a Section 501(c)(7) organizations. Enter amount of tax well-and the prior the prior the covered to			• • •	Voc	· L
34 We any significant changes made to the organizaring or governing documents? If Yes, allah a conformed copy of the amended documents if they reflect a change of the organizations and Changes are change of Schedule (Dee multiculos).  35 a Dut the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 5a, and 7a, among others?).  bit Yes, to line 35a, has the organization filed a Form 990-T for the year? If Yos, provide an explanation in Schedule O.  55b	3:	3 Did the organization engage in any significant activity not previously reported to the IRS?  If 'Yes' provide a detailed description of each activity in Schedule O	33	103	
35a Dut the organization have unreliated business gross income of \$1,000 or more during the year from business activities (such as those reported on these 2, 6s, and 7s, among others)?  b If Yes, 1c line 35s, has the organization filed a Form 990-T for the year? If No. provide an explanation in Schedule O.  55b	34		<u> </u>	<del> </del>	<del>                                     </del>
(such as those reported on lines 2, 6a, and 7a, among others)?  b If Yes's: In line 35a, bas the organization field a form 990-Tir of the year? If No. provide an explanation in Schedule O  55b  c Was the organization undergo a liquidation, dissolution, termination, or significant organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete Schedule (C. Part III and provide organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete appricable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions [37a] 0.0, b) of the organization borrow from, or make any losans to, any officer, director, fusities, or key employee or were any such losans made in a prior year and still outstanding at the end of the tax year covered by this return?  38a Did the organization borrow from, or make any losans to, any officer, director, fusities, or key employee or were any such losans made in a prior year and still outstanding at the end of the tax year covered by this return?  38a Did the organization of the provision of the properties of the prope			34		Х
b M Yes, to line 35s, has the organization flied a Form 990-T for the year? if No. provide an explanation in Schedulo C was the organization undergo in 501(c)(4) 501(c)(5) to 501(c)(5) organization undergo a disjustation, dissolution, termination, or significant provides an exposition undergo a disjustation, dissolution, termination, or significant disposition of net assets during the year? if Yes, complete splicable parts of Schedulo C, Part III	3		35.2		V
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If Yes, complete Schedule C, Part III 35			<del></del>	<u> </u>	<del>  ^</del>
reporting, and proxy tax requirements during the year? If Yes, complete Schedule C, Part III. 35c X 35d Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N 35d Enter amount of political expenditures, direct or indirect, as described in the instructions		c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice.			
disposition of net assets during the year? If Yes, complete applicable parts of Schedule N		reporting, and proxy tax requirements during the year? If Yes,' complete Schedule C, Part III	35 c	ļ	Х
376 Either amount of potitical expenditures, direct or indirect, as described in the instructions   378   0   376   X   388 Did the organization borrow from, or make any loans to, any officer, director, fusitee, or key employee or were any such loans made in a prior year and still obustanding at the end of the tax year covered by this return?   38a   X    58 Did the organization borrow from, or make any loans to, any officer, director, fusitee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?   38a   X    59 Section 501(c)(7) organizations. Einter a   38a   38b	36		36		l v
b Did the organization file Form 1120-POL for this year?  38 A) Did the organization file Form 1120-POL for this year?  38 A) Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38 b  38 b  39 b  40 b If Yes; complete Schedule, IPart II and enter the total amount involved.  39 Section 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 * section 4911 * section 4912 * section 4955 * b  50 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 * b  50 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or did it engage in an excess benefit transaction or any of its prior Forms 990 or 990-E27 If Yes; complete Schedule, IPart I  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualited persons during the rear amount of tax on line 40c reimbursed by the organization.  c All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 888-1.  40 E  42a The organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 888-1.  41 List the states with which a copy of this return is filed. EDUL's Landa.  5 All any time during the celendar 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 accountry.  4 Ab All any time during the celendar 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 financ	37		-	<del> </del>	Ļ
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38 a			37ь	Ť	х
b If Yes, complete Schedule L, Part II and enter the total amount involved  39 Section 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 * s	38	B a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	20.		
as Section 501(c)(7) organizations. Enter a initiation fees and capital contributions included on line 9. b Gross receipts, included on line 9, for public use of club facilities.  40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ** section 4911 ** section 4912 ** Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 * D Section 501(c)(3) and 501(c)(4) organizations. Did the organization in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 If Yes, complete foreign 695, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 If Yes, leaving the Sections 4912, 495, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization and party to a prohibited tax sheller transaction of the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the calendar year, did the organization a party to a prohibited tax sheller transaction? If Yes, complete 5 mem 8865 T.  42a The organizations. 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)?  11 Yes, enter the name of the foreign country (such as a bank account, securities account, or other financial account)?  22 If Yes, enter the name of the foreign country:  33 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 990 must be completed instead of Form 990			38 a		×
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  B Section 501(c)(3) and 501(c)(4) organizations. Did the organization during the year under: section 4911			]		
b Gross recepts, included on line 9, for public use of club facilities 39b  40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year unders section 4911 *	39				
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 * section 4912 * section 4955 * b Sections 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 * b Section 501(c)(3) and 501(c)(4) organizations. Did the organization in a prior year that has not been reported on any of this prior forms 900 or 900-E72 if Yes; complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8865-T.  42 a The organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8865-T.  42 a The organizations books are nice of Ann T Boudreaux, CPA Telephone no* (985) 446-0994 Localed at 901 Ridgefield Rot, Thiodaux La ZiP+4* 70301  Yes No financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If Yes, enter the name of the foreign country (such as a bank account, securities account, or other financial account)?  42 but the organization of exceptions and filing requirements for Form TDF 90-22 1, Report of Foreign Bank and Financial Accounts c At any time during the celeridar year, did the organization maintain an office outside of the U.S ?  43 Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44 Did the organization maintain any donor advised funds during the year? If Yes, Form 990 must be completed instead of Form 990-EZ but the organization organization have a controlled entity of the organiza			1		
b Section 4912			4		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 if Yes, complete Schedule L, Part I   e Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimburised by the organization.  e All organizations. At any time during the lax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8886-1.  List the states with which a copy of this return is filled Louisiana  12	4(	, ,			
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c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the lax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T.  41 List the states with which a copy of this return is filed   Louisiana  42 a The organizations books are in care of  Ann T Boudreaux, CPA	1	transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported	40 b		X
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See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  c At any time during the calendar year, did the organization maintain an office outside of the U.S?		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42 b		Х
the calendar year, did the organization maintain an office outside of the U.S?		If 'Yes,' enter the name of the foreign country:			
the calendar year, did the organization maintain an office outside of the U.S?					
the calendar year, did the organization maintain an office outside of the U.S?					
the calendar year, did the organization maintain an office outside of the U.S?		See the including for exceptions and films requirements for Form TD F 00 22.4. Depart of Formato Daylor of Firms and A			
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			42.		Х
and enter the amount of tax-exempt interest received or accrued during the tax year			420		
and enter the amount of tax-exempt interest received or accrued during the tax year					
and enter the amount of tax-exempt interest received or accrued during the tax year	£				
and enter the amount of tax-exempt interest received or accrued during the tax year				F	
44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	43			^ ∐	
44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		and enter the amount of tax-exempt interest received or accrued during the tax year		Ves.	No
b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44	a Did the organization maintain any donor advised funds dunng the year? If 'Yes,' Form 990 must be completed instead of Form 990-FZ	44 2		
c Did the organization receive any payments for indoor tanning services during the year?		b Did the organization operate one or more hospital facilities during the year? If 'Yes' Form 990 must be completed			
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?  If 'No,' provide an explanation in Schedule O				<del> </del>	
45 a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?			++0		X_
		lf 'No,' provide an explanation in Schedule O	44 d		
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45		45 a		Χ
		b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).	45 b		v

Page 3

Form 990-l	<b>EZ</b> (2013) The Mothers Club of E	Edward Douglas W	hite Catholic Hi	gh School 72-14!	51681	P	age 4
						Yes	No
	he organization engage, directly or indirectly						
	idates for public office? If 'Yes,' complete So		· · · · · · · · · · · · · · · · · · ·		46		X
Part VI	Section 501(c)(3) organizations						
	All section 501(c)(3) organization for lines 50 and 51.	s must answer que	stions 47-49b and 5	2, and complete the	tables		
		O. 4	and and the shall be the shall				
	Check if the organization used Schedule	O to respond to any que	estion in this Part VI		· · · · · ·		لمليخ
47 Did tl	he organization engage in lobbying activities	or have a section 501(l	h) election in effect during	the tax year? If 'Yes,'	۲	Yes	No
		•		•	47		_x_
48 Is the	e organization a school as described in secti	on 170(b)(1)(A)(ii)? If 'Y	es,' complete Schedule E		48		Х
49 a Did th	he organization make any transfers to an ex	empt non-charitable rela	ated organization?		49a		Х
	s,' was the related organization a section 52	_					<u> </u>
	plete this table for the organization's five hig				key		
empi	oyees) who each received more than \$100,0	oou of compensation fro	m the organization. If the	re is none, enter None.	<del></del>		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated other comp		
			<u> </u>	1	ļ		
none_	<b></b>		1				
			<del></del>		<del></del>		
	<del></del>						
				· · · · · · · · · · · · · · · · · · ·			
	number of other employees paid over \$100						
51 Comp	plete this table for the organization's five hig pensation from the organization. If there is no	hest compensated indep	pendent contractors who	each received more than	ı \$100,000 of	ſ	
	(a) Name and business address of each independent cont		(b) Type o	of service	(c) Compe	encation	
	(1) Name and additional additional and additional participations participations and additional additional and additional		(=) 1, po		(c) comple	3130101)	
none							
			<del></del>	<del></del> -			
		<del></del>					—
		·					
		<del>-</del>			-		
<b>d</b> Total	number of other independent contractors ea	ach receiving over \$100,	,000				
52 Did th	ne organization complete Schedule A? Note	. All section 501(c)(3) or	ganizations and 4947(a)	(1) nonexempt			
	table trusts must attach a completed Schedu				.► X Yes	L	_No
Under penalties true, correct, ar	s of perjury, I declare that I have examined this return, inclind complete, Declaration of greparer (other than officer) is	uding accompanying schedules besed on all information of whic	and statements, and to the best on h preparer has any knowledge	of my knowledge and belief, it is			
	When I Wagney	tu —		11/7/2014			
Sign	Signature of officer // //			Date			
Here	Elaine T Waguespack	. Treasure					
	Type or print name and title						
	Print/Type preparer's name	Preparer's signature	Date	Chack X of	TIN		
Paid	Ann T. Boudreaux	morando	UWUUJ <sub>09/24/1</sub>	4 self-employed P	00841336	5	
Preparer	Firm's name > Ann T. Boudreaux	CPA	1		<u> </u>		
Use Only	Firm's address > 901 Ridgefield F	Road		Firm's EIN ►	72-1047	611	
	Thibodaux		LA 70301	Phone no (98	<u>5) 446-0</u>	994	
May the IRS	S discuss this return with the preparer show	n above? See instructioi	ns		.► XYes	[]r	No
			· · · · · · · · · · · · · · · · · · ·		Form 990	- <b>EZ</b> (2	(013)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

The Mothers Club of Edward Douglas White Catholic High School 72-1451681 | Part | | 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.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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. Type III - Functionally integrated d Type III - Non-functionally integrated 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 If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box . Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes\_ Nο A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) A family member of a person described in (i) above? . . . . 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . . . 11 g (iii) Provide the following information about the supported organization(s) h (iii) Type of organization (described on lines 1-9 above or IRC section (i) Name of supported organization (IV) Is the (v) Did you notify the organization in (vii) Amount of monetary (vi) is the organization in olumn (i) listed in organization in support column (i) of your support? column (i) (see instructions)) your governing document? organized in the Yes Yes No No Yes (A) (B) (C) (D) (E) Total BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2013

Sec	Section A. Public Support								
	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	48,492.	48,963.	50,671.	59,661.	55,083.	262,870.		
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	48,492.	48,963.	50,671.	59,661.	55,083.	262,870.		
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 · · · · ·						262,870.		
Sec	tion B. Total Support								
	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d</b> ) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	48,492.	48,963.	50,671.	59,661.	55,083.	262,870.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	433.	333.	236.	221.	235.	1,458.		
9	Net income from unrelated business activities, whether or not the business is regularly carned on						2, 1001		
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						264,328.		
12	Gross receipts from related activities	es, etc (see instruc	tions)			12			
13	First five years. If the Form 990 is organization, check this box and st	for the organizatio	n's first, second, th	nird, fourth, or fifth t	tax year as a secti	on 501(c)(3)	▶ □		
Sec	tion C. Computation of Pul	blic Support P	ercentage						
	Public support percentage for 2013		•			<del></del>	99.45%		
15	Public support percentage from 20	12 Schedule A, Pa	rt II, line 14		• • • • • • • • •	15	99.27%		
16 a	33-1/3% support test — 2013. If t and stop here. The organization q	the organization did ualifies as a publicl	not check the box y supported organi	on line 13, and the zation	e line 14 is 33-1/39	% or more, check th	s box		
b	33-1/3% support test — 2012. If the and stop here. The organization of	ne organization did qualifies as a public	not check a box or ly supported organ	n line 13 or 16a, ar ization	nd line 15 is 33-1/3	% or more, check th	nis box		
17 a	17 a 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								
	10%-facts-and-circumstances te or more, and if the organization me organization meets the 'facts-and-o	eets the 'facts-and-o circumstances' test.	circumstances' test The organization o	, check this box an qualifies as a publi	id <b>stop here.</b> Expl cly supported orga	ain in Part IV how the inization	ne ▶ 🗍		
18	Private foundation. If the organization	ation did not check	a box on line 13, 1	6a, 16b, 17a, or 17	7b, check this box	and see instructions	i ▶ 🗍		

	Organizations Described in	

(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.)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2009	<b>(b)</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 fumished 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		· · · · · · · · · · · · · · · · · · ·				
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	Total. Add lines 1 through 5 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						
Ć	: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)		, i				
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
С	Add lines 10a and 10b					-	<del>                                     </del>
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 Ins 9,10c 11 and 12)						7
14	First five years. If the Form 990 is organization, check this box and s	for the organization	on's first, second, t	hird, fourth, or fifth	tax year as a sec	ion 501(c)(3)	▶ □
Sec	tion C. Computation of Pu						
15	Public support percentage for 2013						8
16	Public support percentage from 20	012 Schedule A, Pa	art III, line 15	<i>.</i>	<u> </u>	16	9
Sec	tion D. Computation of Inv	estment Incor	ne Percentag	e			
17	Investment income percentage for	2013 (line 10c, co	lumn (f) divided by	line 13, column (f	Ď)	17	9
18	Investment income percentage fro	m 2012 Schedule	A, Part III, line 17			18	ક
19 a	33-1/3% support tests — 2013. If is not more than 33-1/3%, check the	the organization d nis box and <b>stop h</b>	id not check the bo ere. The organizat	ox on line 14, and tion qualifies as a	line 15 is more that publicly supported	n 33-1/3%, and I organization	ine 17
b	33-1/3% support tests — 2012. If line 18 is not more than 33-1/3%,	the organization d	id not check a box <b>stop here.</b> The or	on line 14 or line ganization qualifie	19a, and line 16 is es as a publicly sup	more than 33-1/ ported organizat	3%, and
20	Private foundation. If the organiz	ation did not check	a box on line 14,	19a, or 19b, check	this box and see i	nstructions	<u> </u>

Schedule A	(Form 990 or 990-EZ) 2013	The Mothers Club of	Edward Douglas White	Catholic High School	<u>/2-1451681</u>	Page 4
Part IV	Supplemental Informa or 17b; and Part III, line (See instructions).	tion. Provide the e 12. Also complete t	xplanations require his part for any add	d by Part II, line 10; ditional information.	Part II, line 17a	
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### **SCHEDULE 0** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2013 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 72-1451681 The Mothers Club of Edward Douglas White Catholic High