

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



# Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

► 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.

Open to Public Inspection

THE THE	-	. 0014	Love year haginni	na 11	0/01 , 2014	, and ending	9/30	, 2015	
For c	alen	dar year 2014,	or tax year beginni	<u> </u>	0/01	,	A	Employer identification num	ber
יינוניי	СI	SUNG FOUN	NATTON				<u> </u>	20-2075762 Telephone number (see instru	uctions\
1110	T Z	KE MARINA	DRIVE 6C				В	985-674-1443	ictions)
NEM	OF	LEANS, LA	70124				<u> </u>		
14111	01	<b>W2111.0</b> ,					C	If exemption application is p	ending, check here 🕒 🔝
				<del></del>	Initial return of a for	mor public charity	┪	= abool	, hore ►
G C	hecl	all that apply	Initial return	-		mei public charty	- 1	Foreign organizations, checl	
			Final return	<u> </u>	Amended return		1 2	Foreign organizations meeti	ng the 85% test, check
			Address cha	nge _	Name change	form dation	-	here and attach computation	1
H C	hec	type of organ	zation. X Se	ction 501	(c)(3) exempt private	TOURIGATION	ı E	If private foundation status	was terminated
	П	Section 4947(a	)(1) nonexempt cha	aritable ti		private foundation		under section 507(b)(1)(A)	check here
T F	air m	arket value of all as	sets at end of year		ounting method: X	Cash Accrua	1	If the foundation is in a 60-	month termination —
(	from	Part II, column (c),	line 16)	1 []	Other (specify)		-	under section 507(b)(1)(B)	check here
<b>&gt;</b>	\$	5	26,272	(Part I,	column (d) must be o		<del>-                                    </del>		(d) Disbursements
Par	ŧΤ	Analysis of	Revenue and		(a) Revenue and	(b) Net investm	nent	(c) Adjusted net income	for charitable
<u></u>		Evnances	The total of amounts	s In	expenses per books	income		lilcome	purposes
		columns (b),	(c), and (d) may no ne amounts in colui	nn (a)					(cash basis only)
		(see instruction	ons))	(-)					
	$\neg T$	1 Contributions, gift	s, grants, etc, received (attach so		118,000	•			,
[G] 113			the foundn is not required to at					<u> </u>	
	- 1			le.					
3			s and temporary cash investmen erest from securities	1.5	2,878	2.	878.	2,878.	
3	į	5 a Gross rents.	SI 621 HOLL Secondos		2,010	·			
}	1	b Net rental inc	ome						
!	Ì	or (loss)	from sale of assets not on line	10					
, R		<b>b</b> Gross sales p	rice for all						
· V	'	assets on line	e 6a net income (from Part IV,	line 2)					
: E	1	/ Capital gain r 8 Net short-terr							
, i		9 Income modif	fications						<del> </del>
, È		10 a Gross sales I	ess						
	Ì	allowances							
Ì	1	<b>b</b> Less Cost of goods sold							
		<b>C</b> Gross profit or (	loss) (attach schedule)					<del></del>	
		11 Other income	e (attach schedule)			j			
					100 076		,878.	2,878.	
		12 Total. Add	lines 1 through 11		120,878	).	, 0 , 0 .		
		13 Compensation	on of officers, directors, tri	ustees, etc.	<u> </u>	<u></u>			
			yee salaries and wages						
			ns, employee benefits				-		
	Ą	16 a Legal fees (a				<del></del>			
	Ņ		ees (attach sch)		<u> </u>	1/1/2			
_	Ņ	l	ees (attach sch)		·	1 1	·		
O P E R A T	I S T	17 Interest	shadulaVena instre\ SEE	STM 1	361		111	1.	
E	R	_	rileanie Vace 11120.21		300	1 / ,	<del>411</del> 2	20	
A T	Ā	19 Depreciation sch) and de				1		2010	
- 1	i	20 Occupancy							<del>                                     </del>
N G	Ę		erences, and meetings				-,-	<del>: ;·</del>	<del>                                     </del>
A N D	Ē	1	l publications				<u>.</u>	1	
D	EXPENSES	23 Other exper	nses (attach schedule)					``.	
	Ņ				<del> </del>				1
	Ę	24 Total opera	ting and administrative Add lines 13 through 23		36				20.000
	S	25 Contributions,	gifts, grants paid . S'	TMT 2	26,00		<u></u>	<u> </u>	26,000.
		1	rses and disbursements.				^	0	26,000.
		Add lines 2	4 and 25		26,36	8.	0	-	+ = = = = = = = = = = = = = = = = = = =
		27 Subtract lin	e 26 from line 12.						
		a Excess of a	revenue over expenses sements.		94,51	0.			
			nent income (if negative,	enter -0-)		2	2,878	•	
			et income (if negative, er					2,878	
_		C Aujustea r	(ii negotiro; ci			TEFA050	4L 12/1	0/14	Form <b>990-PF</b> (2014)



Page 2

Par	t II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		of year
				(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		_			<u> </u>
	2	=	ary cash investments	152,589.	157,128.	157,128.
	3	Accounts receivable				
		Less: allowance for	doubtful accounts =			<del> </del>
	4	Pledges receivable			*	
	_	Less: allowance for	doubtful accounts	}		<u> </u>
	5	Grants receivable				<del> </del>
	6	disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans red	evable (attach sch)		· · · · · · · · · · · · · · · · · · ·	<u> </u>
A	1	Less <sup>,</sup> allowance for	doubtful accounts	*	*	
Š	8	Inventories for sale	or use		<del></del>	<del>                                     </del>
A S E T	9	Prepaid expenses a	nd deferred charges			
s	10	a Investments - US	and state government		<del></del> _	
	İ	obligations (attach s			<del></del>	<del></del>
	1	<b>b</b> Investments — corporate	•	178,404.	268,376.	369,144.
	1	c Investments — corporate	, ,			ļ
	11	Investments – land equipment: basis	buildings, and			
		Less. accumulated depred (attach schedule)	eration •			
	12	Investments - mort	gage loans			
	13	Investments - other				
	14	Land, buildings, and				
		Less: accumulated depred (attach schedule)	eration •			
	<b>)</b> .	Other assets (descri		1.		
	16	Total assets (to be see the instructions.	completed by all filers – Also, see page 1, item I)	330,994.	425,504.	526,272.
Ļ	17	Accounts payable a	nd accrued expenses			
À	18	Grants payable				
B	19	Deferred revenue				
Ļ	20		tors, trustees, & other disqualified persons			<u>'</u>
+	21	= =	s payable (attach schedule)		· · · · · · · · · · · · · · · · · · ·	-
- 1	22	Other liabilities (des	cribe)	<u> </u>		1
E S	23	Total liabilities (add	lines 17 through 22)	0.	0.	,
		Foundations that fo and complete lines	llow SFAS 117, check here 24 through 26 and lines 30 and 31.		<del></del>	
N F	24	Unrestricted	!			,
N F E U T N	25	Temporarily restricted	ed ,			1
D	26	Permanently restrict	ed			1
A B A L A		Foundations that do and complete lines	o not follow SFAS 117, check here X 27 through 31.			-   
ĔĹ	27	Capital stock, trust p	orincipal, or current funds.	330,994.	425,504.	
SNC	28		or land, bldg, and equipment fund			1
0 E	29	<u>-</u> .	ulated income, endowment, or other funds .			
RS	30		und balances (see instructions)	330,994.	425,504.	
	31	(see instructions)	net assets/fund balances	330,994.	425,504.	
Par	HI	Analysis of Chan	ges in Net Assets or Fund Balance	es	123,301.	<del> </del>
			alances at beginning of year — Part II, colu		ree with	
	end-	of-year figure reported	d on prior year's return)	· · · · · · · · · · · · · · · · · · ·	1	330,994.
		r amount from Part I,			2	94,510.
		increases not included in li	ne 2 (itemize)		3	
		lines 1, 2, and 3			4	425,504.
		ases not included in line 2 (	•		5	
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), lir	ne 30 <b>6</b>	425,504.

Par	t IV Capital Gains and I	Losses for Tax on Investmen	nt Income				
	(a) List and describe 2-story brick warehous	e the kind(s) of property sold (e.g., se; or common stock, 200 shares M	real estate, LC Company)	(b) How acc P — Purch D — Dona	nase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 2	N/A						
t	)						
	<del></del>						
						] 	
	<del> </del>			L		<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa			(h) Gain or (e) plus (f) m	(loss) linus (g)
	1						
t	)						
	<u> </u>						
	<u>!</u>					· · · · · · · · · · · · · · · · · · ·	
	·						
		ring gain in column (h) and owned l				(I) Gains (Coli	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	n (i) any		ain minus column (F an -0-) <mark>or L</mark> osses (fi	
7	1						
t	)						
	;						
	1						<del> </del>
	}						
2	Capital gain net income or (ne		enter in Part I, line 7	-	2		
3	Net short-term capital gain or	(loss) as defined in sections 1222(5					
	If gain, also enter in Part I, line	e 8, column (c) (see instructions) I	f (loss), enter -0-	_		(	
	ın Part I, line 8		` `		3	l	
Par	t V Qualification Under	r Section 4940(e) for Reduce	ed Tax on Net Investm	ent Inco	ome		
(For	optional use by domestic private for	oundations subject to the section 4940	O(a) tax on net investment inc	come )			
If co	ation 4040(d)(2) applies Japais	this part blank					
ii se	ction 4940(d)(2) applies, leave t	ins part blank.				_	_
Was	the foundation liable for the sec	ction 4942 tax on the distributable a	amount of any year in the t	ase period	<b>d?</b>	Yes	X No
If 'Ye	es,' the foundation does not qua	alify under section 4940(e) Do not o	complete this part				
1	Enter the appropriate amount in	each column for each year; see the in	structions before making any	entries			
	(a) Base period years Calendar year (or tax year	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets	(coli	<b>(d)</b> Distributior umn (b) divided	
	beginning in)		 				
	2013	28,524.		1,938.			0.066037
	2012	18,000.		5,909.			0.047884
	2011	23,187.		5,962.			0.063359
	2010	18,250.	39	3,390.			0.046392
	2009	17,900.	39	9,696.		<del></del>	0.044784
2	Total of line 1, column (d)				2		0.268456
3	, , ,	ne 5-year base period — divide the	total on line 2 by 5, or by t	he			
3	number of years the foundation	n has been in existence if less than	5 years .		3	<del> </del>	0.053691
4	Enter the net value of nonchar	ritable-use assets for 2014 from Par	rt X, line 5		4		521,504.
5	Multiply line 4 by line 3			1	5		28,000.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		29.
7	Add lines 5 and 6				7		28,029.
8	Enter qualifying distributions fr	om Part XII, line 4			8		26,000.
-		in line 7, check the box in Part VI, line	1b, and complete that part i	ı 1% sıng a		ate See the	

Form 990-PF (2014)

BAA

Pai	rt 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		Х
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?	13	Х	
	Website address • N/A	<b></b>	. <b></b> _	
14		<u>-544-7</u>	700_	. – – -
15	Located at 232 LAKE MARINA DRIVE APT 6C NEW ORLEANS LA ZIP + 4 70124  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here.	<u>N</u> /Ā	<u></u>	-[]
	and enter the amount of tax-exempt interest received or accrued during the year . 15			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?	16	Yes	No X
	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			
Pai	rt 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
1 a	a 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?	<b>&gt;</b>		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No.	<b>)</b>		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<b>,</b>		
	(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)?  Yes X 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.)  Yes  X No.	•		
ł	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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)?	16	N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
(	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?	1 c		Х
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))			
ä	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?  Yes X No.	,	,	
	If 'Yes,' list the years ► 20 , 20 , 20 , 20			
ŧ	b Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer 'No' and attach statement — see instructions.)	2 b	N	/A
(	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 20 , 20 , 20			
٠.		j		
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No.	•		
ŀ	of 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).	3 b	N	/A
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
Ł	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?	4 b		X
RΔΔ		Form 90		2214

) X No			
X No		- 1	1
<u> </u>	1 1		
X No X No	1		
<u> </u>			
X No			
X No			
	5 b	N	/A
No			
ΧNο			
	6 b		X
Y No			
	7 b		
,	loyees	,	
			0.
			0.
1			
-			
•			0.
1			
.   -			0.
VE.'			
	Expense other al	acco lowar	ount, ices
İ			
<b>P</b>			0
	X No X No X No X No X No X No X No X (e) t (e) t d	X No X No Sb No 6b X No N/A 7b I Employees t d (e) Expense other all characters t d  (e) Expense other all characters t d (e) Expense other all characters t d	X No  No  Sb N  No  No  NA  Tb  Employees,  (e) Expense accother alloward  (e) Expense accother alloward  other alloward

0.

Form 990-PF (2014)

Total. Add lines 1 through 3

BAA

20-2075762 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.' (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 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 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 N/A All other program-related investments. See instructions.

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign	foundations,
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. Average monthly fair market value of securities.	1 a	328,139.
b	Average of monthly cash balances	1 b	201,307.
С	Fair market value of all other assets (see instructions)	1 c	· <del></del>
d	Total (add lines 1a, b, and c)	1 d	529,446.
е	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	529,446.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	7,942.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	521,504.
_6	Minimum investment return. Enter 5% of line 5	6	26,075.
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation and certain foreign organizations check here ► and do not complete this part.)	ting f	oundations
1	Minimum investment return from Part X, line 6	1	26,075.
2 a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2 c	58.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .	3	26,017.
4	Recoveries of amounts treated as qualifying distributions .	4	
5	Add lines 3 and 4 .	5	26,017.
6	Deduction from distributable amount (see instructions).	6	
_7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	26,017.
Par	t XII Qualifying Distributions (see Instructions)	<del></del>	
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	26,000.
b	Program-related investments — total from Part IX-B	1 b	<del></del>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
а	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	26,000.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	26,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	1
BAA			Form <b>990-PF</b> (2014)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
1 Distributable amount for 2014 from Part XI,				<del>-</del>
line 7  2 Undistributed income, if any, as of the end of 2014				26,017.
a Enter amount for 2013 only			ر م	
<b>b</b> Total for prior years: 20 , 20 , 20		0.	0.	
3 Excess distributions carryover, if any, to 2014:		0.		— <u>————————————————————————————————————</u>
<b>a</b> From 2009				
<b>b</b> From 2010				
c From 2011 4, 915.				
<b>d</b> From 2012				
e From 2013 6, 979.				
f Total of lines 3a through e	11,894.			
4 Qualifying distributions for 2014 from Part	11,001.			<del></del>
XII, line 4: ► \$ 26,000.				
a Applied to 2013, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years				·
(Election required — see instructions)		0.		
c Treated as distributions out of corpus				
(Election required — see instructions)	0.			
d Applied to 2014 distributable amount			,	26,000.
e Remaining amount distributed out of corpus	0.			20,000.
5 Excess distributions carryover applied to 2014	17.			17.
(If an amount appears in column (d), the same amount must be shown in column (a) )			/	
Same amount must be shown in column (a)	j			
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	11,877.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed		<u>_</u> -		
income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed		0.		
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.	
Ţ				
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) .	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	11 077			
10 Analysis of line 9:	11,877.			
a Excess from 2010				
<b>b</b> Excess from 2011 4,898.	-			
c Excess from 2012				
d Excess from 2013 6, 979.	-			
<b>e</b> Excess from 2014				
BAA				orm <b>990-PF</b> (2014)

Part XIV   Private Operating Foundations (see instructions and Part VII-A, question 9) N/A						
1 a 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>b</b> Check box to indicate whether the foundat	ion is a private ope	erating foundation of	described in section	4942(j)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years			
income from Part I or the minimum investment return from Part X for	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total	
each year listed	<u> </u>					
<b>b</b> 85% of line 2a			<u> </u>			
c Qualifying distributions from Part XII, line 4 for each year listed						
d Amounts included in line 2c not used directly for active conduct of exempt activities						
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the alternative test relied upon						
a 'Assets' alternative test — enter:		İ		j		
(1) Value of all assets.						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
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)						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)						
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in	
assets at any time during th	_ <del></del>	structions.)				
1 Information Regarding Foundation Manag		an 20/ of the total a	antributions received	by the foundation hef	ara tha	
a List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 3	contributed more to	than \$5,000). (See	section 507(d)(2)	by the foundation bei	ore the	
SEE SIAIEMENI S						
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the	10% or more of the	stock of a corporatio	on (or an equally large	portion of the owner	ship of	
a partnership or other entity) of which the NONE	foundation has a 1	0% or greater inter	est			
-						
2 Information Regarding Contribution, Gran	it, Gift, Loan, Scho	larship, etc, Progra	ams:			
Check here ► X if the foundation only ma requests for funds If the foundation makes						
complete items 2a, b, c, and d.  a The name, address, and telephone number or	e-mail address of th	ne nerson to whom o	nnlications should be	addressed;	· <del>·····</del>	
a The hame, address, and telephone humber of	e-man address or u	ie person to whom a	ррисацина апоши ве	audresseu.		
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	als they should inclu	de:		
c Any submission deadlines:				<del></del>		
d Any restrictions or limitations on awards, s	uch as by geograp	hical areas, charita	ble fields, kinds of ii	nstitutions, or other	factors	

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	<u> </u>	
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)	substantial contributor	recipient		
a Paid during the year				
				1
				}
			1	
				}
		1		
			Į	1
	j		j	}
		l		ł
	1	j	1	ļ
				ĺ
				}
				}
	]			
				<u> </u>
		1		
		l	1	
		i		
		i	}	
	<u> </u>		L	<del> </del>
Total			► 3a	
<b>b</b> Approved for future payment				
				İ
				1
				1
	ļ			
			}	
	[			
				1
Total			► 3b	ļ

## Part XVI-A Analysis of Income-Producing Activities

Ente	er gross amounts unless otherwise indicated	Unrelated	d business income	Excluded by	section 512, 513, or 514	
	•	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
	Program service revenue			code		<u> </u>
a						
Ł						
•	[ <del></del>	<del></del>				
0	<u> </u>			+		
6	e			<del></del>		<del></del>
'	g Fees and contracts from government agencie	26		+-+		
_	Membership dues and assessments	-	· · · · · · · · · · · · · · · · · · ·	++-		<del></del>
3	· .					
4	Dividends and interest from securities			14	2,878.	
5	Net rental income or (loss) from real estate		<del> </del>	1-1-		· · · · · · · · · · · · · · · · · · ·
a	a Debt-financed property					
t	b Not debt-financed property .					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
ā	a					
ŀ	b					
C	_ <del></del>			<del> </del>		
	d					
12					2 070	
12	Subtotal. Add columns (b), (d), and (e)	]			2,878.	
17	T-4-1 Add Inc. 10 columns (b) (d) cod (c)				12	2 070
	Total. Add line 12, columns (b), (d), and (e)				13	2,878.
(See	e worksheet in line 13 instructions to verify calc	culations)	<del></del>			2,878.
(See		culations)	shment of Exem	pt Purpose		2,878.
Par Lin	e worksheet in line 13 instructions to verify calc	o the Accompli		- 	es	
Par Lin	e worksheet in line 13 instructions to verify calcert XVI-B Relationship of Activities to	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for what accomplishment of the foundation's explain.	o the Accompli		- 	es	

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	-xempt Organiz	ations								
described	rganization directly d in section 501(c) o o political organizati	f the Code (ot	ngage in any of t her than section	the following wit 501(c)(3) organ	h any o	ther organizations) or in section 5	n 527,		Yes	No
5	from the reporting		a noncharitable i	exempt organiz	ation of	•			l	
	. •	ioundation to	a nonchantable	exempt organiza	ation or.	•		1.00	ı	v
(1) Cash						•		1 a (1)		<u>X</u>
<b>(2)</b> Othe	r assets	• •			•			1 a (2)		X
<b>b</b> Other tra	nsactions:								1	
(1) Sales	s of assets to a none	charitable exer	mpt organization	ı				1 b (1)		Χ
(2) Purcl	hases of assets from	a noncharital	ble exempt orga	nization				1 b (2)		X
	al of facilities, equip							1 b (3)		<u>X</u>
<b>\-</b> /	· · ·	•	a33Ct3			•	•			
` '	bursement arranger							1 b (4)		<u>X</u>
<b>(5)</b> Loan	s or loan guarantees	S						1 b (5)		_X_
<b>(6)</b> Perfo	rmance of services	or membershi	p or fundraising	solicitations				1 b (6)		_X_
c Sharing o	of facilities, equipme	ent, mailing lis	ts, other assets,	or paid employ	ees			1 c		X
d If the and the goods any trans	swer to any of the al , other assets, or sen saction or sharing ar	rangement, sh	now in column (d	) the value of the	ne good	s, other assets,	or services rec	ceived.		
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exemp	pt organization	(d)	Description of tran	sfers, transactions	, and sharing arran	gement	s
N/A										
·										
<del></del>										
							<del></del>			
							_			
						<del> </del>				
								<del></del>		
		-								
ŀ										
					<del></del>					
		•					<u>.</u>			
describe	ndation directly or ind d in section 501(c) o complete the following	of the Code (ot	l with, or related to ther than section	o, one or more ta 501(c)(3)) or in	x-exemp	ot organizations i 527?		Yes	X	No
(a)	Name of organization	on	<b>(b)</b> Type	of organization		(c	) Description of	f relationship		
N/A										
		,								
<del></del>	<del></del>					†				
			<u> </u>							
Sign Here	enalties of perjury, I declare and complete Declaration	e that I have exami of preparer (other t	ned this return, includ than taxpayer) is base	ing accompanying so	hedules ar	nd statements, and to eparer has any know	the best of my kno ledge	May the this return preparer	RS disci	uss
<u> </u>	- res	سهمار ر	un j	Mucic	<u>עע</u>	1/14/	0010	(see instr	uctions).	汽
Signat	ure of officer or trustee		V	Date	Т	itle	<u> </u>		Yes	No
	Print/Type preparer's nam	ne	Preparer's s	ignature		Date	Check	ıf PTIN		
Daid	PAUL D. REES		40	$\mathbf{x} \setminus \mathbf{y}$		12/02/15	self-employed	P00739	240	
Paid			DEEL THE			122/02/13			210	
Preparer		EILER AND					Firm's EIN 7	2-1477156		
Jse Only			<u>IAY 190 EAS</u>	T SERVICE	RD S	SUITE A				
	[ C(	OVINGTON,	LA 70433				Phone no 9	85-674-14 <sub>4</sub>	13	
BAA						·· · · · · · · · · · · · · · · · · · ·		Form <b>99</b> 6	)-PF (	2014)

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

Schedule of Continuators

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

OMB No 1545-0047

2014

Name of the organization		Employer identification number
THE SISUNG FOUNDATION		20-2075762
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the G	eneral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) org	anization can check boxes for both the General Rule and a S	pecial Rule. See instructions.
General Rule		
X For an organization filing Form 990, 990-E property) from any one contributor. Complete	Z, or 990-PF that received, during the year, contributions tota ete Parts I and II See instructions for determining a contribut	ling \$5,000 or more (in money or cor's total contributions.
Special Rules		
$\square$ under sections 509(a)(1) and 170(b)(1)(A)(vi).	01(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 the year, total contributions of the greater of (1) \$5,000 or (2) 00-EZ, line 1 Complete Parts I and II.	l6a, or 16b, and that
during the year, total contributions of more	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lito ochildren or animals. Complete Parts I, II, and III.	rom any one contributor, erary, or educational
during the year, contributions exclusively for \$1,000. If this box is checked, enter here to charitable, etc., purpose Do not complete	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for religious, charitable, etc., purposes, but no such contribution the total contributions that were received during the year for a any of the parts unless the <b>General Rule</b> applies to this orgable, etc., contributions totaling \$5,000 or more during the year	ons totaled more than In <i>exclusively</i> religious, nization bec <u>a</u> use
Caution: An organization that is not covered b 990-PF), but it must answer 'No' on Part IV, li Part I, line 2, to certify that it does not meet the	y the General Rule and/or the Special Rules does not file Sch ne 2, of its Form 990, or check the box on line H of its Form ne filing requirements of Schedule B (Form 990, 990-EZ, or 99	nedule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF, 90-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedule <b>B</b> (Form 990, 990-E	Z, or 990-PF) (2014)	

Page 1 of

1 of Part 1

Name of organization
THE SISUNG FOUNDATION

Employer identification number

$\sim$	_	$\sim$	~~		-
	-	71		<b>~</b> /	62
4	•	Z١	,,,	JI	UZ.

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LAWRENCE J SISUNG JR		Person X Payroll
	201 ST CHARLES AVE STE 4240	\$18,000.	Noncash
	NEW ORLEANS, LA 70170-1048	-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SISUNG INVESTMENT MANAGEMENT SVC		Person X Payroll
	201 ST CHARLES AVE STE 4240	\$100,000.	Noncash
	NEW ORLEANS, LA 70170-1048		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
		-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for
			noncash contributions)

Page

1 of Part II

Name of organization

Employer Identification number

THE SISUNG FOUNDATION

20-2075762

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	pace is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		1	1
		]\$	
(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
		-	
		<b>\$</b>	
		(6)	(4)
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		- - -	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
	<u> </u>	Ť	~- <b>-</b>

1

of Part III

Name of organization Employer identification number THE SISUNG FOUNDATION 20-2075762 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. (b) Purpose of gift (a) No. from Part I (c) Use of gift Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (d)
Description of how gift is held (a) No. from (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (c) Use of gift (d)
Description of how gift is held (a) No. from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

20	1	Δ
۷u		-

#### FEDERAL STATEMENTS

PAGE 1

THE SISUNG FOUNDATION

20-2075762

STATEMENT 1 FORM 990-PF, PART I, LINE 18 **TAXES** 

> (A) EXPENSES PER BOOKS

(B) NET INVESTMENT INCOME

(C) ADJUSTED

(D) CHARITABLE

FEDERAL TAXES DUE.

36<u>8.</u> TOTAL \$ 368.

NET INCOME \_ PURPOSES

0.

**STATEMENT 2 FORM 990-PF, PART I, LINE 25** CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

MAKE-A-WISH FOUNDATION

P.O. BOX 97104

WASHINGTON, DC 20090 NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

501 (C) (3)

\$ 1,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

SMILE TRAIN P.O. BOX 96231

WASHINGTON, DC 20090

RELATIONSHIP OF DONEE: NONE 501 (C) (3)

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

LEARNING ALLY 20 ROSZEL ROAD PRINCETON, NJ 08540

RELATIONSHIP OF DONEE: NONE

AMOUNT GIVEN:

ORGANIZATIONAL STATUS OF DONEE:

501 (C) (3)

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

SAFE HARBOR P.O. BOX 1179

MANDEVILLE, LA 70470

RELATIONSHIP OF DONEE: NONE

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

501 (C) (3)

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

NEW ORLEANS MISSION P.O. BOX 56565

NEW ORLEANS, LA 70156

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

NONE

501 (C) (3)

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

AMOUNT GIVEN:

DONEE'S ADDRESS:

BILLY GRAHAM EVANGELISTIC ASSN

1 BILLY GRAHAM PARKWAY

2014

#### FEDERAL STATEMENTS

PAGE 2

#### THE SISUNG FOUNDATION

20-2075762

2,000.

2,000.

2,000.

STATEMENT 2 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

CHARLOTTE, NC 28201

NONE

501 (C) (3)

LOUISIANA BAPTIST CHILDREN'S HOME

P.O. BOX 4196

MONROE, LA 71211

NONE

501 (C) (3)

2,000.

SECOND HARVEST OF GNO

700 EDWARDS AVENUE

NEW ORLEANS, LA 70123

NONE

501 (C) (3)

4,000.

LIFE OUTREACH INTERNATIONAL

P.O. BOX 982000

FORT WORTH, TX 76182

NONE

501 (C) (3)

1,000.

LOUISIANA PHILHARMONIC ORCHESTRA 1010 COMMON STREET SUITE 2120

NEW ORLEANS, LA 70112

NONE

501 (C) (3)

ST. JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST. JUDE PLACE MEMPHIS, TN 38105

NONE

501 (C) (3)

3,000.

SPECIAL OLYMPICS - LOUISIANA

P.O. BOX 189

HAMMOND, LA 70404

NONE

501 (C) (3)

MUNHOLLAND UNITED METHODIST CHURCH

1201 METAIRIE RD

METAIRIE, LA 70005

2014

#### FEDERAL STATEMENTS

PAGE 3

THE SISUNG FOUNDATION

20-2075762

**STATEMENT 2 (CONTINUED)** FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

NONE

501 (C) (3)

500.

Ś

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

WOUNDED WARRIOR FOUNDATION

EAST JEFFERSON GENERAL HOSPITAL

AMERICAN ACTION FUND FOR BLIND CHILDREN

P.O. BOX 758517 TOPEKA, KS 66675

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

NONE

501 (C) (3)

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

OZANAM INN

P.O. BOX 30565

NEW ORLEANS, LA 70190

4200 HOUMA BOULEVARD

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

NONE

501 (C) (3)

1,500.

1,000.

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

METAIRIE, LA 70006

NONE 501 (C) (3)

AMOUNT GIVEN:

ORGANIZATIONAL STATUS OF DONEE:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

1800 JOHNSON STREET BALTIMORE, MD 21230

NONE

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

501 (C) (3)

TOTAL \$ 26,000.

STATEMENT 3 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

LAWRENCE J SISUNG JR FRANCES V SISUNG ROBERT LANE SISUNG