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Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

For	calen	dar year 2015 or tax year beginning		5, and		omiooopii.	, 20
_		undation	, ===	-,		r identification numbe	
ΕP	LUS FO	OUNDATION				20-4190331	
		d street (or P O box number if mail is not delivered to street address)	Room	/suite	B Telephon	e number (see instructi	ons)
		DMONT BLVD	5	00		(615) 467-7400)
		n, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pendi	ng check here ▶ □
		.E, TN 37205			O II exempt	on application is pend	ng, chook notes
			of a former public	charity	D 1. Foreign	organizations, check l	nere ► 🗌
_	000	☐ Final return ☐ Amended r	•	,		•	
		☐ Address change ☐ Name char	nge			n organizations meeting here and attach compu	
\overline{H}	Check	type of organization: Section 501(c)(3) exempt p	rivate foundation		E If private	foundation status was	terminated under
		on 4947(a)(1) nonexempt charitable trust		dation	section 5	07(b)(1)(A), check here	▶⊔
		narket value of all assets at J Accounting method			E If the four	ndation is in a 60-mont	n termination
		f year (from Part II, col. (c),				tion 507(b)(1)(B), checl	
	line 16	5) ► \$ 404,318 (Part I, column (d) must be	on cash basis)				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		t investment ncome	(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see instructions).)	DOOKS				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	78,221				
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	512		512		
	4	Dividends and interest from securities				_	
	5a	Gross rents		ļ			
	b	Net rental income or (loss)		.			
9	6a	Net gain or (loss) from sale of assets not on line 10	0	ļ			
ē	b	Gross sales price for all assets on line 6a		ļ			
Revenue	7	Capital gain net income (from Part IV, line 2)		ļ	0		
Œ	8	Net short-term capital gain		<u> </u>			
	9	Income modifications		}			
	10a	Gross sales less returns and allowances 0		-			
	b	Less. Cost of goods sold		ļ <u> </u>			<u> </u>
	C	Gross profit or (loss) (attach schedule)	0			0	
	11	Other income (attach schedule)	370		0 512	0	
_	12	Total. Add lines 1 through 11	79,103	1	312		
es.	13 14	Compensation of officers, directors, trustees, etc.	-	1			
Expenses	15	Other employee salaries and wages		l			
<u>6</u>	16a	Legal fees (attach schedule)	5,512		0	0	0
Ж	b		1,650	•	165		
Ş	6	Accounting fees (attach schedule) Other professional fees (attach schedule)	1,000	+	0		
ati	17	1-4		<u> </u>	<u>-</u>		
str	18	Taxes (attach schedule (see instructions) 2016		1	0	0	0
Ξ	19	Depreciation (attach schedule) and depletion	0	+	0	0	
Ę	20	Occupancy OGDEN. UT		1	-		
Ž	21	Travel, conferences, and meetings					
Ž	22	Printing and publications		Ī			
D	23	Other expenses (attach schedule)	11,621		86	0	11,165
Operating and Administrative	24	Total operating and administrative expenses.					
ža		Add lines 13 through 23	18,783	<u> </u>	251	0	11,165
ğ	25	Contributions, gifts, grants paid	134,646				134,608
_	26	Total expenses and disbursements. Add lines 24 and 25	153,429		251	0	145,773
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	(74,326				
	ь	Net investment income (if negative, enter -0-) .			261		
	С	Adjusted net income (if negative, enter -0-)				0	
For	Paper	work Reduction Act Notice, see instructions.	Cat N	lo 11289	x	F	orm 990-PF (2015)

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

	III	Attached schedules and amounts in the description column	Beginning of year	End o	f year
126	rt II	Balance Sheets should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	13,500	2,148	2,148
	2	Savings and temporary cash investments	471,950	402,170	402,170
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶	65	0	0
	4	Pledges receivable ▶	[<u> </u>		
		Less: allowance for doubtful accounts ▶		0	0
	5	Grants receivable			· · · · · · · · · · · · · · · · · · ·
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		0	0
	7	Other notes and loans receivable (attach schedule) ▶ 0			
		Less: allowance for doubtful accounts ▶0	0	0	0
şţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	b	Investments - corporate stock (attach schedule)	0	0	0
	С	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment: basis ▶0			
		Less: accumulated depreciation (attach schedule) ▶0	0	0	0
	12	Investments-mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment: basis ▶0	·		
		Less: accumulated depreciation (attach schedule) ▶ 0	0	0	0
	15	Other assets (describe ▶)	0	0	0
	16	Total assets (to be completed by all filers-see the			
		instructions. Also, see page 1, item I)	485,515	404,318	404,318
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
Ë	21	Mortgages and other notes payable (attach schedule)	0	0	
	22	Other liabilities (describe >)	0	0	
_	23	Total liabilities (add lines 17 through 22)	0	0	
Ś		Foundations that follow SFAS 117, check here >	<i>'</i>		
2	١	and complete lines 24 through 26 and lines 30 and 31.			i.
Balances	24	Unrestricted			ļ
Ba	25	Temporarily restricted			
Þ	26	Permanently restricted			i 1
Ē		Foundations that do not follow SFAS 117, check here ▶ ✓ and complete lines 27 through 31.			
Ž	27				
Net Assets or Fund	27 28	Capital stock, trust principal, or current funds			1
Set	29	Retained earnings, accumulated income, endowment, or other funds	485,515	404,318	1
Asi	30	Total net assets or fund balances (see instructions)	485,515	404,318	,
et,	31	Total liabilities and net assets/fund balances (see	700,010		
Ž	~	instructions)	485,515	404,318	;
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	1		<u> </u>
		al net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (mus	t agree with	
		-of-year figure reported on prior year's return)			485,515
2		er amount from Part I, line 27a			(74,326)
3		er increases not included in line 2 (itemize) ▶			0
		Unes 1, 2, and 3			411,189
_					6,871
_ 6	Tota	reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lır	ne 30 6	404,318

Form **990-PF** (2015)

Part IV Capital Gains and Losses for Tax on Investment Income

		kind(s) of property sold (e.g., real estate, , 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)
<u>1a</u>						
b	·					
_ <u> </u>				 	····	
<u>d</u> e				-	<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		Gain or (loss) us (f) minus (g)
a						
<u>b</u>						
<u>c</u>						
_ <u>d</u>						
<u>_</u>	Complete only for assets show	ing gain in column (h) and owned by t	ne foundation	on 12/31/69	/n Gaine //	Col (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but	not less than -0-) or s (from col (h))
a						
b						
<u>c</u>					···	_
<u>d</u>						
<u>e</u> 2	Capital gain net income or (enter in Pa ter -0- in Pa			
3		or (loss) as defined in sections 12: line 8, column (c) (see instruction	22(5) and (6)	:	2	0
					3	0
Part		r Section 4940(e) for Reduce		let Investment	Income	_
Was t	s," the foundation does not q	ection 4942 tax on the distributable ualify under section 4940(e). Do nent in each column for each year; s	ot complete	this part.		☐ Yes ☑ No
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f nonchantable-use as		(d) Distribution ratio (b) divided by col (c))
	2014	110,86	7	459	9,934	0.241050
	2013	107,95	9	45	5,957	0 236775
	2012	97,53	8	26	8,937	0 362680
	2011	37,75			1,975	0 309498
 2 3	2010 Total of line 1, column (d) Average distribution ratio for	10,00			8,405 . 2 the	0 260487 1 410490
		ution has been in existence if less			. 3	0 282098
4	Enter the net value of nonch	haritable-use assets for 2015 from	Part X, line	5	. 4	439,368
5	Multiply line 4 by line 3 .				. 5	123,945
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	3
7	Add lines 5 and 6				. 7	123,948
8		s from Part XII, line 4 er than line 7, check the box in Pa			. 8 that part using a	
		—· ——				Form 990-PF (201

	(2)	· 4		age v
Part		instru	ICTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			-
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3	\vdash
_	here All other demostic foundations enter 20% of line 27b.			·
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
_				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2		3	
3 4	Add lines 1 and 2			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		3	\vdash
6	Credits/Payments:		<u>_</u>	
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a			
b	Exempt foreign organizations—tax withheld at source 6b			i
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		0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		3	
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 2016 estimated tax ▶ Refunded ▶ 11		0	
	VII-A Statements Regarding Activities		134	T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No
	participate or intervene in any political campaign?	<u>1a</u>	<u> </u>	✓
b	Instructions for the definition)?	1b		1
	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.	ļ	 	
	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1	
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓
	If "Yes," attach a detailed description of the activities.	1		
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	3	ļ	1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	1
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1		
	By language in the governing instrument, or	İ		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		ļ	
	conflict with the state law remain in the governing instrument?	6	✓	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			1
	FL, TN If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation		 	-
_		8b	 	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9	1	1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	<u> </u>	 	
	names and addresses	10		/
			90-PF	F (2015)

Par	VII-A Statements Regarding Activities (continued)		•	
			Yes	No
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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			Ť
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ► HTTP://WWW EPLUSFOUNDATION COM/			
14		5) 467	7400	
	Located at ► 104 WOODMONT BLVD, SUITE 500, NASHVILLE, TN ZIP+4 ►	3720	5	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here.			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year		V .	-
16	At any time during calendar year 2015, 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
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16		- ✓-
	the foreign country ▶			· ·
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		<u> </u>
	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? Yes No			i
	(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 No.			ļ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ✓ 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)?			'
	(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.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			<u> </u>
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ŀ		
С	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 2015?			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c		/
~	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			1
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	l		
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.)	2b		<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			'
За	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
Ja	at any time during the year?			,
h	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			· ·
b	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	1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		<u> </u>	'
	foundation had excess business holdings in 2015.)	3b		L
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			- <u>-</u> -
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	0.05	√
	Fo	rm yy	U-PF	(2015)

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 I	May Be R	equire	d (conti	nued)			
5a	During the year did the foundation pay or incur a	•									
	(1) Carry on propaganda, or otherwise attempt to		•	•	٠,		☐ Yes	✓ No			,
	(2) Influence the outcome of any specific public		-		15		_	_			
	directly or indirectly, any voter registration dri						Yes	∑ No			,
	(3) Provide a grant to an individual for travel, stud	-	-				☐ Yes	✓ No		Ì	i
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)		ritable, etc., (Пv.		1	}	1
	(5) Provide for any purpose other than religious,						☐ Yes	✓ No		Ì	I
	purposes, or for the prevention of cruelty to c						□ves	[∕] No			l l
b	If any answer is "Yes" to 5a(1)–(5), did any of the						_	_			i
_	Regulations section 53.4945 or in a current notice								5b		
	Organizations relying on a current notice regarding	-	•		•			▶ □	00		
С	If the answer is "Yes" to question 5a(4), does the	-									
	because it maintained expenditure responsibility						☐ Yes	□ No			[
	If "Yes," attach the statement required by Regula	tions s	ection 53.494	15–5(d).							Ì
6a	Did the foundation, during the year, receive any	funds,	directly or inc	directly,	to pay pre	miums				[1
	on a personal benefit contract?						☐ Yes	✓ No			
þ	Did the foundation, during the year, pay premium	ıs, dıre	ctly or indired	ctly, on	a personal	benefit	contract	? .	6b		
	If "Yes" to 6b, file Form 8870.				D 4	.	П.,	п .			
	At any time during the tax year, was the foundation a If "Yes," did the foundation receive any proceeds						Yes ansactio	_	7b		
_	VIII Information About Officers, Direct									ees.	
	and Contractors	, .				-g,				,	
1	List all officers, directors, trustees, foundation	n mana	gers and the	eir con	pensation	(see in	structio	ns).			
_	(a) Name and address		e, and average		mpensation ot paid,		Contribution		(e) Expe		
	(a) Name and address	devote	ed to position		ter -0-)		erred compe		other a	allowan	ces
	A SHELTON	IREAS	URER, 1		0			اه			0
	OODMONT BLVD, 500, NASHVILLE, TN 37205	TRUST	CC 4								
	RT RHYMER	IKUSI	EE, 1		o			0			0
104 W	OODMONT BLVD, 500, NASHVILLE, TN 37205										 -
											
2	Compensation of five highest-paid employee	s (oth	er than thos	se incli	uded on li	ne 1—:	see instr	uctions	s). If n	one, o	enter
	"NONE."										
			(b) Title, and a	verage			(d) Contrib employee		(e) Expe	200 200	oount.
	(a) Name and address of each employee paid more than \$50,00	0	hours per v devoted to p		(c) Comper	sation	plans and	deferred		allowan	
NONE					-4		compen	Sation			
NONE								- (
							1				
			-		***						
										_	
	Arc coo										
rotai	number of other employees paid over \$50,000 .	• •	<u></u>	• •	<u> </u>	-:-	<u> </u>	<u> </u>	orm 99	0 0 DE	(00:5
									orm 99	ひーピト	(2015)

Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
Tota	I number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
		1 "
	it the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of janizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1		
2		
3		
		1
4		i
	t IX-B Summary of Program-Related Investments (see instructions)	1 4
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
_		
2		
		1
All	other program-related investments. See instructions	
3		
Tota	I. Add lines 1 through 3	
		- 000 DE

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn founda	itions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes:		
а	Average monthly fair market value of securities	1a	
þ	Average of monthly cash balances	1b	446,059
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	446,059
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	446,059
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1	
	instructions)	4	6,691
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	439,368
6	Minimum investment return. Enter 5% of line 5	6	21,968
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	oundation	IS
1	Minimum investment return from Part X, line 6	1	21,968
2a	Tax on investment income for 2015 from Part VI, line 5		
Za b	Income tax for 2015. (This does not include the tax from Part VI.)	1.	
	Add lines 2a and 2b	2c	3
с 3	Distributable amount before adjustments. Subtract line 2c from line 1	3	21,965
3 4	Recoveries of amounts treated as qualifying distributions	4	48
5	Add lines 3 and 4	5	22,013
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	22,013
		, , , , , , , , , , , , , , , , , , ,	22,010
Pari	Qualifying Distributions (see instructions)		_
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	145,773
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	
3	Amounts set aside for specific charitable projects that satisfy the:		-
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	145,773
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	3
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	145,770
_	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2015)

art	XIII Undistributed Income (see instruction	ons)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				22,013
2	Undistributed income, if any, as of the end of 2015:				
a	Enter amount for 2014 only				
	Total for prior years: 20 11 ,20 12 ,20 13				
3	Excess distributions carryover, if any, to 2015:				:
а	From 2010				
b	From 2011				
C	From 2012 84,108			1	
d	From 2013	4			
е	From 2014 87,875	∮			ı
f	Total of lines 3a through e	296,909			
4	Qualifying distributions for 2015 from Part XII,				
	line 4: ▶ \$ 145,773				
а	Applied to 2014, but not more than line 2a .			0	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)		0		
C	Treated as distributions out of corpus (Election				
	required—see instructions)	o			
d	Applied to 2015 distributable amount				22,013
е	Remaining amount distributed out of corpus	123,760			
5	Excess distributions carryover applied to 2015				0
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	420.669			
	Prior years' undistributed income. Subtract	420,000			
-	line 4b from line 2b		0		
_			•		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
	Subtract line 6c from line 6b. Taxable				
đ	amount—see instructions				
			0		
е	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			0	
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				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 2010 not				
	applied on line 5 or line 7 (see instructions).	8,090			
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	412,579			
10	Analysis of line 9:	1.2,070			··
а	Excess from 2011				
a b	Excess from 2012 84,108	4			
_		4			
с С	Excess from 2013	-			
d		-			
е	Excess from 2015 123,760	'l	l	1	

	0-FF (2013)					rage 10
Part :	<u> </u>)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for	r 2015, enter the da	te of the ruling .			
ь	Check box to indicate whether the four	ndation is a private	operating foundat	tion described in se	ection 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for	(0, 20.0	(5) 25.4	(6) 20 10	(4) 2012	
	each year listed					
Þ	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					İ
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
•	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
_						
3	Complete 3a, b, or c for the			ļ		
	alternative test relied upon:			1		
а	"Assets" alternative test—enter:					
	(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					
_	•					
С	"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)					<u> </u>
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	section 4942(j)(3)(B)(iii)					
	, ,					
	(4) Gross investment income	<u> </u>			1000	<u></u>
Part				ne toundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instructior	ıs.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	nan \$5,000). (See s	section 507(d)(2).)	
b	List any managers of the foundation	who own 10% or	more of the sto	ck of a corporatio	n (or an equally la	arge portion of the
_	ownership of a partnership or other e					g. p
	The state of the s	,,		3. Tanan		
	1	. 0	- 0-1			
2	Information Regarding Contribution		-	-		
	Check here ► ☑ If the foundation	•	•		-	
	unsolicited requests for funds. If the		gifts, grants, etc.	(see instructions)	to individuals or o	rganizations under
	other conditions, complete items 2a,					
а	The name, address, and telephone nu	umber or e-mail ac	ldress of the pers	on to whom applic	ations should be	addressed:
b	The form in which applications should	be submitted and	Information and	materials they sho	ould include:	
	totti iii willon apphoations should	and and	oiduon and			
	Any submission doodlines:					
С	Any submission deadlines:					
	A				alala	44.4.000 00 04600
d	Any restrictions or limitations on av	wards, such as b	y geographical a	reas, charitable fi	eias, kinas ot ins	sulutions, or other
	factors:					
						Form 990-PF (2015)

Part	XV Supplementary Information (con	tinued)			
3	Grants and Contributions Paid During	the Year or Approv	ed for Fut	ure Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
а	Paid dunng the year				
(SEE	STATEMENT)				
]		
			1		
					1
			1		
		1			
					ļ
					İ
					1
	Total				3a 134,607
b	Approved for future payment				
			ļ		
		1			
			<u> </u>		
	Total			<u> ▶ :</u>	3b 0

Pa	rt X'	VI-A Analysis of Income-Producing Ac	tivities				
Ente	r gro	oss amounts unless otherwise indicated.	Unrelated bu	Isiness income	Excluded by sect	on 512, 513, or 514	(0)
1	Pro	gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
•	а	gram service revenue.					
	b						
	С						
	d						
	е						
	f	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
	g	Fees and contracts from government agencies			-		
2	_	mbership dues and assessments					
3		rest on savings and temporary cash investments			14	512	
4		idends and interest from securities					
5	Ne	rental income or (loss) from real estate:				-	
	а	Debt-financed property					
	b	Not debt-financed property					
6	Net	rental income or (loss) from personal property			1		
7	Oth	er investment income					
8	Gai	n or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events					
10	Gro	ess profit or (loss) from sales of inventory					
11	Oth	ner revenue: a					
	b	OTHER REVENUE			1	370	
	С						
	d						
	е						
12		ototal. Add columns (b), (d), and (e)		0	<u> </u>	882	0
13						13	882
13 (See	wo	ksheet in line 13 instructions to verify calculation	ıs.)			13	882
13 (See Pa	wol	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	wo	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
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13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
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13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
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13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	woi rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	t Purposes		

Part 2	XVII		n Regarding Trar ganizations	isfers To	o and Trans	saction	is and F	Relationshi	ps With M	Nonchar	ritable	В	
1	Did th		directly or indirectly	engage ir	any of the fo	ollowing	with an	other organ	nization de:	scribed	Π	Yes	No
			e Code (other than								ŀ		
		zations?	•				•					Ì	
а	Transf	ers from the rec	orting foundation to	a nonch	aritable exen	npt orga	nızatıon	of:					,
	(1) Ca										1a(1)		1
	(2) Ot	her assets .									1a(2)		1
		transactions:											\neg
	(1) Sa	les of assets to	a noncharitable exe	empt orga	anization .						1b(1)		1
	(2) Pu	rchases of asse	ets from a noncharit	able exen	npt organizat	ion					1b(2)		✓
	(3) Re	ntal of facilities,	, equipment, or othe	er assets							1b(3)		✓
	(4) Re	imbursement ai	rrangements								1b(4)		✓
	(5) Lo	ans or loan gua	rantees								1b(5)		✓
	(6) Pe	rformance of se	ervices or membersh	hip or fun	draising solic	itations					1b(6)		✓
C	Sharın	ig of facilities, e	quipment, mailing li	sts, other	assets, or pa	aid emp	loyees				1c		✓
			of the above is "Ye										
			ther assets, or serve										
			on or sharing arrang										
(a) Line	no (b) Amount involved	(c) Name of nonc	hantable ex	empt organizatio	n	(d) Desc	nption of transfe	rs, transactioi	ns, and shar	ing arra	ingem	ents
	_												
	_				-								
	-												
	_												
	+				•	-							
	+					-				· · ·			
	_		<u> </u>	-									
													
	+									<u>-</u>			
	_												
	_												
						-							
2a	Is the	foundation dire	Lectly or indirectly at	filiated w	uth or relate	d to on	e or mo	re tax-exem	ot organiza	ations			
			501(c) of the Code (l Yes	[7]	Nο
			e following schedule							_	,	لبنا	
			nization		(b) Type of orga	anization	_		(c) Description	n of relation	ship		
						·				-			
				1									
					7,								
												•	
							_						
			declare that I have examin							my knowled	ge and l	oelief, r	is true,
Sign	correc	t, and complete. Decl	laration of preparer (other th	0 \	is based on all inf	formation o	f which prep	parer has any kno	wiedge.	May the IF	RS discu	ss this	return
Here		Losert	B. Krym	روع	7/20/10	🕽 OFF	ICER			with the p			
	Signa	 	stee		Date	Title				(see instruc	AIONS)?	∡j res	□140
Paid		Print/Type preparer	r's name	9.1	.0.1	1-4.	2016.0	7. 15°°° 6:54:4	I1 Chec	k ∏ ıf P	TIN		
Prepa	, ror	RACHEL SPURL	оск	Tall	u cymr	NO UN	-04'00'		self-e	employed	POC	5207	29
Use (Firm's name ▶	CROWE HORWATH	LLP		·			Firm's EIN	- [35-092	1680	
J36 (Firm's address ▶	105 CONTINENT	AL PLAC	E SUITE 20	0 BREN	IOOWTI	O TN 37027	Phone no		5) 360	-5500	
		-								Fo	m 99	0-PF	(2015)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

E PLUS FOUNDATION

Schedule of Contributors

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

OMB No 1545-0047

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

Employer identification number 20-4190331

Organiz	ganization type (check one):					
Filers of	f:	Section:				
Form 99	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note. O	nly a section 501(c)(7 ons.	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
Genera	l Rule					
Ø	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					
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½% support test of the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line I that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
	contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
	contributor, during t contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, contributions exclusively for religious, charitable, etc., purposes, but no such dimore than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the est to this organization because it received nonexclusively religious, charitable, etc., contributions nore during the year				
Caution	An organization tha	t is not covered by the General Rule and/or the Special Rules does not file Schedule R (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).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Cat No 30613X Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization Employer identification number E PLUS FOUNDATION 20-4190331

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	E+ HEALTHCARE, LLC 104 WOODMONT BOULEVARD, #500 NASHVILLE, TN 37205-2245	\$6,746	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	UNITED WAY FOR SOUTH LOUISIANA 7910 MAIN STREET, SUITE 460 HOUMA, LA 70360	\$7,431	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MORGAN CITY HIGH SCHOOL 2400 TIGER DRIVE MORGAN CITY, LA 70380	\$14,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
E PLUS FOUNDATION

Employer identification number 20-4190331

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) FMV (or estimate) (b) (d) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) **Date received** Description of noncash property given Part I (see instructions)

Name of or				·	Employer identification number
Part III	DUNDATION Exclusively religious, charitable, et	to contributions to	o organizations de	soribad i	20-4190331
Part III	(10) that total more than \$1,000 for the following line entry. For organiza contributions of \$1,000 or less for the Use duplicate copies of Part III if add	r the year from any tions completing Pa ne year. (Enter this ir	one contributor. (rt III, enter the total formation once. So	Complete of of exclusion	columns (a) through (e) and vely religious, charitable, etc.,
(a) No. from	(b) Purpose of gift	(c) Use		(d) Des	scription of how gift is held
Part I					
-		(e) Trans	fer of gift	·	
	Transferee's name, address, a			ship of tra	nsferor to transferee
			*		
					•••••
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De:	scription of how gift is held

-		(e) Trans	fer of gift	<u> </u>	
1	- 6	- 4 71D - 4	Datation		
-	Transferee's name, address, a	na ZIP + 4	Helation	isnip of tra	nsferor to transferee
				•••••	
(a) No.					
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of how gift is held
			····		
ŀ		(e) Trans	fer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relation	nship of tra	nsferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of how gift is held
		•••••			
		(e) Trans	fer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relation	nship of tra	nsferor to transferee

Part I, Line 11 Other income

D	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income
Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income
(1) MISCELLANEOUS INCOME	370	0	0
TOTAL	370	0	0

Part I, Line 16a	Legal fees			
Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Chantable disbursements
(1) LEGAL FEES	5,512			
TOTAL	5,512	0	0	

Part I, Line 16b	Accounting fees			
Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Chantable disbursements
(1) ACCOUNTING FEES	1,650	165		
TOTAL	1,650	165	(0

Part I. Line 23 Other expenses	Part	1 1	ine 23	Other expenses
--------------------------------	------	-----	--------	----------------

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Chantable disbursements
(1) EVENT EXPENSES	7,891			7,891
(2) FILING FEES	2,180			2,180
(3) KOMEN MISCELLANEOUS EXPENSE	25			25
(4) MISCELLANEOUS EXPENSE	465			95
(5) BANK FEE	38			38
(6) CHECKS ORDERED	163			163
(7) INSURANCE	859	86		773
TOTAL	11,621	86		0 11,165

Part III, Line 5	Decreases	
	Description	Amount
(1) PRIOR PERIOD ADJUSTMENT	Description	6,871
TOTAL		6,871

Part XV, Line 3a

Grants and Contributions Paid During the Year (continued)

Name and Address	Relationship	Foundation status	Purpose	Amount
HELP FOR HEALTH 716 COLLEGE VIEW DRIVE SUITE B RIVERTON, WY, 82501	NONE	PC	TRANSPORTATION ASSISTANCE TO PATIENTS	17,370
AMERICAN CANCER SOCIETY 500 DENMARK STREET #515 STATESBORO, GA, 30458	NONE	PC	SUPPORT AN ORGANIZATION THAT WORKS TO ELIMINATE CANCER AS A MAJOR HEALTH PROBLEM BY PREVENTING CANCER, SAVING LIVES, AND DIMINISHING SUFFERING FROM THE DISEASE THROUGH RESEARCH, EDUCATION, ADVOCACY AND SERVICE	86,439
CAJUN INVASION 115 WEST BAYOU SHR LAFAYATTE, LA, 70508	NONE	PC	TO SUPPORT GENERAL CHARITABLE OPERATIONS	1,633
INDIGENT CANCER PATIENTS N/A N/A, N/A	NONE	1	TRANSPORTATION, LODGING, FOOD, CANCER SCREENINGS, COURT COSTS, MEDICAL SUPPLIES, UTILITIES, MEDICAL CARE, AND OTHER FINANCIAL ASSISTANCE TO CANCER PATIENTS DUE TO FINANCIAL HARDSHIPS ASSISTANCE IS MINOR IN AMOUNT PER PATIENT, SO IT IS IMPRACTICAL TO LIST ALL AID RECIPIENTS	10,626
UNITED WAY FOR SOUTH LOUISIANA 7910 MAIN STREET SUITE 460 HOUMA, LA, 70460	NONE	PC	TO SUPPORT GENERAL CHARITABLE OPERATIONS.	3,333
MORGAN CITY HIGH SCHOOL 2400 TIGER DRIVE MORGAN CITY, LA, 70380	NONE	PC	TO SUPPORT GENERAL CHARITABLE OPERATIONS	15,206