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Form **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.

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

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning

, 2014, and ending

, 20

Name of foundation

C SPIRE WIRELESS FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

1018 HIGHLAND COLONY PKWY

360

City or town, state or province, country, and ZIP or foreign postal code

RIDGELAND, MS 39157-2068

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at

end of year (from Part II, col (c), line

16) ▶ \$

7,056

J Accounting method ☒ Cash ☐ Accrual☐ Other (specify) _____

(Part I, column (d) must be on cash basis.)

A Employer identification number

20-3426826

B Telephone number (see instructions)

601-974-7645

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue

- 1 Contributions, gifts, grants, etc., received STMT 1
- 2 Check ☐ if the foundation is not required to attach Sch B
- 3 Interest on savings and temporary cash investments.
- 4 Dividends and interest from securities
- 5a Gross rents
- b Net rental income or (loss)
- 6a Net gain or (loss) from sale of assets not on line 10
- b Gross sales price for all assets on line 6a
- 7 Capital gain net income (from Part IV, line 2)
- 8 Net short-term capital gain.
- 9 Income modifications
- 10a Gross sales less returns and allowances
- b Less Cost of goods sold
- c Gross profit or (loss) (attach schedule)
- 11 Other income (attach schedule)
- 12 Total. Add lines 1 through 11

559,000

0

0

Operating and Administrative Expenses

- 13 Compensation of officers, directors, trustees, etc.
- 14 Other employee salaries and wages
- 15 Pension plans, employee benefits
- 16a Legal fees (attach schedule)
- b Accounting fees (attach schedule)
- c Other professional fees (attach schedule)
- 17 Interest
- 18 Taxes (attach schedule) (see instructions).
- 19 Depreciation (attach schedule) and depletion
- 20 Occupancy
- 21 Travel, conferences, and meetings
- 22 Printing and publications
- 23 Other expenses (attach schedule) STMT 2
- 24 Total operating and administrative expenses. Add lines 13 through 23.
- 25 Contributions, gifts, grants paid
- 26 Total expenses and disbursements. Add lines 24 and 25

21,218

1,623

26,684

49,525

620,050

669,575

21,218

1,623

26,684

49,525

620,050

669,575

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

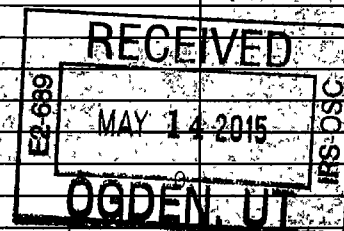
-110,575

b Net investment income (if negative, enter -0-)

0

c Adjusted net income (if negative, enter -0-)

0



13

SCANNED MAY 21 2015

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing		117,631	7,056	7,056
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶			0	
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶			0	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶			0	
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U S and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)				
	c	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis ▶				
		Less accumulated depreciation ▶ (attach schedule)			0	
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation ▶ (attach schedule)			0	
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)		117,631	7,056	7,056
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)		0	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, . . . ▶ <input type="checkbox"/> check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds		117,631	7,056	
	30	Total net assets or fund balances (see instructions)		117,631	7,056	
	31	Total liabilities and net assets/fund balances (see instructions)		117,631	7,056	

Part 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	117,631
2	Enter amount from Part I, line 27a	2	-110,575
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	7,056
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	7,056

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a NONE					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a			0		
b			0		
c			0		
d			0		
e			0		
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
a		0	0		
b		0	0		
c		0	0		
d		0	0		
e		0	0		
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	0	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8			3		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	594,907	122,090	4.8727
2012	661,732	112,333	5.8908
2011	534,411	71,424	7.4822
2010	470,280	91,028	5.1663
2009	474,905	93,822	5.0618
2 Total of line 1, column (d)			2 28.4738
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 5.6948
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			4 106,402
5 Multiply line 4 by line 3			5 605,938
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 0
7 Add lines 5 and 6			7 605,938
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			8 669,575

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		1	0
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0
3 Add lines 1 and 2		3	0
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0
6 Credits/Payments:			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7		0
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		0
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ 0 (2) On foundation managers \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MISSISSIPPI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV.		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>www.cspire.com/company_info/about/programs/foundation</u>	13	X	
14	The books are in care of <u>ELIZABETH BYRD</u> Telephone no. <u>601-974-7645</u> Located at <u>1018 HIGHLAND COLONY PKWY, SUITE 360, RIDGELAND, MS</u> ZIP+4 <u>39157-2068</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. <u>15</u> N/A			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the foreign country <u></u>	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) <u>N/A</u>	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u></u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.) <u>N/A</u>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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 2014?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ NoOrganizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 3		21,218	0	0

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ☐ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	▶ 0

Form **990-PF** (2014)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	108,022
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c)	1d	108,022
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	108,022
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions).	4	1,620
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	106,402
6	Minimum investment return. Enter 5% of line 5	6	5,320

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	5,320
2a	Tax on investment income for 2014 from Part VI, line 5	2a	0
b	Income tax for 2014. (This does not include the tax from Part VI.)	2b	0
c	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,320
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	5,320
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	5,320

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	669,575
b	Program-related investments - total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	669,575
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	669,575

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				5,320
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2014:				
a From 2009 470,214				
b From 2010 465,729				
c From 2011 530,840				
d From 2012 656,115				
e From 2013 588,802				
f Total of lines 3a through e	2,711,700			
4 Qualifying distributions for 2014 from Part XII, line 4. ► \$ 669,575				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2014 distributable amount				5,320
e Remaining amount distributed out of corpus	664,255			
5 Excess distributions carryover applied to 2014. (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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,375,955			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions		0		
e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instructions			0	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	470,214			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	2,905,741			
10 Analysis of line 9:				
a Excess from 2010 465,729				
b Excess from 2011 530,840				
c Excess from 2012 656,115				
d Excess from 2013 588,802				
e Excess from 2014 664,255				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year		Prior 3 years		(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					0
b 85% of line 2a	0	0	0	0	0
c Qualifying distributions from Part XII, line 4 for each year listed					0
d Amounts included in line 2c not used directly for active conduct of exempt activities					0
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	0	0	0	0	0
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

MEREDITH CREEKMORE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

ELIZABETH BYRD, 1018 HIGHLAND COLONY PARKWAY, STE 360, RIDGELAND, MS 39157 (601) 355-1522

b The form in which applications should be submitted and information and materials they should include:

REQUESTS ARE MADE BY FORMAL GRANT REQUEST FORM AND APPROVED BY THE BOARD

c Any submission deadlines:

N/A

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

N/A

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year SEE STATEMENT 4				620,050
Total			3a	620,050
b Approved for future payment N/A				0
Total			3b	0

Enter gross amounts unless otherwise indicated.

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.

▼

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		X
(2) Other assets	1a(2)		X
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
(3) Rental of facilities, equipment, or other assets	1b(3)		X
(4) Reimbursement arrangements	1b(4)		X
(5) Loans or loan guarantees	1b(5)		X
(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

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

Signature of officer or trustee

Date _____

EXECUTIVE DIRECTOR

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

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

OMB No 1545-0047

2014▶ **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.****Name of the organization****Employer identification number**

C SPIRE WIRELESS FOUNDATION

20-3426826

Organization type (check one)**Filers of:****Section:**

Form 990 or 990-EZ

☐

501(c)() (enter number) organization

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

527 political organization

Form 990-PF

☒

501(c)(3) exempt private foundation

☐

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

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**☒

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules☐

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year ▶ \$ _____**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on 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).

Name of organization C SPIRE WIRELESS FOUNDATION	Employer identification number 20-3426826
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CELLULAR SOUTH, INC. 1018 HIGHLAND COLONY PARKWAY, STE 330 RIDGELAND, MS 39157-2061	\$ 550,000.00	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ELIZABETH C BYRD 4793 CRESTWOOD DRIVE JACKSON, MS 39211-4915	\$ 8,000.00	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	SIDNEY CREWS 198 KIRKWOOD PL JACKSON, MS 39211-6022	\$ 1,000.00	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

C SPIRE WIRELESS FOUNDATION

Employer identification number

20-3426826

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----

Name of organization

Employer identification number

C SPIRE WIRELESS FOUNDATION

20-3426826

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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
---	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	

FORM 990-PF

OTHER EXPENSES

STATEMENT 1

PART I, LINE 1 - CONTRIBUTIONS, GIFTS, GRANTS, ETC. RECEIVED

SEE SCHEDULE B

FORM 990-PF	OTHER EXPENSES			STATEMENT 2
<u>DESCRIPTION</u>	(A) <u>EXPENSES</u> <u>PER BOOKS</u>	(B) <u>NET INVEST-</u> <u>MENT INCOME</u>	(C) <u>ADJUSTED</u> <u>NET INCOME</u>	(D) <u>CHARITABLE</u> <u>PURPOSES</u>
BANK CHARGES	54	0		54
CONTRACT LABOR	26,093	0		26,093
SUPPLIES	151	0		151
WEBSITE	195	0		195
MEALS	191	0		191
TO FORM 990-PF, PG 1, LN 23	26,684	0	N/A	26,684

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 3

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVG HRS / WK</u>	<u>COMPENSATION</u>	<u>EMPLOYEE BEN PLAN CONTR</u>	<u>EXPENSE ACCOUNT</u>
ELIZABETH BYRD 1018 HIGHLAND COLONY PKWY, STE 360 RIDGELAND, MS 39157	EXEC DIR 8.00	21,218	0	0
HU MEENA 1018 HIGHLAND COLONY PKWY, STE 300 RIDGELAND, MS 39157	PRESIDENT 0.00	0	0	0
WESLEY GOINGS 1018 HIGHLAND COLONY PKWY, STE 500 RIDGELAND, MS 39157	VICE PRES 0.00	0	0	0
MEREDITH CREEKMORE 1018 HIGHLAND COLONY PKWY, STE 500 RIDGELAND, MS 39157	SECR / TREAS 0.00	0	0	0
JIM RICHMOND 1018 HIGHLAND COLONY PKWY, STE 340 RIDGELAND, MS 39157	DIRECTOR 0.00	0	0	0
TO FORM 990-PF, PG 6, PART VIII		<u>21,218</u>	<u>0</u>	<u>0</u>

FORM 990-PF

PART XV - SUPPLEMENTARY INFORMATION

STATEMENT 4

3. GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME	RECIPIENT ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF CONTRIBUTION (EVENT)	AMOUNT
JSU/MCWI	350 West Woodrow Wilson Dr. Jackson, MS 39213-7681	PC	Child Welfare Conference	\$ 2,500.00
Belhaven University	2323 Southwood Drive Jackson, MS 39211	PC	Boot Camp	\$ 1,000.00
Salvation Army	P.O. Box 31954 Jackson, MS 39286	PC	Donation for Fire Damage	\$ 10,000.00
Sigma Nu Fraternity	P.O. Box 8258 University, MS 38677	PC	Charity Bowl	\$ 1,000.00
200 Million Flowers	128 N. Maple Street, Suite A Ridgeland, MS 39157	PC	Mississippi Heart Gallery	\$ 2,000.00
Junior Auxiliary of Rankin County Mississippi, Inc.	P.O. Box 1484 Brandon, MS 39043	PC	Charity Ball	\$ 2,000.00
The ASU Small Farmers	233 East Hamilton Street Jackson, MS 39202	PC	Small Farmers Conference	\$ 2,500.00
Mississippi Children's Museum	P.O. Box 55409 Jackson, MS 39296-5409	PC	Education Fund	\$ 100,000.00
Mississippi SIDS Alliance	101 First Choice Drive Madison, MS 39110	PC	Walk for Babies	\$ 2,500.00
Catholic Charities	200 N. Congress Street, Suite 100 Jackson, MS 39201	PC	USTA Women's Challenger Tennis Tournament	\$ 2,500.00
Wilson Research Foundation	1350 East Woodrow Wilson Jackson, MS 39216	SO I	Walk and Roll for Research	\$ 1,800.00
Mount Olive Ministries	P.O. Box 875 Mount Olive, MS 39119	PC	2014-2015 Robotics (STEM) Supplies	\$ 1,000.00
The Boy Scouts of America	855 Riverside Drive Jackson, MS 39202	PC	28th Annual Four Man Scramble Golf Tournament	\$ 2,500.00
Tougaloo College	500 W. County Line Road Tougaloo, MS 39174	PC	Two Rivers Gala	\$ 25,000.00
Southern Christian Services	860 East River Place, Suite 104 Jackson, MS 39202	PC	7th Annual Sonny Fountain Golf Tournament	\$ 3,000.00
Delta State University	P.O. Box 3141 Cleveland, MS 38733	PC	Annual Scholarship	\$ 6,000.00
University of Southern Mississippi	P.O. Box 249 Hattiesburg, MS 39406	PC	Annual Scholarship	\$ 15,000.00
Mississippi Valley State University	1400 Hwy 82W #7226 Itta Bena MS 38941	PC	Annual Scholarship	\$ 6,000.00
Mississippi University for Women	1100 College Street #1618 Columbus MS 39201-5800	PC	Annual Scholarship	\$ 6,000.00
Jackson State University	P.O. Box 17144 Jackson, MS 39217	PC	Annual Scholarship	\$ 15,000.00
Alcorn State University	1000 ASU Drive #810 Alcorn State, MS 39096	PC	Annual Scholarship	\$ 12,000.00
Mississippi State University	P.O. Box 6149 Mississippi State, MS 39762	PC	Annual Scholarship	\$ 15,000.00
University of Mississippi	P.O. Box 249 University, MS 38677	PC	Annual Scholarship	\$ 15,000.00

FORM 990-PF

PART XV - SUPPLEMENTARY INFORMATION

STATEMENT 4

3. GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

<u>RECIPIENT NAME</u>	<u>RECIPIENT ADDRESS</u>	<u>FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF CONTRIBUTION (EVENT)</u>	<u>AMOUNT</u>
Habitat for Humanity/Metro Jackson, Inc.	P.O. Box 55634 Jackson, MS 39296-5643	PC	Women's Build Fund	\$ 2,500.00
Mississippi Museum of Art	380 South Lamar Street Jackson, MS 39201	PC	2014 2nd Qtr Commitment - Art Garden	\$ 22,000.00
First Presbyterian Day School	1390 N. State Street Jackson, MS 39202	PC	Holiday Potpourri	\$ 1,000.00
Mississippi Kidney Foundation	3000 Old Canton Road, Suite 110 Jackson, MS 39296	PC	T-Shirt Drive	\$ 3,000.00
Stop SMA	P.O. Box 320939 Flowood, MS 39232	PC	Laugh Away SMA	\$ 2,500.00
ALSAC/St. Jude Children's Research Hospital	501 St. Jude Place Memphis, TN 38105	PC	St. Jude Ride	\$ 3,000.00
Sunnybrook Children's Home, Inc.	222 Sunnybrook Road Ridgeland, MS 39157	PC	The Love Project	\$ 3,000.00
Eight Days of Hope	P.O. Box 3209 Tupelo, MS 38803	PC	Rebuild Tupelo - Tornado Relief	\$ 1,000.00
Jackson Touchdown Club, Inc.	P.O. Box 16388 Jackson, MS 39236	PC	Corporate Sponsorship	\$ 12,500.00
Andrew Jackson Council	855 Riverside Drive Jackson, MS 39202	PC	Distinguished Citizen Dinner	\$ 1,250.00
Southern Christian Services	860 East River Place, Suite 104 Jackson, MS 39202	PC	2014 Bottom Line for Kids Dinner	\$ 5,000.00
March of Dimes Mississippi Chapter	1991 Lakeland Drive, Suite G Jackson, MS 39216	PC	NICU Family Support and Education	\$ 5,000.00
Business & Professional Outreach	1401 Pinehaven Road Clinton, MS 39056	PC	Outreach Ministry	\$ 5,000.00
Mississippi Children's Museum	P.O. Box 55409 Jackson, MS 39296-5409	PC	Education Fund	\$ 100,000.00
YMCA	500 High Street, Suite 1900 Jackson, MS 39201	PC	Healthy Teens for a Better Mississippi	\$ 1,500.00
Pediatric Brain Tumor Foundation	302 Ridgefield Court Asheville, NC 28806	PC	Mississippi Ride for Kids	\$ 1,000.00
Youth Villages	805 S. Wheatley Street, Suite 240 Ridgeland, MS 39157	PC	Tribute to Excellence Fall Dinner	\$ 1,000.00
National Multiple Sclerosis Society AL/MS	145 Executive Drive, Suite 1 Madison, MS 39110	PC	Dinner of Champions	\$ 2,500.00
21 United of Mississippi	1090 Augusta Drive Oxford, MS 38655	PC	21 United Buddy Walk (Down Syndrome)	\$ 3,000.00
Mission Mississippi	P.O. Box 22655 Jackson, MS 39225	PC	Madison County Thanksgiving Service	\$ 1,500.00
Mississippi Museum of Art	380 South Lamar Street Jackson, MS 39201	PC	2014 4th Qtr Commitment - Art Garden	\$ 22,000.00
The Brain Injury Association of MS	P.O. Box 55912 Jackson, MS 39296-5912	PC	2014 Gala	\$ 2,500.00
Madison Central High School	1417 Highland Colony Parkway Madison, MS 39110	GOV	Academic Decathlon Team	\$ 1,000.00

FORM 990-PF

PART XV - SUPPLEMENTARY INFORMATION

STATEMENT 4

3. GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME	RECIPIENT ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF CONTRIBUTION (EVENT)	AMOUNT
The McCoy House for Sober Living	438 Fernwood Drive Jackson, MS 39206	PC	Upkeep of Facility & Grounds & Gate	\$ 5,000.00
The Center for Violence Prevention	P.O. Box 6279 Pearl, MS 39288-6279	PC	Sporting Clay Shoot	\$ 2,500.00
Eudora Welty Foundation	P.O. Box 55685 Jackson, MS 39296-5685	PC	Mississippi Scholastic Writing Awards	\$ 12,000.00
Jackson Prep	601 Chickasaw Drive North Flowood, MS 39232	PC	3rd Annual Pounding the Paving for a Cure	\$ 500.00
Women's Foundation of Mississippi	120 N. Congress Street Plaza Building Suite 903 Jackson, MS 39201	PC	Corporate Partner	\$ 5,000.00
Special Olympics Mississippi	15 Olympic Way Madison, MS 39110	PC	Torch Run	\$ 2,500.00
Mustard Seed	1085 Luckney Road Brandon, MS 39047	PC	Racin for the Seed	\$ 3,000.00
Habitat for Humanity Capitol Area	P.O. Box 55634 Jackson, MS 39296-5643	PC	Women Build	\$ 3,000.00
Mercy House Teen Challenge	P.O. Box 266 Georgetown, MS 39078	PC	Discipleship Program	\$ 2,000.00
Mississippi Symphony Orchestra	P.O. Box 2052 Jackson, MS 39225	PC	Crescendo Endowment Fund	\$ 30,000.00
Muscular Dystrophy Association	2001 Airport Road, Suite 205 Flowood, MS 39232	PC	2015 Summer Camp	\$ 3,000.00
R.E.A.L. Christian Foundation	115 Linda Jo Drive Richland, MS 39218	PC	Leadership Development	\$ 1,000.00
Natchez Children's Home Services	806 North Union Street Natchez, MS 39120	PC	Children's Advocacy Center	\$ 2,000.00
New Stage Theatre	100 Carlisle Street Jackson, MS 39202	PC	Summer Camp Program	\$ 2,000.00
University of Mississippi Medical Center	2500 N. State Street Jackson, MS 39216	PC	James Keaton, MD, Endowed Chair in Pediatric Urology Fundraiser	\$ 25,000.00
Ducks Unlimited	193 Business Park Drive, Suite E Ridgeland, MS 39157	PC	America's River Initiative - MS Campaign	\$ 3,000.00
Teach for America - MS Delta	124 South Poplar Greenville, MS 39701	PC	Teach for America - MS Delta	\$ 3,000.00
Greater Jackson Arts Council	201 East Pascagoula St., Ste 103 Jackson, MS 39201	PC	Annual Storytellers Ball	\$ 1,500.00
Lantern Medical Center	198 Kirkwood Place Jackson, MS 39211	PC	Healthcare to Low Income Patients	\$ 5,000.00
Diabetes Foundation of Mississippi	800 Avery Blvd, Suite 100 Ridgeland, MS 39157	PC	2015 Bacchus Ball	\$ 5,000.00
USO Gulf Coast Center Operations	14035Q Airport Road Gulfport, MS 39503	NC	Operation Home Away from Home	\$ 3,000.00
Greenwood-Leflore Fuller Center for Housing, Inc.	P.O. Box 9306 Greenwood, MS 38930	PC	Baptist Town Cottage Project	\$ 2,000.00

FORM 990-PF

PART XV - SUPPLEMENTARY INFORMATION

STATEMENT 4

3. GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME	RECIPIENT ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF CONTRIBUTION (EVENT)	AMOUNT
Mississippi First	125 South Congress St., Ste 1510 Jackson, MS 39201	PC	Mississippi Charter Schools	\$ 5,000.00
Bethany Christian Services	2624 Southerland Street Jackson, MS 39216	PC	Safe Families for Children	\$ 3,000.00
Jobs for Mississippi Graduates	6055 Ridgewood Road, Suite A Jackson, MS 39211	PC	Dropout Prevention Program	\$ 2,000.00
Church Health Center	1210 Peabody Avenue Memphis, TN 38104	PC	Operation Crosstown	\$ 3,000.00
DREAM, Inc.	310 Airport Road Pearl, MS 39208	PC	Training Room	\$ 2,500.00
Home of Grace	14200 Jericho Road Vanceleave, MS 39565	PC	Golf Classic	\$ 2,000.00
Mississippi Chapter of Alzheimer's Association	196 Charmant Place, Suite 4 Ridgeland, MS 39157	PC	Sante South 2015	\$ 3,000.00
Craftsmen's Guild of Mississippi, Inc.	950 Rice Road Ridgeland, MS 39157	PC	Pedestrian Walkway Project	\$ 2,000.00
Women Foundation for a Greater Memphis	40 South Main St., Suite 2380 Memphis, TN 38103	PC	2015 Annual Tribute Luncheon & Symposium	\$ 5,000.00
The Family Center	601 Bel Air Blvd, Suite 100 Mobile, AL	PC	Prevent Child Abuse	\$ 2,000.00
Mission Mississippi	P.O. Box 22655 Jackson, MS 39225-2655	PC	2015 Mission Sponsor	\$ 5,000.00
University of Mississippi Foundation	P.O. Box 249 University, MS 38677	PC	Women's Council Legacy Awards	\$ 10,000.00
The Neighborhood Christian Center	P.O. Box 14226 Jackson, MS 39236	PC	Pickin' Poppin' & Rockin' Event	\$ 3,000.00
Stewpot Community Services	1100 W. Capitol Street Jackson, MS 39203	PC	2015 Taste of Mississippi	\$ 2,500.00
Gardner Simmons Home for Girls, Inc.	2794 Botner Drive Belden, MS 38826	PC	2013 Contribution Returned	\$ (3,000.00)

\$ 620,050.00
