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Form **990-PF**

Return of Private Foundation

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

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

For	calen	dar year 2015 or tax year beginning		, and e	nding		
		foundation				A Employer identification	n number
Т	ΗE	EASON AND ELLEN LEAKE					
	HA	RITABLE FOUNDATION				46-2015599)
Nun	nber a	nd street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
_7	01	NORTHLAKE AVENUE				601-362-74	188
City	or to	own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is p	pending, check here
_R	ID	GELAND, MS 39157					
G (heck	all that apply: Initial return	Initial return of a fo	ormer public c	harity	D 1. Foreign organization:	s, check here
		Final return	Amended return			2 Foreign organizations m	noting the 9594 toot
		X Address change	Name change			Foreign organizations me check here and attach co	omputation lest,
H_ C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation			E If private foundation sta	itus was terminated
\bot	Se		Other taxable private founda			under section 507(b)(1)(A), check here
I Fa	ıır ma	arket value of all assets at end of year J Accounti	=	Accr	ual	F If the foundation is in a	
			her (specify)			under section 507(b)(1)(B), check here
		717,286. (Part I, colu	nn (d) must be on cash b	pasis)			T
	<u>rt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net in		(c) Adjusted net	(d) Disbursements for charitable purposes
<u> </u>		necessarily equal the amounts in column (a))	expenses per books	inco	me	income	(cash basis only)
S SINCE	1	Contributions, gifts, grants, etc., received	6,190.			N/A	
III	2	Check from the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
APR	4	Dividends and interest from securities	7,416.		<u>7,416.</u>		STATEMENT 1
	5a	Gross rents			. <u> </u>		
<u>~~</u>	b	Net rental income or (loss)					
ē.	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	223,405.				
©S Sel	b	assets on line 6a 4/2,243.			2 405		
Revenue	7	Capital gain net income (from Part IV, line 2)		22	3 <u>,405.</u>		
	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns	_				
	10a	and allowances	-				
	l	Less Cost of goods sold					
	C	Gross profit or (loss)		_			
	11	Other income	005 011		0 001		
	12	Total. Add lines 1 through 11	237,011.		<u>0,821.</u>		
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
ģ		Pension plans, employee benefits		-	^		441
nse	1	Legal lees STMT 2	441. 3,337.	 	0.		1,668.
8	b	Accounting fees STMT 3	3,33/.		1,669.		1,000.
E E		Other profession Fig. EVED			· · · · · · ·		
Ę	17	Interest C					
Operating and Administrative Expense	18	Taxes APR 1 1 2016 Depreciation and depletion		<u> </u>			
Ę		Occupancy					
퉏	20	Travel, conferences and meeting				· -	
Þ	21	Printing and publications					<u> </u>
ā	22	Other expenses STMT 4	328.		328.		0.
ţį	23	Total operating and administrative	<u> </u>		320.		•
era	24	expenses. Add lines 13 through 23	4,106.		1,997.		2 109
ဝီ	25	Contributions, gifts, grants paid	18,905.		+ , , , , , , ,		2,109. 18,905.
	1	Total expenses and disbursements.	20,700.				20,303.
	20	Add lines 24 and 25	23,011.		1,997.		21,014.
	27	Subtract line 26 from line 12:			_,,		
		Excess of revenue over expenses and disbursements	214,000.				
	l	Net investment income (if negative, enter -0-)		2.2	8,824.		
	l	Adjusted net income (if negative, enter -0-)			_ ,	N/A	
5235 11-24		LHA For Paperwork Reduction Act Notice, see	instructions.				Form 990-PF (2015)

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46-2015599 Form 990-PF (2015) CHARITABLE FOUNDATION Page 2 Beginning of year End of year Attached schedules and amounts in the description **Balance Sheets** column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value 13,929. 50 50. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 746,320. 717,236 518,441. STMT 5 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 746,370. 532,370. 717,286. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted $\triangleright \overline{X}$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ō 27 Capital stock, trust principal, or current funds 0. 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 532,370. 746,370 29 Retained earnings, accumulated income, endowment, or other funds 532,370. 746,370 30 Total net assets or fund balances 532,370 746,370 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	-	
	(must agree with end-of-year figure reported on prior year's return)	1	532,370.
2	Enter amount from Part I, line 27a	2	214,000.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	746,370.
5	Decreases not included in line 2 (itemize)	5	0.
	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	746,370.

Form **990-PF** (2015)

		AND ELLEN FOUNDATI		i				46-20	L5599 Page 3	
Page Capital Gains	and Losse	s for Tax on In	vestmen	t Income						
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)						How acq - Purcha - Donat	uired ase ion	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a						-		-		
b SEE ATTACHED	STATEM	IENT								
<u>c</u>							-			
e				<u> </u>						
(e) Gross sales price		ciation allowed allowable)		st or other basis expense of sale				(h) Gain or (los (e) plus (f) minus		
a b										
C										
d			_							
e 272,243.				48,83	8.				223,405.	
Complete only for assets showing		1			-		(I) (I	Gains (Col. (h) gair k), but not less tha	n minus	
(i) F.M.V. as of 12/31/69		usted basis f 12/31/69		cess of col. (1) col. (j), if any				Losses (from col.	(h))	
<u>a</u>					_					
b c								····		
d										
е									223,405.	
2 Capital gain net income or (net ca	pıtal loss)	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2			223,405.	
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		sections 1222(5) and	d (6):		}					
If (loss), enter -0- in Part I, line 8 Qualification U	ndor Socti	on 4940(a) for	Peduced	Tay on Not	<u> </u>	3	ant Inco	N/F	1	
										
(For optional use by domestic private If section 4940(d)(2) applies, leave th Was the foundation liable for the sect	nis part blank.					··,			Yes X No	
If "Yes," the foundation does not qual 1 Enter the appropriate amount in 6	ify under sectio	n 4940(e). Do not cor	mplete this pa	ırt.		<u> </u>			NU	
(a)		(b)			(c)			Dietri	(d) bution ratio	
Base period years Calendar year (or tax year beginnii	ng in) Ad	djusted qualifying dist		Net value of no	ncha	ritable-us		(col. (b) divided by col. (c))		
2014			8,472.				,752.		.019049	
2013 2012			0.			8	,052.		.000000	
2012										
2010										
2 Total of line 1, column (d)								2	.019049	
3 Average distribution ratio for the state the foundation has been in exister	•		in line 2 by 5,	or by the number	of ye	ars		3	.009525	
Enter the net value of noncharitable			ına 5					4	554,197.	
	116-USC 835613 N	or 2013 Hollin alt A, I	ille J							
5 Multiply line 4 by line 3								5	5,279.	
6 Enter 1% of net investment incom	ne (1% of Part I	, line 27b)						6	2,288.	
7 Add lines 5 and 6								7	7,567.	
8 Enter qualifying distributions from If line 8 is equal to or greater than	•		1b. and comp	olete that part using	o a 1º	% tax rat	ie.	8	21,014.	
See the Part VI instructions.			.,		J			<u> </u>		

THE EASON AND ELLEN LEAKE

	n 990-PF (2015) CHARITABLE FOUNDATION		2015			Page 4
Pε	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see i	nstru	ictio	ns)
1 a	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 here 🕒 🗶 and enter 1%	1			2,2	88.
	of Part I, line 27b					
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2		_		0.
3	Add lines 1 and 2	3			2,2	88.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2,2	88.
	Credits/Payments:					
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 1,369.	i i				
	Exempt foreign organizations - tax withheld at source 6b	1 1				
	Tax paid with application for extension of time to file (Form 8868)	1 j				
	Backup withholding erroneously withheld 6d	1				
	Total credits and payments. Add lines 6a through 6d	7			1.3	69.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			9	19.
10		10				
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
	rt VN-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	un.			Yes	No
14	any political campaign?	""		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	12		1b		X
U		•		"		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	3U 01			4	
	distributed by the foundation in connection with the activities.			1	\vdash	X
	Did the foundation file Form 1120-POL for this year?			10		<u> </u>
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
_	managers. ► \$ 0.			<u> </u>	 	ليا
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 of incorporation, of	и		<u> </u>		L
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	NT	/ 3	4a	\vdash	X
	olf "Yes," has it filed a tax return on Form 990-T for this year?	N,	A	4b	$\vdash \vdash$	77
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
_	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:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	aw			 	77
_	remain in the governing instrument?			6	77	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	Х	
_						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		—			
	MS					
b	off the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			-		
_	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	поаг		-	$\vdash\vdash$	
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	mv-	<i>c</i>	9	17	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	TMT	6	10 rm 99 0	X	(0045)
			FOR	111 22(<i></i>	(2015)

	THE EASON AND ELLEN LEARE				
Form	990-PF (2015) CHARITABLE FOUNDATION	46-201	<u>5599</u>		Page 5
Pe	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	_	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had ad	visory privileges?			
	If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► N/A				
14	The books are in care of ▶ ELLEN LEAKE Telepho	ne no. ▶ 601-3	62-7	488	
	Located at ▶ 701 NORTHLAKE AVENUE, RIDGELAND, MS	ZIP+4 ►3			
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	▶ 15		/A_	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank	,		Yes	No
	securities, or other financial account in a foreign country?		16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		ĺ		_
	foreign country				
PE	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	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)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		, ,,		
	if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days.)	Yes X No	,		
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)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	ted			
	before the first day of the tax year beginning in 2015?		1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation which was a private operating foundation for the private operating for the privat	dation	lı		
	defined in section 4942(j)(3) or 4942(j)(5)):				
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) b	eginning			
	before 2015?	Yes X No			
	If "Yes," list the years >				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to if	correct			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" an	d attach			
	statement - see instructions.)	N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		i		
	>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	Yes X No	1		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified per	sons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(j	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sche			j.	
	Form 4720, to determine if the foundation had excess business holdings in 2015.)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	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		X
			vm 000	DE	(004C)

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

3 Five highest-paid independent contractors for professional services. If none, ent	er "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		▶ 0
Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	stical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc.	Expenses
1 N/A		
2		
4		
Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year o	n lines 1 and 2.	Amount
1 <u>N</u> /A		
		<u> </u>
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3		0.

Form 990-PF (2015)

CHARITABLE FOUNDATION

			instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	562,446.
b	Average of monthly cash balances	1b	191.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	562,637.
е	Reduction claimed for blockage or other factors reported on lines 1a and	_	
	1c (attach detailed explanation)	0.	_
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	562,637.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,440.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	554,197.
6	Minimum investment return. Enter 5% of line 5	6	<u>27,710.</u>
عَلِ	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found	lations and certain	
	foreign organizations check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	27,710.
2a	Tax on investment income for 2015 from Part VI, line 5	288.	
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,288.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	25,422.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	25,422.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	25,422.
[]2	Qualifying Distributions (see instructions)		
<u> </u>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
-	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	21,014.
b	5 10 10 10 10 10 10 10 10 10 10 10 10 10	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:		
-	Suitability test (prior IRS approval required)	3a	
	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	21,014.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	7	21/0140
3	income. Enter 1% of Part I, line 27b	5	2,288.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	18,726.
0	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for		
	4940(e) reduction of tax in those years.	maation qualifies for the	,

Form **990-PF** (2015)

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	· ,			
line 7				25,422.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			11,526.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013	'			
e From 2014	0.			
f Total of lines 3a through e 4 Qualifying distributions for 2015 from				
Part XII, line 4: ▶ \$ 21,014.				
a Applied to 2014, but not more than line 2a			11,526.	
b Applied to undistributed income of prior			11/5200	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		i		
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				9,488.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	,		
b Prior years' undistributed income. Subtract				
line 4b trom line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				15,934.
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	0.			
9 Excess distributions carryover to 2016.	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012 c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

Part XX Private Operating For	BLE FOUNDAT		II.A guestion 9)		15599 _ raye i
1 a If the foundation has received a ruling or			- ' · · · · · · · · · · · · · · · · · ·	<u> </u>	
foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	•	un caetion	4942(j)(3) or 49)42(_J)(5)
2 a Enter the lesser of the adjusted net	Tax year	III IOUIIUALIOII GESCIIDEG	Prior 3 years	4542(J)(3) UI45	142())(3)
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for	(4) 40 10	(4) 25	(0) = 0.0	(4) 23 12	(5) 10001
each year listed		<u> </u>	+	 	
 b 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 for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			· · · · · · · · · · · · · · · · · · ·		
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
` '					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	1				
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)		<u> </u>	<u> </u>		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income				1 45 000	<u> </u>
Supplementary Info			r it the foundatio	n nad \$5,000 or mo	ore in assets
at any time during t		ructions.)			
1 Information Regarding Foundation				e lata de la composition della	
a List any managers of the foundation who year (but only if they have contributed m			atributions received by the	ne toundation before the clos	se of any tax
SEE STATEMENT 7					
b List any managers of the foundation who other entity) of which the foundation has			n (or an equally large por	tion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., F	Programs:		
Check here X If the foundation of the foundation makes gifts, grants, etc. (•	•	•	·	
a The name, address, and telephone numl	ber or e-mail address of	the person to whom app	olications should be addi	ressed:	
2 , , , , , , , , , , , , , , , , , , ,		F			
b The form in which applications should b	e submitted and informa	ation and materials they	should include:		
c Any submission deadlines:					· .
		_			
d Any restrictions or limitations on awards	s, such as by geographic	cal areas, charitable field	s, kinds of institutions, o	or other factors:	

CHARITABLE FOUNDATION

46-2015599 Page 11

Form 990-PF (2015) Supplementary Information (continued) Pai XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Purpose of grant or Foundation Amount contribution status of Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY GENERAL SUPPORT **JDRF** 1640 LELIA DRIVE, STE 130 5,905, JACKSON, MS 39216 PUBLIC CHARITY GENERAL SUPPORT MS MUSEUM OF ART 380 S LAMAR STREET 6,000. JACKSON, MS 39201 PUBLIC CHARITY GENERAL SUPPORT ST ANDREW'S EPISCOPAL SCHOOL 370 OLD AGENCY ROAD 2,500. RIDGELAND MS 39157 PUBLIC CHARITY GENERAL SUPPORT WASHINGTON PROJECT FOR THE ARTS 2124 8TH ST NW 1,500. WASHINGTON, DC 20001 PUBLIC CHARITY GENERAL SUPPORT TRANSFORMER 1404 P STREET NW 2,000. WASHINGTON DC 20005 SEE CONTINUATION SHEET(S) **▶** 3a 18,905. Total b Approved for future payment NONE

Total

▶ 3b

Analysis of Income-Producing Activities

	Unvoloted	huainasa inaama	1 = 4 1 4		
Enter gross amounts unless otherwise indicated.	(a) Business	business income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a	+-				
b	 	······	++		
c			+		
d			+ +		
e		_ 			
f	—				
g Fees and contracts from government agencies				···	
2 Membership dues and assessments			+		<u> </u>
3 Interest on savings and temporary cash					
investments	-		11	7 416	·····
4 Dividends and interest from securities			14	7,416.	· · · · · · · · · · · · · · · · · · ·
5 Net rental income or (loss) from real estate:		··			
a Debt-financed property					
b Not debt-financed property	ļ				· · · · · · · · · · · · · · · · · · ·
6 Net rental income or (loss) from personal	1				
property					
7 Other investment income	-		+ +		
8 Gain or (loss) from sales of assets other			10	222 405	
than inventory			18	223,405.	· · · · · · · · · · · · · · · · · · ·
9 Net income or (loss) from special events			+ +		· · · · · · · · · · · · · · · · · · ·
10 Gross profit or (loss) from sales of inventory	- -		+		
11 Other revenue:					
<u> </u>	 		+ +		
b	 		+ +		
<u> </u>					
<u> </u>	-		 		
E Supremy Agg enjury (b) (d) and (e)		0		230,821.	_0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)		<u></u> . <u>U</u>	•	13	
(See worksheet in line 13 instructions to verify calculations.)				13	230,021.
Relationship of Activities	to the Accor	nplishment of E	Exempt F	Purposes	
Line No. Explain below how each activity for which inco			-A contribute	ed importantly to the accomp	olishment of
the foundation's exempt purposes (other than	by providing lund	s for such purposes).			
		_		······························	
				<u> </u>	
					
					
					
	<u></u>				
				· · · · · · · · · · · · · · · · · · ·	 - ·
					
1					
				-	

46-2015599

Page 13

Yes No

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

th	e Code (other than section 501(c))(3) organizations) oi	r in section 52	27, relatıı	ng to political organ	nizations?				
a Tra	ansfers 1	from the reporting founda	ation to a noncharital	ble exempt or	ganızatıc	on of:					
(1) Cash								1a(1)	<u> </u>	X
(2) Other	assets							1a(2)		X
b Ot	her trans	sactions:									
(1) Sales	of assets to a noncharital	ble exempt organizat	ion					1b(1)		_X_
(2) Purch	ases of assets from a no	ncharitable exempt o	rganization					1b(2)	ļ	X
(3) Renta	l of facilities, equipment,	or other assets						1b(3)		X
(4) Reimb	oursement arrangements							1b(4)		X
(5) Loans	or loan guarantees							1b(5)		X
(6) Perfor	mance of services or me	mbership or fundrais	sing solicitatio	ns				1b(6)	L	<u> </u>
c Sh	aring of	facilities, equipment, ma	iling lists, other asset	ts, or paid em	ployees				1c		<u> </u>
		er to any of the above is								sets,	
		given by the reporting fo			ed less t	han fair market valu	ie in any transaction	or sharing arrange	ement, show in		
		the value of the goods,									
a) Line i	10 1	(b) Amount involved	(c) Name of	noncharitable	exempt	organization	(d) Description	of transfers, transacti	ons, and sharing ar	rangeme	nts
				N/A							
							<u> </u>				
										_	
	_										
	_										
	<u> </u>		<u> </u>								
								-			
2a Is	the foun	dation directly or indirect	tly affiliated with, or r	elated to, one	or more	tax-exempt organi	zations described				
ın	section	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	ion 5277	?			Yes	X	No
b if	Yes," co	mplete the following sch			·						
		(a) Name of org	anization		(b) Typ	oe of organization		(c) Description of re	elationship		
		N/A									
										_	
					ļ					_	
	T				<u> </u>	 .	L			_	
٥.		penalties of perjury, I declare the lief, it is true, correct, and con							■ May the IRS of		
Sign Here	1 .	C _ 4	1					-	return with th shown below	e prepare (see ins	er tr)?
пеге		Car	<u>leepe</u>				Vice Pr	esident	LX_ Yes	· L_	J No
	Sign	ature of officer or trustee				ate	Title	<u> </u>	1		
		Print/Type preparer's na	ime	Preparer's si	-		Date	Check if	PTIN		
D~:~			, , , , , , , , , , , , , , , , , , ,	Hand	D.	Conti CAP	3/3./16	self- employed			
Paid		HAROLD G.							P00283		
Prep		Firm's name ► COR	BIN & ASS	OCIATE	S, E	PLLC		Firm's EIN ► 2	6-36140	22	
Use	Unly										
		Firm's address ▶ P .									
		<u>M</u> A	DISON, MS	<u> 39130</u>	<u>-157</u>	74		Phone no. 60			
									Form 99 ()-PF	(2015)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

THE EASON AND ELLEN LEAKE CHARITABLE FOUNDATION

Employer identification number

46-2015599

Organization type (check one)								
Filers of:		Section:						
Form 990	or 990-EZ	501(c)() (enter number) organization						
		4947(a)(1) nonexempt charitable trust not treated as a private foundation						
		527 political organization						
Form 990	PF	X 501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
	-	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions						
General F	Rule							
	=	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special R	ules							
s	ections 509(a)(1) a iny one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II						
y	ear, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III						
i.)	rear, contributions s checked, enter h ourpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., emplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.						
but it mus	st answer "No" on	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
THE EASON AND ELLEN LEAKE
CHARITABLE FOUNDATION

Employer identification number

46-2015599

	Contributors (see instructions) Use duplicate copies of Part I if additional	l space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EASON & ELLEN LEAKE 701 NORTHLAKE AVE RIDGELAND, MS 39157	\$6,190.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

THE EASON AND ELLEN LEAKE

CHARITABLE FOUNDATION

Employer identification number

46-2015599

	TABLE FOUNDATION		2013333
Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	3,690 SH RENASANT CORP		
1			
		\$ 126,272.	10/08/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	2,500 SH RENASANT CORP		
1			
		\$\$1,863.	12/02/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
		\$	90. 990-EZ. or 990-PF) (20

Employer identification number

THE	EASON	AND	ELLEN	LEAKE
CHAI	RITABLE	FOU	NDATI	ON

46-2015599

	Use duplicate copies of Part III if addition	al space is needed I				
No. m t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
- _						
		(e) Transfer of git	't			
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
o. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
- -						
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee			
			Ţ.			
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gif	it			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
No. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
- [-						
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			

Capital Gains and Lo	2262 IOL Lay on macamient income				
(a) List and	I describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MI C Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
				J	
	E FUND		<u>P</u>	01/06/14	
b OW SMALL & MID			P	01/06/14	
	CAP FUND		P		02/25/15
d OW REAL RETURN	FUND		P		03/17/15
e OW REAL RETURN	FUND		P	01/06/14	03/1 <u>7/15</u>
f RENASANT CORP	3,690 SHS		D	02/06/98	10/09/15
	2,500 SHS		D	02/06/98	
	DIVIDENDS				
1				 	
		_		- -	
k			<u> </u>	 	
				 	
<u>m</u>			 -	· - ·	
n					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a 7,105.		7,061.			44.
b 4,703.		4,731.	· · · · · · · · · · · · · · · · · · ·		-28.
c 12,752.		13,014.			-262.
d 7,495.		9,322.	<u> </u>	_ _	-1,827.
		8,520.	· · · · · · · · · · · · · · · · · · ·	····	$\frac{1,827.}{-1,843.}$
		3,690.		·	$\frac{-1,045.}{123,385.}$
f 127,075.	<u> </u>			<u> </u>	
g 92,073.		2,500.			89,573.
h 14,363.					14,363.
1					
1					
k					
1					
m					
n				· · ·	
0	-		· · · · · · · · · · · · · · · · · · ·	 	
Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69	(I) Lo	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (1) over col. (j), if any	Gains (excess	of col. (h) gain over not less than "-0-")	col. (k),
		,,,,,,,			
<u>a</u>		-	 -		<u>44.</u> -28.
<u>b</u>					
<u>C</u>	<u> </u>				-262.
<u>d</u>					-1,827.
<u>e</u>					<u>-1,843.</u>
<u>f</u>					123,385.
<u>g</u>					89,573.
h					14,363.
<u></u>					
k					
Ī					
m				<u> </u>	
n					
0				-	
<u> </u>	<u> </u>			-	
2 Capital gain net income or (net ca	If gain, also enter	r in Part I, line 7)-" in Part I, line 7	2	•))2 4NE
, ,		, I			223,405.
3 Net short-term capital gain or (lo		nd (6):			
If gain, also enter in Part I, line 8,		P		37 / 3	
If (loss), enter "-0-" in Part I, line	U		3	N/A	

Parit XV Supplementary Information Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Oona is a non	
DVEN'S FOURTH STOY OF MS				
OMEN'S FOUNDATION OF MS 20 NORTH CONGRESS ST, STE 903		PUBLIC CHARITY	GENERAL SUPPORT	
ACKSON, MS 39201				1,00
				1,00
				1
-				
		-		
				_
		 		İ
				
Total from continuation sheets		L	<u> </u>	1.00

FORM 990-PF DIVI	DENDS	AND INTER	EST FI	ROM SECUR	ITIES ST	PATEMENT	1
GRO SOURCE AMO	SS UNT	CAPITAL GAINS DIVIDEND	F	(A) REVENUE ER BOOKS	(B) NET INVEST- MENT INCOME		
BESSEMER TRUST 21	,779.	14,36	3.	7,416.	7,416.		
TO PART I, LINE 4 21	,779.	14,36	3.	7,416.	7,416.		
FORM 990-PF		LEGAL	FEES		Sī	TATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS	NET]		(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
LEGAL FEES		441.		0.		44	11.
TO FM 990-PF, PG 1, LN 16	A	441.		0.		44	11.
FORM 990-PF		ACCOUNTI	NG FEI	ES	rz	TATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET 3	(B) INVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE	ים זכ
						PURPOSE	
ACCOUNTING FEES		3,337.		1,669.		PURPOSE 1,66	ES
ACCOUNTING FEES TO FORM 990-PF, PG 1, LN	16B	3,337.	·	 			ES 58.
	16B 			1,669.		1,66	ES 58.
TO FORM 990-PF, PG 1, LN		3,337.	XPENSI NET	1,669.		1,66	58. 68. 4
TO FORM 990-PF, PG 1, LN FORM 990-PF		3,337. OTHER E (A) EXPENSES	XPENSI NET I	1,669. 1,669. ES (B)	(C) ADJUSTED	1,66 1,66 TATEMENT (D) CHARITAE	58. 68. 4

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE	Г
MARKETABLE SECURITIES	COST	746,320.	717,2	36.
TOTAL TO FORM 990-PF, PART	II, LINE 13	746,320.	717,2	36.
FORM 990-PF LIST	OF SUBSTANTIAL CONTRIB PART VII-A, LINE 10	UTORS	STATEMENT	6
NAME OF CONTRIBUTOR	ADDRESS			_
		ATTENTIE		
EASON & ELLEN LEAKE	701 NORTHLAKE RIDGELAND, MS			
FORM 990-PF	PART XV - LINE 1A F OF FOUNDATION MANAGE	RS	STATEMENT	7

NAME OF MANAGER

ELLEN LEAKĒ EASON LEAKE