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### Form .990-PF

### **Return of Private Foundation**

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2015 or tax year beginning and ending A Employer identification number THE EBERT-LEBLANC FAMILY FOUNDATION INC Number and street (or PO box number if mail is not delivered to street address) Room/suite 45-5333162 9020 ROCKY CANNON RD B Telephone number (see instructions) City or town State ZIP code **CORDOVA** TN 38018 901-758-8886 Foreign country name Foreign province/state/county Foreign postal code C if exemption application is pending, check here G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, Address change ☐ Name change check here and attach computation H Check type of organization Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here Ine 16) ▶ \$ 4,103,528 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per income income purposes books equal the amounts in column (a) (see instructions)) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 744 Check ▶☐ if the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 56,020 56,020 56.020 5a Gross rents b Net rental income or (loss) *&* 6a Net gain or (loss) from sale of assets not on line 10 1.020 Gross sales price for all assets on line 6a 915,459 ¥4. 7 Capital gain net income (from Part IV, line 2) 1,020 8 Net short-term capital gain Income modifications 9 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 57,040 57.040 56.020 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) **برک** 995 b Accounting fees (attach schedule) 2,995 Other professional fees (attach schedule) C 17 Interest OGDEN. Taxes (attach schedule) (see instructions) 18 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 5,304 5,304 5,304 22 Printing and publications 23 Other expenses (attach schedule) 5,724 4.800 5,724 24 Total operating and administrative expenses. Add lines 13 through 23 14,023 13,099 14.023 25 Contributions, gifts, grants paid 210,085 210.085 Total expenses and disbursements. Add lines 24 and 25. 26 224,108 13,099 14.023 210,085 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -167,068 **Net investment income** (if negative, enter -0-) 43,941 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

D.	art II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End	of year
	art ii		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		<u></u>	
	2	Savings and tempor	rary cash investments			
	3	Accounts receivable	· •		\$ # *	^
		Less allowance for	doubtful accounts			
	4	Pledges receivable	<b>&gt;</b>	8	<u>^</u>	, , ,,
		Less allowance for	doubtful accounts			
	5	Grants receivable				
	6	Receivables due fro	m officers, directors, trustees, and other			
		disqualified persons	(attach schedule) (see instructions)			
	7		eceivable (attach schedule)			
		Less allowance for dou	btful accounts	and and an	and the second second of the second s	i o na nondere e de e codo se mendiano
ম	8	Inventories for sale				
Assets	9		nd deferred charges			
As	10a	•	state government obligations (attach schedule)			
•	b		rate stock (attach schedule)	3,779,550	3,649,131	4,103,528
	c	-	rate bonds (attach schedule)	0,710,000	0,040,101	7,100,020
	11	•	dings, and equipment, basis	<b>4</b>	, š	, ;
	l ''					
	12	Investments—morto	'	-	<del></del>	<del> </del>
	13	Investments—other		-	<del> </del>	<u> </u>
	14	Land, buildings, and eq				<u> </u>
	'*				* * * * * * * * * * * * * * * * * * *	<u> </u>
	45	•	, , , , , , , , , , , , , , , , , , , ,		<del></del>	<del> </del>
	15	Other assets (descr	,			
	16		completed by all filers—see the	0.770.550	0.040.404	
	17	Instructions Also, se		3,779,550	3,649,131	4,103,528
			nd accrued expenses		<del></del>	,
es	18	Grants payable				*
Ξ	19	Deferred revenue				
Liabilities	20		rectors, trustees, and other disqualified persons			
=======================================	21		r notes payable (attach schedule)	[		
	22	Other liabilities (des	***************************************			<b>!</b> * ' i
_	23	- <del></del>	I lines 17 through 22)	0	0	/( *)/ *
Ś		Foundations that for	ollow SFAS 117, check here			× ′ ∦ (4
alances	l		24 through 26 and lines 30 and 31.			8 <b>4</b> ♦
<u>a</u>	24	Unrestricted				¥ 1
Ba	25	Temporarily restricted			·	**
פ	26	Permanently restrict				*
Net Assets or Fund B			o not follow SFAS 117, check here 🕒 💢			* * *
rЕ		and complete lines	-			
0	27		orincipal, or current funds			
et	28	-	rplus, or land, bldg , and equipment fund			, ` ` 1
58	29	_	cumulated income, endowment, or other funds	3,779,550	3,649,131	
t A	30	Total net assets or	fund balances (see instructions)	3,779,550	3,649,131	
Ž	31	Total liabilities and	net assets/fund balances (see			
		instructions)		3,779,550	3,649,131	
	rt III		anges in Net Assets or Fund Balances			
1			lances at beginning of year—Part II, column (a)	line 30 (must agree	with	
	end-o	f-year figure reported	on prior year's return)	-	1	3,779,550
2	Enter	amount from Part I, I	ine 27a .		2	-167,068
3	Other	increases not include	ed in line 2 (itemize)   Increase in Market \	∕alue	3	36,649
4		nes 1, 2, and 3			4	3,649,131
5		eases not included in			5	, , , , , , , , , , , ,
6	Total r	net assets or fund ba	lances at end of year (line 4 minus line 5)—Part	II, column (b), line 30	6	3,649,131

Pari	Capital Gains and	u Losses for tax on investi	nent income				
-		he kind(s) of property sold (e g , real estate ouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date a		(d) Date sold (mo , day, yr)
1 <u>a</u>	Charles Schwab 6136 ST			Р	1	/1/2015	12/31/2015
b	Charles Schwab 6136 LT			Р	1	/1/2014	12/31/2015
c	Brown Brothers Harriman			Р	1	/1/2015	12/31/2015
<u>d</u>	Brown Brothers Harriman	LT		Р	1	/1/2014	12/31/2015
<u> </u>		,					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis inse of sale		(h) Gain (e) plus (f)	
a	422,568			483,482			-60,914
<u>b</u>	330,841	<u>.</u>		342,864			-12,023
<u>c</u>	135	-		142			-7
<u>d</u>	161,915			87,951			73,964
е	Complete anh for accets al			40/04/00			
	(I) FM V as of 12/31/69	nowing gain in column (h) and owned (j) Adjusted basis as of 12/31/69	(k) Exces	i on 12/31/69 is of col (i) (j), if any			(h) gain minus ess than -0-) or m col. (h))
		G3 01 123 1103	over cor	U), II ally			
<u>а</u> b	<del></del>						-60,914
							-12,023 -7
d							73,964
е							70,001
2	Capital gain net income or	Ther canital loss)	also enter in Pai , enter -0- in Par	<b>&gt;</b> 1	2		1,020
3	Net short-term capital gain	or (loss) as defined in sections 1		ti, iiie i	-		1,020
	_	line 8, column (c) (see instruction		er-0- ın 🔰			
	Part I, line 8		. , ,		3		-60,921
Part	V Qualification Und	ler Section 4940(e) for Redu	iced Tax on N	let Investment	Income		
	ptional use by domestic priv tion 4940(d)(2) applies, leav	vate foundations subject to the se	ction 4940(a) tax	on net investmei	nt income)		
		·					
If "Yes	ne foundation liable for the s s " the foundation does not d	section 4942 tax on the distributal qualify under section 4940(e) Do	ole amount of an	y year in the base	e period?		∐ Yes X No
1		unt in each column for each year,		<u> </u>	a ony ontri		
•	(a)		See the instruct	<u></u> .	ig any enin	<del>E</del> 5	(d)
Cale	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use as	sets		bution ratio
	2014		9,776	4.105	5.480	(cor (b) ar	orded by col. (c)) 0 048661
	2013		2,219	4,103			0-044410
	2012						0 000000
	2011						0 000000
	2010						0 000000
	<b>-</b>						
2	Total of line 1, column (d)				2		0 093071
3		or the 5-year base period—divide		2 by 5, or by the			
	number of years the found	ation has been in existence if less	s than 5 years		3		0 046536
4	Enter the net value of none	charitable-use assets for 2015 fro	m Part X, line 5		_4		336,831
_							
5	Multiply line 4 by line 3			•	5		<u>15,6</u> 75
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			6		439
_							
7	Add lines 5 and 6				7		16,114
8	Enter qualifying distribution				8		210,085
	If line 8 is equal to or great Part VI instructions	er than line 7, check the box in Pa	art VI, line 1b, ar	nd complete that p	art using a	1% tax r	ate See the

Part '	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	ructio	ons)		
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	1		439	)
С	here ► 🗓 and enter 1% of Part I, line 27b  All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	*	<u> </u>	·	
_	Part I, line 12, col (b)	_			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	<del>                                     </del>	0	_
3	Add lines 1 and 2	3		439	1
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	5		420	-
5 6	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments	-		439	<u>'</u>
а	2015 estimated tax payments and 2014 overpayment credited to 2015   6a   2,035	,	,		
b	Exempt foreign organizations—tax withheld at source  6b	,	,		
c	Tax paid with application for extension of time to file (Form 8868)  6c	< 3	, , §,		
ď	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7		2,035	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	_	0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	_10		1,596	
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ► 1,596 Refunded ►	11		0	
Part '	VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if		<u> </u>	Yes	No
	participate or intervene in any political campaign?		<u> </u>	<u>a                                    </u>	<u>  x</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			.	1.
	Instructions for the definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material.	'-	1	<u>,                                    </u>	X
	published or distributed by the foundation in connection with the activities	S		. 3	*
С	Did the foundation file Form 1120-POL for this year?		1		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		***	7	
	(1) On the foundation ►\$ (2) On foundation managers ►\$			<b>* 3</b> 22	*,
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed	—   <i>*</i>	1 35	
	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities		* >		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			Lia.	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4:		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		<del></del>	b= -N/A-	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T		5	<u>'</u>	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
•	By language in the governing instrument, or		ŀ		
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions th</li> </ul>	at	~		
	conflict with the state law remain in the governing instrument?	<b>~</b> ·	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	_	<b>†</b>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			, ,, ,	. %
	TN		İ	,	, ; }
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	ral	<sub>.</sub>		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		81	b X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3		~~	Ž. 13	
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?	lf .			
46	"Yes," complete Part XIV		9	Ч.—	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	eir	1.		١.
	names and addresses			וע	X

Pari	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	L.	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	ļ.,	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address	13	X	<u> </u>
14	The books are in care of ► JOSEPH C LEBLANC  Telephone no ► (901) 75	8-888	 6	
-	Located at ▶ 9020 ROCKY CANNON RD CORDOVA TN ZIP+4 ▶ 38018	0.000	·	
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			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If			ł
Dowl	"Yes," enter the name of the foreign country	<u> </u>		
Paru	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	T	1	T
4-	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)		ĺ	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No.	ļ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	-		<b>%</b> .
	disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (2) Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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	1	, } š	
	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 section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here	3		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	14 y		
2	were not corrected before the first day of the tax year beginning in 2015?	<u>1c</u>		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		<b>)</b>
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	ŀ		
—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	"`		
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		*	
25	<b>▶</b> 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	,	,	
h			,	,
b	If "Yes," did it have excess business holdings in 2015 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 2015)	3b	N/A	<i>ا</i> ـ ـــ ـا
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	197	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		

	1 1				•	)					
m 99	90-PF (2015) THE EBERT-LEBLANC FAMILY	FOUN	DATION INC					45-53	333162	P	age 6
art	VII-B Statements Regarding Activities	for W	hich Form	4720 N	lay Be Re	quire	d (contin	ued)			
ia	During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to i			section	4945(e))?		Yes	X No	,	, <b>1</b>	*
	(2) Influence the outcome of any specific public ele directly or indirectly, any voter registration drive		see section 49	955), or	to carry on	•	Yes	X No	, ,		, ,
	(3) Provide a grant to an individual for travel, study	, or oth	er sımılar pur	poses?			Yes	X No	) (	14.1. 1.20.	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)							, , , , , , , , , , , , , , , , , , ,	·		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes X No								, '	<i>**</i>	
b	If any answer is "Yes" to 5a(1)-(5), did any of the t	ransact	ions fail to qu	alify un	der the exc	eptions	described	d in	J		
	Regulations section 53 4945 or in a current notice			-		-			5b	N/A	
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the fo	disaste	er assistance	check l	nere		•	▶ 🗌	\$		
	because it maintained expenditure responsibility for if "Yes," attach the statement required by Regulation	r the gr	ant?	•	iom the tax		☐ Yes	☐ No	) , 50 °	*	* .
a	Did the foundation, during the year, receive any fur on a personal benefit contract?				oay premiur	ns	☐ Yes	X No			*,
b		directly	or indirectly,	on a p	ersonal ben	efit cor	_		6b		X
'a	At any time during the tax year, was the foundation a pa						Yes	☐ No			
b								-:	7b	لـــــا	
an	VIII Information About Officers, Direct	ors, ir	ustees, ro	undati	on manag	gers, i	Highly Pa	aid En	npioye	es,	
	and Contractors					! 4					
	List all officers, directors, trustees, foundation		e, and average		mpensation (Se		Contributions).	s to			
	(a) Name and address	hou devot	rs per week ed to position	` (If ı	not paid, iter -0-)	empl	oyee benefit ferred compe	plans	(e) Expe	ense acc allowan	
	ENNE EBERT LEBLANC	PRESI									
	ROCKY CANNON ROAD CORDOVA, TN 38018		2 31		0						
	PH CHRISTOPHER LEBLANC	SECRI									
	ROCKY CANNON ROAD CORDOVA, TN 38018		2 31		0			_			
	SEAA LEBLANC ROCKY CANNON ROAD CORDOVA, TN 38018	DIREC	TOR 58		0						
	CAN MILLER	DIREC	TOR								
20 I	ROCKY CANNON ROAD CORDOVA, TN 38018		58		0						
?	Compensation of five highest-paid employees ( "NONE."	other th	nan those inc	cluded	on line 1—	see in	structions	s). If no	ne, ent	er	
			(b) Title, and a	verage			(d) Contribu				
	_(a).Name_and_address of each employee paid more than \$50,000		hours per w	reek —	—(c) Compen	sation	employee. plans and c compens	deferred	e).Expe other	nse acc allowan	

and Contractors								
1 List all officers, directors, trustees, foundation	manag	ers and their	compe	ensation (se	ee inst	ructions).		
(a) Name and address	` hou	e, and average rs per week ed to position	` (If r	ompensation not paid, nter -0-)	empl	Contributions oyee benefit p ferred compe	lans	(e) Expense account, other allowances
ADRIENNE EBERT LEBLANC	PRES	IDENT						
9020 ROCKY CANNON ROAD CORDOVA, TN 38018	İ	2 31	ĺ	0				
JOSEPH CHRISTOPHER LEBLANC	SECR	ETARY						
9020 ROCKY CANNON ROAD CORDOVA, TN 38018	1	2 31	ĺ	o				
CHELSEAA LEBLANC	DIREC	TOR						<del></del>
9020 ROCKY CANNON ROAD CORDOVA, TN 38018		58	ĺ	0				
JESSICAN MILLER	DIREC	TOR						
9020 ROCKY CANNON ROAD CORDOVA, TN 38018		58	l	0				
2 Compensation of five highest-paid employees ( "NONE."	other t	han those in	cluded	on line 1—	see in:	structions	). If no	ne, enter
(a).Name and address of each employee paid more than \$50,000	) <u> </u>	(b) Title, and a hours per w devoted to po	reek 💳	(c) Compen	sātion	(d) Contribu employee.l plans and d compens	enefit eferred	=(e)-Expense account,- other allowances
NONE								
	<del>-</del>							
Total number of other employees paid over \$50,000								
							F	form <b>990-PF</b> (2015)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pair and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter '	'NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	<b>•</b>
Part IX-A Summary of Direct Charitable Activities	
Summary of Direct Chamable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	
,	
2	
,	
3	
<u> </u>	
4	<del></del>
<u> </u>	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
	····
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	▶ 0

Form **990-PF** (2015)

Form 990-PF (2015)

Part	X Minimum Investment Return (All domestic foundations must complete this part Forei	gn foundati	ons,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	· · ·	
	purposes	where silver	
а	Average monthly fair market value of securities	1a	216,886
b	Average of monthly cash balances	1b	125,074
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	341,960
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	341,960
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	5,129
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	336,831
6	Minimum investment return. Enter 5% of line 5	6	16,842
Part :			
	foundations and certain foreign organizations check here and do not complete this part )	T 4 T	
1	Minimum investment return from Part X, line 6	,, -1- -	16,842
2a	Tax on investment income for 2015 from Part VI, line 5  2a 43	<b>-1</b> .557	
b	Income tax for 2015 (This does not include the tax from Part VI)		400
C	Add lines 2a and 2b	2c	439
3	Distributable amount before adjustments Subtract line 2c from line 1	3	16,403
4 5	Recoveries of amounts treated as qualifying distributions Add lines 3 and 4	4	40.400
6	Deduction from distributable amount (see instructions)	5	16,403
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	6	
•	line 1	7	10 400
			16,403
Part	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	210,085
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	_
_4 _	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	210,085
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	439
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	209,646
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating who	ether the four	
	qualifies for the section 4940(e) reduction of tax in those years		

	VIII Indict-inuted Income			1101111	<del></del>				40-	JJJJ 10	Page 3
Par	XIII Undistributed Income (	(see instruction	1S)					<u> </u>			
_	Distributable assessed for 2045 forms	Dark VI	ı	(a) Corpus			b) or to 2014		(c) 2014		(d) 2015
1	Distributable amount for 2015 from	Part XI,	-	Corpus		rears pin	01 10 2014		2014	-	
_	line 7		ļ		, 32				·	ļ	16,403
2	Undistributed income, if any, as of the	end of 2015			ı				407.450		
a	Enter amount for 2014 only						405.500		197,159		
b		20_12, 20_13	ļ				195,509	,			- k
3	Excess distributions carryover, if an	1y, to 2015									
a	From 2010		4								
b	From 2011	<del></del>	4	4.	~						
C	From 2012			•							
d	From 2013		4								
e	From 2014						\$ <b>*</b>	¥	₩.	*	
f	Total of lines 3a through e				이						
4	Qualifying distributions for 2015 fro	m Part XII,									
	line 4 ▶ \$ 210,085			â		•			, , , , ,	44	
а	Applied to 2014, but not more than								197,159		
b	Applied to undistributed income of	•			, ,					*	
	(Election required—see instructions	•	<u> </u>		*					<u> </u>	, *
С	Treated as distributions out of corpu	us (Election			ŀ						
	required—see instructions)					······					
d	Applied to 2015 distributable amount		3000	ž Ž	**.	<u></u>	×.	, Kee	**,		12,926
е	Remaining amount distributed out of	•				**				5	
5	Excess distributions carryover appli					, 1%		3			
	(If an amount appears in column (d	• •		** }	- 1	`\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				3 *	
	amount must be shown in column (	(a) )			1						
6	Enter the net total of each column	n as	,		4				À,	4	
	indicated below:		<u> </u>	<i>"</i>	}	~	Algolik *	<b>*</b> ***	******	,	· · · · · · · · · · · · · · · · · · ·
а	Corpus Add lines 3f, 4c, and 4e Si				0						
b	, ,	Subtract		¥.	<sub>*</sub> -						
	line 4b from line 2b				×.		195,509		Κ .	`	*
C	Enter the amount of prior years' und	distributed	ŀ								
	income for which a notice of deficie	ncy has	\$					2 Male.	1	904.	
	been issued, or on which the sectio	n 4942(a)	k					7		*	
	tax has been previously assessed										
d	Subtract line 6c from line 6b Taxab	le		<b>%</b> .	4					*	. *
	amount—see instructions		<u> </u>	~~			195,509	_ ``		*	**,
е	Undistributed income for 2014 Sub	tract line	İ								-
	4a from line 2a Taxable amount—s	see	_			<del>ya </del>	a ojitya wa				
	instructions		3.		~%		' <b>k</b>		0		
f	Undistributed income for 2015 Sub	tract lines									
	4d and 5 from line 1 This amount n	nust be	8,			3>			2		
	distributed in 2016		1						"		3,477
7	Amounts treated as distributions ou	t of corpus									
	to satisfy requirements imposed by	section			1	>	>				
	170(b)(1)(F) or 4942(g)(3) (Election	may be			ŀ						
	required—see instructions)						:				
8	Excess distributions carryover from	2010 not									
	applied on line 5 or line 7 (see instri	uctions)									
9	Excess distributions carryover to	•									
	Subtract lines 7 and 8 from line 6a										
10	Analysis of line 9							<del></del>			
а	Excess from 2011										
b	Excess from 2012		1						j		
С	Excess from 2013		1								
d	Excess from 2014		7								
е	Excess from 2015		1								

Page 10

Part	XIV Private Operating Foundat	ions (see instru	ctions and Part \	/II-A, question 9)		N/A
1a	If the foundation has received a ruling of	r determination let	ter that it is a priva	te operating		
	foundation, and the ruling is effective fo	r 2015, enter the d	ate of the ruling	•		
b	Check box to indicate whether the foundation		_	ribed 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	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for each year listed					0
ь	85% of line 2a					0
c	Qualifying distributions from Part XII,			-		<del></del>
•	line 4 for each year listed					0
d	Amounts included in line 2c not used directly		_			
•	for active conduct of exempt activities					0
е	Qualifying distributions made directly	· · · · · · · · · · · · · · · · · · ·				
C	for active conduct of exempt activities					
	Subtract line 2d from line 2c		ļ	İ		0
3	Complete 3a, b, or c for the					<u>_</u>
3	alternative test relied upon					
а	"Assets" alternative test—enter					
a	(1) Value of all assets					0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					0
ь	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					0
_	Part X, line 6 for each year listed				<del>-</del>	
С	"Support" alternative test—enter  (1) Total support other than gross					
	investment income (interest,		İ			
	dividends, rents, payments on		1			
	securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from		-			
	an exempt organization					0
	(4) Gross investment income			·		0
Part		n (Complete thi	s nart only if th	e foundation ha	d \$5 000 or moi	
· arc	any time during the year—	•	•	c louildation na	u 45,000 or mo	e iii gaacta at
1	Information Regarding Foundation M		<u> </u>		<del></del>	
a	List any managers of the foundation wh		more than 2% of t	the total contributio	ns received by the	foundation
_	before the close of any tax year (but on	v if they have cont	ributed more than	\$5.000) (See secti	on 507(d)(2).)	
		·		, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	= · · · · · · · · · · · · · · · · · · ·	
b	List any managers of the foundation wh	o own 10% or mor	e of the stock of a	corporation (or an	equally large portion	n of the
	ownership of a partnership or other entir	tv) of which the fou	indation has a 10%	or greater interest	t tally large portion	
		,,		<b>3</b>		
	Information Regarding Contribution,	Grant, Gift, Loan.	Scholarship, etc.	. Programs:	·	
_	Check here ► 🛛 if the foundation on				ations and does no	nt accent
	unsolicited requests for funds If the fou	ndation makes gift	s, grants, etc (see	instructions) to ind	ividuals or organiza	ations
	under other conditions, complete items			·		
a	The name, address, and telephone num	nber or e-mail addr	ess of the person t	to whom application	s should be addre	ssed
-	The second secon	o. o man addi	223 C. 1.13 PO10011 1	application	.5 5,,55,,5 50 55,010	
	The form in which applications should b	e submitted and in	formation and mat	erials they should in	nclude	<del></del>
-	The second secon					
c	Any submission deadlines	·			<del>-</del>	
-	, caac.s., accoming					
d	Any restrictions or limitations on awards	s, such as by geogr	raphical areas cha	ritable fields, kinds	of institutions, or o	ther
_	factors:	,, goog.			J	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				<u> </u>
Alzheimers Association Mid-South		PC	Unrestricted Donation	5,000
4825 Trousdale Drive, Suite 220				,,,,,,
Nashville, TN 37220				
American Heart Association		PC	Unrestricted Donation	5,000
2170 Business Center Dr , #1		' •	Sinconicted Beriation	0,000
Memphis, TN 38134				
First Methodist Church		PC	Unrestricted Donation	500
204 N Second Street		'	Onestricted Bonation	]
Memphis, TN 38105				
Catholic Diocese of Memphis		PC	Pichania Annaal	5 000
5825 Shelby Oaks Drive			Bishop's Appeal	5,000
Memphis, TN 38134				
Associated Catholic Charities of the Diocese of Memph		DC.		5.000
1325 Jefferson Avenue		PC	Unrestricted Donation	5,000
Memphis, TN 38104		D0	N	5 000
Catholic Diocese of Memphis		PC	Villa Vianney	5,000
5825 Shelby Oaks Drive	i			
Memphis, TN 38134			<b></b> <u>.</u> .	
Church Health Center of Memphis, Inc		PC	Unrestricted Donation	5,000
1210 Peabody Avenue				
Memphis, TN 38104				1
Citizens for Community Values, Inc PO Box 770775		PC	Unrestricted Donation	5,000
Memphis, TN 38177				-
De La Salle Christian Brothers (La Salle International F		PC	Unrestricted Donation	3,000
1522 Breaux Bridge Road				
Lafayette, LA 70501				
Ducks Unlimited, Inc		PC	Unrestricted Donation	4,400
One Waterfoul Way				
Memphis, TN 38120				Ì
Leadership Empowerment Center, Inc		PC	Unrestricted Donation	5,000
1548 Poplar Avenue		. •		]
Memphis, TN 38104				1
Total See Attached Statement			3a	210,085-
b Approved for future payment				210,000
				ŀ
1				
	İ			
Total			<b>▶</b> 3b	0
				<u> </u>

			tivities				
١١١٤	er gros	s amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by sect	on 512, 513, or 514	(0)
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	_	ram service revenue					
	.a _		<u> </u>				
	p _		<u> </u>	<del></del>		-	
	c _						
	d _						
	е _		ļ				
	f _				ļ		
	g F	ees and contracts from government agencies					
2	Mem	bership dues and assessments					
3	Intere	est on savings and temporary cash investments					
4	Divid	lends and interest from securities			14	56,020	
5	Net r	ental income or (loss) from real estate	心能的性能是	Marie Contraction	i,m was	1.4.	·
	a D	Debt-financed property					
	b N	Not debt-financed property					
6		rental income or (loss) from personal property					
7		r investment income			24		
8	Gain	or (loss) from sales of assets other than inventory			18	1,020	
9		ncome or (loss) from special events	·			.,	
10		s profit or (loss) from sales of inventory	· · · · ·		<del></del>		·
11		r revenue a			-		
••	b		-		<del> </del>		
	- c				-		•
	d –		-				
	<u> </u>		<del></del>		<del></del>		
42	Subt	etal Add columns (b) (d) and (e)	71.00			57.040	
		otal Add columns (b), (d), and (e)	1,335.18.43.23.11.11	0	* 7"	57,040	
		I. Add line 12, columns (b), (d), and (e)				13	57,040
		sheet in line 13 instructions to verify calculations		4 -6 F4		<del></del>	
_	rt XVI		ccombiisnm	ent of Exempi	Purboses		
LIN		<del></del>					
	ne No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons )
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons )
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the es) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the les) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons )
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons)
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons )
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part >	(VI-A contributed	importantly to the ses) (See instruction	ons )

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

			<del></del>									
1	Did 1	the organization d	lirectly or indirectly eng	gage in any of the f	ollowing w	vith any ot	her organiza	ation descr	ibed		Yes	No
	ın se	ection 501(c) of the	e Code (other than se	ction 501(c)(3) orga	anizations)	or in sec	tion 527, rel	ating to		*		
	polit	ical organizations	?									
а	Tran	sfers from the rep	porting foundation to a	noncharitable exe	mpt organi	zation of						
	(1) (	Cash								1a(1)		Χ
	(2)	Other assets								1a(2)		X
b	Othe	er transactions								_		
	(1) 5	Sales of assets to	a noncharitable exem	pt organization						1b(1)		X
	(2) F	Purchases of asse	ets from a noncharitabl	e exempt organiza	tion					1b(2)		Х
	(3) F	Rental of facilities,	equipment, or other a	ssets						1b(3)		Х
	(4) F	Reimbursement ar	rrangements							1b(4)		Х
		∟oans or loan gua								1b(5)		X
	(6) F	Performance of se	ervices or membership	or fundraising soli	citations					1b(6)		_X_
С			quipment, mailing lists							1c		_ X
d	If the	e answer to any of t	he above is "Yes," comp	plete the following so	hedule. Co	olumn ( <b>b)</b> si	hould always	show the f	aır market			
	value	e of the goods, othe	er assets, or services giv	en by the reporting	foundation.	. If the foun	dation receiv	ed less tha	n fair marke	et <sub>.</sub>		
	value	<del></del>	or sharing arrangemen			of the goo	ds, other ass	ets, or serv	ices receive	ed		
(a) Line	no	(b) Amount involved	(c) Name of nonch	aritable exempt organiza	ition	(d) Des	cription of trans	fers, transacti	ons, and shar	ing arrar	ngemen	ts
				·								
							·					
		····		<del>- \</del>			· .					
	-+			<del></del>				<del></del>				
	$\dashv$	<u> </u>										
	-						·					
	<del></del>	-										
	<del> -</del>											
				<u> </u>								
	$\dashv$						-					
2a	ls th	e foundation direc	tly or indirectly affiliate	ad with or related t	o one or r	nore tay o	vemet erge	nizatione				
	desc	cribed in section 5	01(c) of the Code (oth	er than section 501	l(c)(3)) or i	in section	5277	IIZaliUIIS		Yes [	א וצ	0
ь			following schedule		(-)(-))					,00 (	<u> </u>	
		(a) Name of organ		(b) Type of o	rganization		<u> </u>	(c) Descript	on of relation	shin		
				<u> </u>				(0) = 000.1		<u>-</u>		
		<del>.</del>										
							·					
									_			
				_								
	Unde	er penalties of perjury, I decl	lare that I have examined this retui	m, including accompanying s	chedules and st	atements, and t	to the best of my k	nowledge and b	elief, it is true,			
Sign	corre	ct, and complete Deglarate	on of preparer (other than taxpaye	r) is based on all information	of which prepare	er has any knov	vledge		May the IRS	discuss t	his retur	
Here		SK NehU	m	8/12/1	6 50	CRAL	EPN		with the prep	parer show	n below	<u> </u>
	Sug	nature of officer or trus		Date	Title				(see instruct	ions)	Yes	No
Paid	V	Print/Type preparer's	s name	Preparer's sugnature	7		Date	Che	ck   r	TIN	•	
	ror	G STILES ROU	GEOU, CPA	105 9xY	<u> </u>	AR	8/10/20			01330	868	
Prepa		Firm's name	STILES ADVISORS,	PC		· • · ·		Firm's EIN			_	
Use O	ıııy	Firm's address ▶	1914 EXETER RD, S	UITE 2, GERMAN	TOWN, TN	I 38138		Phone no	(901) 7		17	
										m <b>990</b>		2015)

Continuation of Part XV, Lir	ne 3a (990-PF) -	Gran	ts and Con	tributions Paid	During th	e Year
Recipient(s) paid during the year	<del></del>		•			
Name						
LeBonheur Children's Hospital Foundati	on					
Street						
848 Adams Avenue		04-4-	T=	le	4	
City		State	<b>Zip Code</b> 38103	Foreign Coun	try	
Memphis Relationship	Foundation Status	<u> IN</u>	136103			
Kelationship	PC					
Purpose of grant/contribution	11.0				Amount	
Unrestricted Donation						15,000
Name						, , , , , , , , , , , , , , , , , , , ,
Memphis Union Mission						
Street			<del></del>	<del></del>		
PO Box 330						
City		State	Zip Code	Foreign Coun	try	
Memphis		TN	38101		•	
Relationship	Foundation Status					
	PC				1-	
Purpose of grant/contribution					Amount	
Unrestricted Donation						5,000
Name						
Mid-South Food Bank					· · · · · · · · · · · · · · · · ·	
Street						
239 S Dudley Street		04-4-	In a c	JE : 0		
City Memphis		State TN	<b>Zip Code</b> 38104	Foreign Count	try	
Relationship	Foundation Status	114	130104			
Troidtionismp	PC					
Purpose of grant/contribution	.1		<del></del>		Amount	
Unrestricted Donation						5,000
Name			· · · · · · · · · · · · · · · · · · ·			
Monastery of St Clare						
Street						
1310 Dellwood Avenue						
City		State	Zip Code	Foreign Count	try	
Memphis		TN	38127			
Relationship	Foundation Status					
Down and the state of the state	PC			<del></del> .		
Purpose of grant/contribution Unrestricted Donation				<del></del>	Amount	0.500
Office Donation					<u> </u>	3,500
Name						
Pawsitivity						
Street 197 Griggs Street N						
City		State	Zip Code	Foreign Count	·n·	
St Paul		MN	55104	Foreign Count	ury	
Relationship	Foundation Status	19114	100104	<u>L</u> .		
<b>P</b>	PC					
Purpose of grant/contribution	•				Amount	
Unrestricted Donation						2,500
Name						
Ronald McDonald House Charities of Me	emphis					
Street				<del></del>		
535 Alabama Avenue						
City	-		Zip Code	Foreign Count	try	
Memphis	<u> </u>	TN	38105			
Relationship	Foundation Status					
Purpose of grant/contribution	PC			<del></del>	America	
Unrestricted Donation					Amount	2 000

Continuation of Part XV, Li	ne 3a (990-PF) -	Gran	ts and Con	tributions Paid	During th	ne Year
Recipient(s) paid during the year						
Name						
Salvation Army						
Street				<del></del>		
696 Jackson Avenue	_					
City	<del></del>	State	Zip Code	Foreign Count	try	
Memphis		TN	38105			
Relationship	Foundation Status					
	PC					
Purpose of grant/contribution					Amount	
Unrestricted Donation				~		3,000
Name						
St Benedict at Auburndale High Schoo						
Street						
8250 Varnavas Drive						
City		State	Zip Code	Foreign Count	try	
Cordova		TN	38016			
Relationship	Foundation Status			=0-0		
	PC					
Purpose of grant/contribution					Amount	
Field House						50,000
Name						
Shelby Farms Park Conservancy						
Street			-		<del></del>	
6489 Mullins Station Road						
City		State	Zip Code	Foreign Count	rv	
Memphis		TN	38134		,	
Relationship	Foundation Status					
•	PC					
Purpose of grant/contribution					Amount	
Unrestricted Donation						3,000
Name					•	<del></del>
St Augustine Catholic School						
Street	<u> </u>					
1169 Kerr Avenue						
City		State	Zip Code	Foreign Count		
Memphis		TN	38106	Foreign Count	ry	
Relationship	Foundation Status	111	130100			
· · · · · · · · · · · · · · · · · · ·	PC					
Purpose of grant/contribution	1. 0				Amount	
Santa's Workshop			<del></del>	· <del></del> - <del></del> <del>-</del>	- Amount	1,000
					<u></u> .	1,000
Name						
St Francis of Assisi Catholic Church						
Street						
8151 Chimneyrock Blvd		01-1-	T	<u> </u>		
City Cordova		State	Zip Code	Foreign Count	ry	
Relationship	Faundation Ctatus	TN	38016			
Relationship	Foundation Status					
Purpose of grant/contribution	PC				1.	
EDGE Youth Program					Amount	
EDGE_foutil Frogram					<u> </u>	2,000
Name						
St Francis of Assisi Catholic School						
Street						
2100 N Germantown Pkwy	<u>.                                    </u>					
City		State	Zip Code	Foreign Count	ry	
Cordova		TN	38016			
Relationship	Foundation Status		<del></del>		<u></u>	
<del>-</del>	PC					
Purpose of grant/contribution			_		Amount	
Buchignani Endowment					<u></u>	10,000

Continuation of Part XV, L		Gran	ts and Con	tributions Paid		e Year
Recipient(s) paid during the year				<u></u>		
Name						
St Francis of Assisi Catholic School						
Street	. <del>.</del>					
2100 N Germantown Pkwy			<del></del>		<del> </del>	
City			Zip Code	Foreign Coun	itry	
Cordova Relationship	Foundation Status	TN	38016			
Relationship	PC	•				
Purpose of grant/contribution					Amount	
Tuition Assistance				<del></del>		6,685
Name						
St Jude Children's Research Hospital						
Street						
262 Danny Thomas Place City			Tin Code	[Fameling Oasse	4	
Memphis		TN	<b>Zip Code</b> 38105	Foreign Coun	try	
Relationship	Foundation Status		100 100			
	PC					
Purpose of grant/contribution					Amount	
Marathon Donation	······································					1,000
Name						
St Jude Children's Research Hospital						
Street						
262 Danny Thomas Place City		State	Zip Code	Foreign Coun	tn.	
Memphis		TN	38105	l oreign coun	uy	
Relationship	Foundation Status		1			
	PC			÷		
Purpose of grant/contribution					Amount	
Unrestricted Donation						8,000
Name						
Tennessee Aquarium Street						
1 Broad Street						
City		State	Zip Code	Foreign Coun	trv	<del></del> -
Chattanooga		TN	37402	, or or <b>g</b> o o <b>u</b>	,	
Relationship	Foundation Status	-		· · · · · · · · · · · · · · · · · · ·		
Description of the second seco	PC		<del></del> -		1 -	
Purpose of grant/contribution Unrestricted Donation			<del></del>	<del></del>	Amo <u>unt</u>	0.500
	<del></del>	<del></del>		<del></del>		2,500
Name						
Brown House Street				<del></del>	<del></del>	
PO Box 3206						
City		State	Zip Code	Foreign Coun	try	
Tuscaloosa		AL	35403			
Relationship	Foundation Status					
Purpose of grant/contribution	PC PC				T	
Unrestricted Donation					Amount	3,000
						3,000
Name Alpha Omicron Pi (University of Alabar	ma)					
Street	11a)			<del></del>	<del></del>	
MSC 870412, 1831 University Station						
City			Zip Code	Foreign Count	try	
Tuscaloosa		AL	35487			
Relationship	Foundation Status					
Purpose of grant/contribution	IFC			<del></del>	Amount	
Building Fund					Amount	5,000
					<del></del>	

Continuation of Part XV, Lin	<u>e 3a (990-PF) - </u>	<u>Gran</u>	ts and Con	<u>tributions Paid</u>	During th	<u>e Year</u>
Recipient(s) paid during the year						
Name						
University of Alabama						
Street						
Box 870122, 284 Rose Admin Building		Chata	Zin Code	Earsian Count		<del></del>
City Tuscaloosa		State AL	<b>Zip Code</b> 35487	Foreign Count	ry	
Relationship	Foundation Status		100401			
Troid in the second sec	PC					
Purpose of grant/contribution					Amount	
College of Environmental Science-Dietet	ics				<u> </u>	2,000
Name						
University of Tennessee-Chattanooga						
Street						
615 McCallie Avenue			Y			
City			Zip Code	Foreign Count	ry	
Chattanooga  Relationship	Foundation Status	TN	37403			
Relationship	PC					
Purpose of grant/contribution	11 0			<del></del>	Amount	
Biology Department						5,000
Name			,			
University of Memphis Foundation						
Street				· · · · · · · · · · · · · · · · · · ·		
PO Box 1000						
City		State	Zip Code	Foreign Count	ry	
Memphis	.,	TN	38148			
Relationship	Foundation Status					
Purpose of grant/contribution	PC				1A ma a um 4	
Unrestricted Donation					Amount	1,000
					.1	1,000
Name						
West Tennessee Veterans Home Inc Street						
2670 Union Ave Ext, 5th Floor						
City	<u> 1</u>	State	Zip Code	Foreign Count	:rv	
Memphis		TN	38112			
Relationship	Foundation Status					<del>-</del>
	PC	_		<del></del>	T -	
Purpose of grant/contribution Unrestricted Donation					Amount _	45.000
Onrestricted Donation						15,000
Name						
Wounded Warrior Project						
<b>Street</b> PO Box 758517						
City		State	Zip Code	Foreign Count		
Topeka		KS	66675	i oreign count	y	
Relationship	Foundation Status		•			
	PC			_		
Purpose of grant/contribution					Amount	
Unrestricted Donation	<del></del>				<u> </u>	10,000
Name						
	<u> </u>					
Street						·
Cit.	<del>- 1</del>	C4s4s	17:n On 1	le		
City		State	Zip Code	Foreign Count	гу	
Relationship	Foundation Status					
·						
Purpose of grant/contribution					Amount	

### THE EBERT-LEBLANC FAMILY FOUNDATION INC

## Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

								Totals.		s	Cost or Other Basis, Expenses,	isis, Expenses,	Net	Net Gain ,
	Amount	ı							Sales	ş	Depreciation and Adjustments	d Adjustments	orL	or Loss
Long Term CG Distributions		0					ٽ ٽ	Capital Gams/Losses		915,459		914,439		1,020
Short Term CG Distributions		0						Other sales		0		0		0
				Check X f										
		Check X		Purchaser							Expense of Sale			
		to include	-	S a	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
Description	CUSIP#	in Part IV	/ Purchaser	Business	Method	Acquired	Sold	Рпсе	Other Basis	Method	Improvements	Depreciation	Adjustments	or Loss
1 Charles Schwab 6136 ST		×	The Ebert-LeBlanc Family Four	×	Ь	1/1/2015	12/31/2015	422,568	483,482					-60,914
2 Charles Schwab 6136 LT		×	The Ebert-LeBlanc Family Four	×	<u>а</u>	1/1/2014	12/31/2015	330,841	342,864					-12.023
3 Brown Brothers Harrman ST		×	The Ebert-LeBlanc Family Four	×	Ъ	1/1/2015	12/31/2015	135	142					7-
4 Brown Brothers Harriman LT		X	The Ebert-LeBlanc Family Four	×	d	1/1/2014	12/31/2015	161,915	87,951					73,964

Part I, Line 11 (990-PF) - Other Income

	0	0	0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1 Ordinary Gain		0	

Part I, Line 16b (990-PF) - Accounting Fees

		2,995	2,995	2,995	0
					Disbursements
		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	Stiles Advisors, PC	2,995	2,995	2,995	0

Part I, Line 23 (990-PF) - Other Expenses

		5,724	4,800	5,724	0
1		Revenue and Expenses	Net Investment	Adjusted Net	Disbursements for Charitable
	Description	per Books	Income	Income	Purposes
1	POSTAGE/SHIPPING	924	0	924	
2	ADMINISTRATION FEE	4,800	4,800	4,800	
3	INVESTMENT MANAGEMENT FEE	0	0		

# Part II, Line 10b (990-PF) - Investments - Corporate Stock

			3,779,550	3,649,131	4,368,050	4,103,528
		Num. Shares/	Book Value	Book Value	FMV	╚
	Description	Face Value	Beg. of Year	End of Year	Beg. of Year	End of Year
-	Charles Schwab 6136 Deposit Accts-Cash		1,161,246	1,347,023	1,161,246	1,347,023
7	2 Charles Schwab 6136 Equities		694,876	319,613	843,359	448,974
က	3 Charles Schwab 6136 Other Assets		242,261	0	258,025	0
4	Brown Brothers Harriman 4518 Cash		24,230	153,868	24,230	153,868
2	5 Brown Brothers Harriman 4518 Equities		806,425	778,115	1,217,263	1,079,601
9	Brown Brothers Harriman 4518 Fixed Income	е	850,512	850,512	863,927	848,785
7	7 Bay Point Capital Partners		0	200,000	0	225,277

THE EBERT-LEBLANC FAMILY FOUNDATION INC

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and Foundation Managers	0 ' 0 0	Expense Expense	City State Zip Code Foreign Country Title Per Week Compensation Benefits Account	TN 38018 PRESIDENT	38018 SECRETARY 2.31 0	0 DIRECTOR 0.58 0	0 DIRECTOR 0 58 0
on Managers				N 38018		1	
ees and Foundatio				CORDOVA	CORDOVA	CORDOVA	CORDOVA
Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers			Street	9020 ROCKY CANNON ROAD	9020 ROCKY CANNON ROAD C	9020 ROCKY CANNON ROAD C	9020 ROCKY CANNON ROAD
pensation		Check "X"	if Business				
I, Line 1 (990-PF) - Comp			Name	ADRIENNE EBERT LEBLANC	JOSEPH CHRISTOPHER LEBLAN	CHELSEAA. LEBLANC	JESSICAN. MILLER
₹					7 ~		<u>                                     </u>