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DLN: 93491134007316

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at $\underline{www.irs.gov/form990pf}$.

Open to Public Inspection

For	caler	ndar year 2015, or tax y	, and ending 1	and ending 12-31-2015							
	e of four	ndation IOW O'MARA STEVENS & CANNADA			A Employer id	entification numb	er				
	OUNDATIO				72-1363024						
		street (or P O box number if mail is	not delivered to street address)	Room/suite	B Telephone nur	mber (see instruction	ıs)				
10.	20 HIGHI	LAND COLONY PKWY STE 1400			(601) 948-5711	4					
		, state or province, country, and ZIP o MS 39157	or foreign postal code		C If exemption	application is pendin	ng, check here 🕨 🦵				
G Cł	neck all	I that apply Initial return	Initial return of a fo	ormer public charity	D 1 Foreign of	D 1. Foreign organizations, check here					
		Final return Address chang	Amended return ge Name change		2. Foreign o	rganizations, check n rganizations meeting ik here and attach co	the 85%				
∏Se	ection 4	pe of organization	ble trust Other taxable	e private foundation	under sectio	E If private foundation status was terminated under section 507(b)(1)(A), check here ▶					
of y	year <i>(fr</i>	et value of all assets at end rom Part II, col. (c),	JAccounting method Other (specify) (Part L. column (d) must	· 	F II tile loulius	ation is in a 60-mont n 507(b)(1)(B), chec					
		\$ 987,201	(Part I, column (d) must	be on casn basis.)							
Pa	rt I	Analysis of Revenue a (The total of amounts in columns (necessarily equal the amounts in c instructions))), (c), and (d) may not expenses per		Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)				
	1	Contributions, gifts, grants, e	etc , received (attach								
		schedule)	,	100,724							
	2	Check 🟲 🦵 If the foundation	ıs not required to attach								
	3	Interest on savings and temp	· · ·	95							
	4	Dividends and interest from s	ŀ	18,435	18,435	<u> </u>					
	5a	Gross rents				<u> </u>					
ф	b	Net rental income or (loss)		20.628							
E.	6a	Net gain or (loss) from sale o		30,628							
Reveilue	b	Gross sales price for all asse			20.626						
Œ	7	Capital gain net income (from			30,628						
	8	Net short-term capital gain .									
	9	Income modifications	1								
	10a	Gross sales less returns and allowances									
	b	Less Cost of goods sold.									
	С	Gross profit or (loss) (attach	·			 					
	11	Other income (attach schedu	·			<u> </u>					
	12	Total.Add lines 1 through 11		149,882	, , , , , , , , , , , , , , , , , , ,						
	13	Compensation of officers, dire		0	0	<u> </u>	0				
	14	Other employee salaries and	ŀ			<u> </u>	<u> </u>				
ě Š	15	Pension plans, employee ben				 	<u> </u>				
ens	16a	Legal fees (attach schedule).		l		ļ	<u> </u>				
Expense	b	Accounting fees (attach sche		i		<u> </u>	<u> </u>				
	C	Other professional fees (atta	ch schedule)	İ		<u> </u>					
Admını strative	17	Interest				<u> </u>	<u> </u>				
¥	18	Taxes (attach schedule) (see	· •	479	82	<u> </u>	0				
	19	Depreciation (attach schedul	e) and depletion								
흔	20	Occupancy	ŀ			<u> </u>					
and 4	21	Travel, conferences, and mee	- I			<u> </u>	<u> </u>				
	22	Printing and publications	ŀ	-57	0.121	<u> </u>	ļ				
ju:	23	Other expenses (attach sche	•	8,121	8,121	<u> </u>	0				
Operating	24	Total operating and administ Add lines 13 through 23	-	8,600	8,203		0				
ō	25	Contributions, gifts, grants pa	aid	140,648			140,648				
	26	Total expenses and disbursen	l	149,248	8,203		140,648				
	27	Subtract line 26 from line 12									
	a	Excess of revenue over exper		634							
	ь	Net investment income (if ne	gative, enter -0-)		40,955						
	С	Adjusted net income(If negat	ave, enter -0-)								

Рa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End	of year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	75,016	34,76	34,766
	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts 🟲			
9	8	Inventories for sale or use			
¥	9	Prepaid expenses and deferred charges			
Assets	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	778,956	819,81	952,035
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) -			
	15	O ther assets (describe 🟲)	376	40	400
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	854,348	854,98	987,201
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>ĕ</u>	19	Deferred revenue			
틝	20	$\label{loss_loss} \mbox{Loans from officers, directors, trustees, and other disqualified persons}$			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0		D
		Foundations that follow SFAS 117, check here 🕨 🦵			
8		and complete lines 24 through 26 and lines 30 and 31.			
흥	24	Unrestricted			
8	25	Temporarily restricted			
or Fund Balance	26	Permanently restricted			
킖		Foundations that do not follow SFAS 117, check here 🕨 🔽			
히		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	1	D .
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0		0
	29	Retained earnings, accumulated income, endowment, or other funds	854,348	854,98	2
¥	30	Total net assets or fund balances(see instructions)	854,348	854,98	2
	31	$\textbf{Total liabilities and net assets/fund balances} (\texttt{see} \ \texttt{instructions}) \textbf{.} .$	854,348	854,98	2
Pa	rt 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 a	gree	
		with end-of-year figure reported on prior year's return)		1	854,348
2		Enter amount from Part I, line 27a		2	634
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	854,982
5		Decreases not included in line 2 (itemize)		5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F		ne 30 . 6	854,982

the Part VI instructions

Part IV Capital Gains and Losses for Tax on Investment Income

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	How acquired P—Purchase (b) D—Donation	(6)	Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)		
1a	See Additional Data	Table						
b								
С .								
d								
е								
(e) Gross sales price	Depreciation allowe (f) (or allowable)		t or other basıs expense of sale		Gain or (loss) (h) (e) plus (f) minus (g)		
a	See Additional Data	Table Table						
b								
С С								
d								
е								
Co	mplete only for assets s	showing gain in column (h) and owne	ed by the foundatio	n on 12/31/69		Gains (Col	(h) gaın mınus	
	F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Ex	cess of col (ı) er col (j), ıf any	(1)	col (k), but no	ot less than -0-) or (from col (h))	
a	See Additional Data	Table						
b								
С С								
d								
е е								
3	·	al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru			. 3			
Part '	V Qualification U	Jnder Section 4940(e) for F	Reduced Tax or	n Net Investme	nt I	ncome	_	
Ifsection	on 4940(d)(2) applies, l	private foundations subject to the seleave this part blank e section 4942 tax on the distribut					┌ Yes ┌ No	
If"Yes,	" the foundation does no	ot qualify under section 4940(e) D	o not complete this	part				
1 Ent	ter the appropriate amo	unt ın each column for each year, s	ee instructions bef	ore making any en	ries			
Base year (c	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha			(d) Distributio (col (b) divideo	n ratio	
	2014	111,457		1,033,828			0 107810	
	2013	110,656		985,989			0 112228	
	2012	75,751		883,473			0 085742	
	2011	50,000 80,625		902,437 805,781			0 055406	
	l	n (d)			2		0 461244	
3	A verage distribution the number of years t	vide the total on lir		3				
4	Enter the net value of		_	4		995,226		
5	Multiply line 4 by line	23			5		91,809	
6		stment income (1% of Part I, line 2		<u> -</u>	6		410	
7	Add lines 5 and 6				7		92,219	
8	Enter qualifying distr			8		140,648		

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	940(e),	or 4948—se	e page	≥ 18 of	the ins	tructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	• ୮)					
	Date of ruling or determination letter			ļ					
	(attach copy of letter if necessary-see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	check		J	1				410
_	here 🟲 🔽 and enter 1% of Part I, line 27b	• • •		•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	tions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	dation	s only Othe	rs	2				0
3	Add lines 1 and 2				3				410
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, el	nter-0			5				410
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		400					
b	Exempt foreign organizations—tax withheld at source	6b							
С	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d	· · ·			7				400
8	Enter any penalty for underpayment of estimated tax Check here r if Form 2	220 is	attached		8				
9	$\textbf{Tax}\ \textbf{due.} \text{If the total of lines 5}\ \text{and 8}\ \text{is more than line 7, enter}\ \textbf{amount owed}\ .$			F	9				10
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun	t overp	oaid	•	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	•	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislatio	n or dı	d			Yes	No
	ıt participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	olitica	l purposes (see In	structı	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	pies of any n	nateria	ls				
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?	• •				•	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos								
	(1) On the foundation \$\bigs\\$ 0 (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	ticai e	xpenaiture t	ax imp	osea				
_	on foundation managers * \$0	المساسم	+b - IDC2						N-
2	Has the foundation engaged in any activities that have not previously been rep	ortea	to the IKS?		• •		2		No
2	If "Yes," attach a detailed description of the activities.				ا	_			
3	Has the foundation made any changes, not previously reported to the IRS, in it of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a confo</i>	_	_	-		•	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d						4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	_					4b		140
5	Was there a liquidation, termination, dissolution, or substantial contraction dui						_		No
-	If "Yes," attach the statement required by General Instruction T.	ing circ	, , ca						
6	Are the requirements of section 508(e) (relating to sections 4941 through 49-	45) sat	tisfied eithe	r					
	By language in the governing instrument, or	, , ,		-					
	• By state legislation that effectively amends the governing instrument so the	at no m	nandatory di	rectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
	►MS								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99								
	General (or designate) of each state as required by General Instruction G? If $^\prime$						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r								
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s	ee ınst	ructions for	Part X	IV)?				
	If "Yes," complete Part XIV						9	\longmapsto	No
10	Did any persons become substantial contributors during the tax year? If "Yes,"			_					
	and addresses. *						10	Yes	

Par	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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A		•	
14	The books are in care of ►RANCE SAPEN Telephone no ►(601	1948	-5711	
	Located at ►1020 HIGHLAND COLONY PKWY STE 1400 RIDGELAND MS ZIP+4 ►39157	7	<u> </u>	
			<u> </u>	
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 over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country 🟲			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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 $\overline{\lor}$ 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 🔽 No			
Ь	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		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	4 -		NI-
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
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)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to allyears listed, answer "No" and attach statement—see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 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?			
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			
	ıf the foundation had excess business holdings in 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Fel	Lt ATT-B	Statements Rega	arding Activities to	r vvr	iich Form 4/20	мау	, ве кедигеа (<i>com</i>	inue	1)	
5a	During the	year did the foundation	n pay or incur any amoui	nt to						
	(1) Carry	on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e)) [?]	No		
	(2) Influer	nce the outcome of any	specific public election	(see	section 4955), or to	car	ry			
	on, dir	ectly or indirectly, any	voter registration drive?				\ Yes \	No No		
	(3) Provid	e a grant to an individu	ıal for travel, study, or ot	hers	ımılar purposes?		☐ Yes Ϝ	No No		
	(4) Provid	e a grant to an organiza	ation other than a charita	able,	etc , organization de	scrib	ped			
	ın sect	tion 4945(d)(4)(A)? (se	ee instructions)				\ \ Yes \	√ No		
	(5) Provid	e for any purpose other	r than religious, charitab	le, sc	ientific, literary, or					
	educat	tional purposes, or for t	the prevention of cruelty	to ch	ıldren or anımals?.		Г Yes Г	√ No		
b	If any ans	werıs "Yes" to 5a(1)–((5), did any of the transac	tions	s fail to qualify under	r the	exceptions described in			
	Regulation	ns section 53 4945 or i	ın a current notice regar	ding o	disaster assistance	(see	instructions)?		5b	
	O rganızatı	ions relying on a curren	nt notice regarding disas	teras	ssistance check her	e		-		
С	If the ansv	wer is "Yes" to question	n 5a(4), does the founda	tion c	laım exemption fron	n the				
	tax becaus	se it maintained expend	diture responsibility for t	he gr	ant?		T Yes 「	- No		
	If "Yes," at	tach the statement requ	ured by Regulations section	on 53.	.4945-5(d).					
6a	Did the fou	undation, during the yea	ar, receive any funds, dir	ectly	or indirectly, to pay	prer	miums on			
	a personal	l benefit contract?					Yes	√ No		
b	Did the fou	undation, during the yea	ar, pay premiums, direct	y or i	ndirectly, on a perso	onal	benefit contract?		6b	No
	If "Yes" to	6b, file Form 8870.								
7a	At any tım	e during the tax year, v	was the foundation a part	y to a	a prohibited tax shel	lter t	ransaction? Yes	- No		
b	If yes, dıd	the foundation receive	any proceeds or have a	ny ne	t income attributabl	e to t	the transaction?		7b	
_		Information Abou	t Officers, Director	s, T	rustees, Founda	atio	n Managers, Highly	Paid	Emp	loyees,
		and Contractors	-		-					
1	List all offi	cers, directors, trustee	s, foundation managers	and t	heir compensation (see i		I		
			Title, and average	(c)	Compensation(If		(d) Contributions to		ynens	e account,
	(a) Nam	ne and address	hours per week (b) devoted to position		not paid, enter -0-)	е	mployee benefit plans			llowances
			(b) devoted to position	<u> </u>	-0-)	and	deferred compensation			
See	Additional E	Data Table								
2	Compensat	ion of five highest-paid	d employees (other than	thos	e included on line 1-	-see	instructions). If none, e	nter "N	IONE."	
		(a)	Title, and ave	rane			Contributions to			
Nar	ne and addr	ress of each employee ;			(c) Compensation	on	employee benefit plans and deferred		•	e account,
	more	e than \$50,000	(b) devoted to pos	ition			(d) compensation	(e) (otner a	llowances
NON	IE									
Int-	I number of	other amployage haid o	AVAR & EA AAA					1		^

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	、	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	udeed, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2 All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	ıs.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		1
а	A verage monthly fair market value of securities	1a	979,312
b	A verage of monthly cash balances	1b	31,070
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,010,382
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		1
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,010,382
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	15,156
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	995,226
6	Minimum investment return. Enter 5% of line 5	6	49,761
Paı	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cell check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Minimum investment return from Part X, line 6	1	49,761
2a	Tax on investment income for 2015 from Part VI, line 5 2a 410		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		1
С	Add lines 2a and 2b	2c	410
3	Distributable amount before adjustments Subtract line 2c from line 1	3	49,351
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	49,351
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	49,351
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		1
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	140,648
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		1
	purposes	2	1
3	Amounts set aside for specific charitable projects that satisfy the		1
а	Suitability test (prior IRS approval required)	3a	1
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	140,648
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	410
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	140,238
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII Undistributed Income	: (see ınstru	ctions)				
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015	
1	Distributable amount for 2015 from Part	XI, line 7					49,351
2	Undistributed income, if any, as of the ei	nd of 2015					
а	Enter amount for 2014 only				0		
	Total for prior years 20, 20			0			
3							
а	From 2010	41,742					
	From 2011	5,220					
c	From 2012	32,272					
d	From 2013	62,045					
e	From 2014	60,560					
f	Total of lines 3a through e		201,839				
4	Qualifying distributions for 2015 from Pa	rt					
	XII, line 4 🕨 \$ 140,64						
а	Applied to 2014, but not more than line				0		
ь	Applied to undistributed income of prior	years		0			
	(Election required—see instructions)						
C	Treated as distributions out of corpus (E required—see instructions)	lection	0				
d	Applied to 2015 distributable amount.						49,351
e	Remaining amount distributed out of cor	ous	91,297				
5	Excess distributions carryover applied t	0 2015	0				0
	(If an amount appears in column (d), the same amount must be shown in colur	nn (a).)					
6	Enter the net total of each column as indicated below:	(=)-)					
а	Corpus Add lines 3f, 4c, and 4e Subtrac	rt line 5	293,136				
	Prior years' undistributed income Subtra		·				
_	line 4b from line 2b			0			
C	Enter the amount of prior years' undistrib	uted					
	income for which a notice of deficiency h						
	been issued, or on which the section 494 tax has been previously assessed.	` '		0			
-1	Subtract line 6c from line 6b Taxable ar						
u	—see instructions			0			
е	Undistributed income for 2014 Subtract	: line					
	4a from line 2a Taxable amount—see				0		
_	instructions				0		
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount r						
	be distributed in 2015						0
7	A mounts treated as distributions out of	Г					
	corpus to satisfy requirements imposed						
	section 170(b)(1)(F) or 4942(g)(3) (Elec		0				
_	be required - see instructions)						
8	Excess distributions carryover from 201 applied on line 5 or line 7 (see instruction)		41,742				
9	Excess distributions carryover to 2016.	····/· · ·					
-	Subtract lines 7 and 8 from line 6a	L	251,394				
10	Analysis of line 9						
а	Excess from 2011	5,220					
b	Excess from 2012	32,272					
	Excess from 2013	62,045					
	Excess from 2014	60,560					
е	Excess from 2015	91,297					

P	Part XIV Private Operating Foundat	ions (see ınstru	ictions and Part	VII-A, question	9)	
1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,					
b	Check box to indicate whether the organization	is a private opera	tıng foundatıon des	scribed in section		厂 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	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					
b 8	85% of line 2a					
	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 "Assets" alternative test—enter					
а	(1) Value of all assets					
	(2) Value of assets qualifying		1	1		
	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 "Support" alternative test—enter		1			
C	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii) (3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (C			e organizatior	n had \$5,000 o	r more in
_	assets at any time during the	year—see ins	tructions.)			
1 a	Information Regarding Foundation Managers: List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	l contributions rec	eived by the found	lation
_	before the close of any tax year (but only if they					
b	List any managers of the foundation who own 10 ownership of a partnership or other entity) of wh				large portion of th	е
	ownership of a partnership of other energy of will	ien ene loundation	nasa to 70 or gre	deer meerese		
2	Information Regarding Contribution, Grant, Gift	, Loan, Scholarshi	p, etc., Programs:			
	Check here ► If the foundation only makes co					
	unsolicited requests for funds If the foundation		ts, etc (see ınstru	ıctıons) to ındıvıdı	ials or organizatio	ns under
	other conditions, complete items 2a, b, c, and d					
	The name of the control of the contr			to	and the second second	
а	The name, address, and telephone number or e-	-mail address of ti	ne person to whom	applications shou	ild be addressed	
	RANCE SAPEN 1020 HIGHLAND COLONY PARKWAY STE					
	1400					
	RIDGELAND, MS 39157					
	(601) 948-5711					
b	The form in which applications should be submi	tted and informati	on and materials t	hey should include	2	
	LETTER					
c	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards, such factors	as by geographic	al areas, charitable	e tields, kinds of in	stitutions, or othe	r
	NONE					

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 140,648 **b** Approved for future payment

1 Program service revenue (a) Business code Amount Exclusion code Amount See instructions) Amount (See instructions)	Part XVI-A Analysis of Income-Produc	ing Activitie	S			Page 12
1 Program service revenue Business code Amount Exclusion code Amount (See Instructions) a	Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
a b c c d d d d d d d d d d d d d d d d d	1 Program service revenue		• •		1	(See
b	a					instructions)
g Fees and contracts from government agencies 2 Membership dues and assessments. 3 Interest on savings and temporary cash investments	· · · · · · · · · · · · · · · · · · ·					
g Fees and contracts from government agencies g Membership dues and assessments. 3 Interest on savings and temporary cash investments. 5 Net rental income or (loss) from seal estate a Debt-financed property. 5 Net rental income or (loss) from personal property. 6 Net rental income or (loss) from personal property. 7 Other investment income. 8 Gain or (loss) from sales of assets other than inventory. 9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue a b c d d e 2 Subtotal Add columns (b), (d), and (e). 7 Total-Add line 12, columns (b), (d), and (e). 6 See work-sheet in line 13 instructions to verify calculations) 2 STEXILE Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (cher than by providing funds for such purposes) (See						
g Fees and contracts from government agencies Membership dues and assessments						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
14 18,435 15 Net rental income or (loss) from real estate a Debt-financed property	3 Interest on savings and temporary cash			14	95	
a Debt-financed property	4 Dividends and interest from securities					
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
8 Gain or (loss) from sales of assets other than inventory	6 Net rental income or (loss) from personal					
Inventory						
O Gross profit or (loss) from sales of inventory O Other revenue a B C C Subtotal Add columns (b), (d), and (e). Total Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	inventory			18	30,628	
b	Gross profit or (loss) from sales of inventory					
c d d d d d d d d d d d d d d d d d d d	1 Other revenue a					
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See						
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	<u> </u>					
Total.Add line 12, columns (b), (d), and (e)	e					
(See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See						
Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	(See worksheet in line 13 instructions to verify	calculations)				49,130
the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See						
	the accomplishment of the foundation's					

Part XVII	Information Re Noncharitable					saction	s and I	Relationsh	ips With						
	rganization directly or ii 01(c) of the Code (othe	ndırectly e	ngage	ın any of t	the following wi						Yes	No			
organızat	ions?														
a Transfers	from the reporting four	idation to	a nonch	narıtable e	exempt organiz	zatıon of									
(1) Cash	1									1a(1)		No			
(2) Othe	rassets									1a(2)		No			
b O ther tra	nsactions														
(1) Sale:	s of assets to a noncha	rıtable exe	empt or	ganızatıoı	n					1b(1)		No			
(2) Purc	hases of assets from a	noncharit	able exe	empt orga	inization					1b(2)		No			
(3) Rent	al of facilities, equipme	nt, or othe	rasset	s						1b(3)		No			
(4) Reim	bursement arrangemer	ts								1b(4)		No			
(5) Loan	s or loan guarantees.									1b(5)		No			
(6) Perfor	mance of services or m	embership	or fund	draising s	olicitations.					1b(6)		No			
c Sharing o	f facilities, equipment,	mailing lis	ts, othe	rassets,	or paid employ	yees				1c		No			
of the goo	wer to any of the above ods, other assets, or se nsaction or sharing arr	rvices giv angement,	en by th show I	ne reporti n column	ng foundation (d) the value o	If the four of the good	idation r Is, othei	received less rassets, or se	than fair mark ervices receiv	et value ed	!				
(a) Line No	(b) Amount involved	(c) Name	of nonch	aritable exe	empt organization	(d) D	escription	of transfers, tra	nsactions, and sh	arıng arra	ngemer	nts			
						-									
						1									
described	Indation directly or indi in section 501(c) of the complete the following : (a) Name of organization	ne Code (o schedule		an sectioi		r in sectio					es 🔽	No			
the	ler penalties of perjury, best of my knowledge a rmation of which prepar	nd belief,	ıt ıs tru	e, correct					r than taxpaye		sed on	all			
Here	*****				2016-05-11	<u> </u>	*****	•	returr —— with t	n the prepa					
	Signature of officer or t	rustee			Date	,	Title		below (see	ı ınstr)? ✓	Yes∏i	No			
	Print/Type preparer's MAUREEN H SCOT CPA		Prepai	er's Sıgn	ature	Date 2016-	05-11	Check if sel employed •		002326	548				
Paid Preparer Use	Firm's name ► HORNE LLP					-1		Firm's EIN	► 20-194124	14					
Only	Firm's address ► 1020 HIGHLAND COLONY PKWY STE 400 RIDGELAND, MS 39157								Phone no (601) 326-1000						

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
ETF VANGUARD INTERMEDIATE CORP DEBT		2014-06-24	2015-04-23
ISHARES 1-3 YEAR TREASURY BOND ETF		2014-06-24	2015-04-23
ISHARES IBOXX INV GR CORP BD ETF		2014-06-24	2015-04-23
ETF VANGUARD INTERMEDIATE CORP DEBT		2010-12-07	2015-04-23
ETF VANGUARD SHT TERM CORP BD ETF		2010-12-07	2015-04-23
ISHARES 1-3 YEAR TREASURY BOND ETF		2010-12-07	2015-04-23
ISHARES IBOXX INV GR CORP BD ETF		2010-12-07	2015-04-23
ISHARES TR RUSSELL 1000 GROWTH INDEX		2010-12-07	2015-04-23
VANGUARD MSCI EMERGING MARKETS ETF		2010-12-07	2015-04-23
ISHARES TR MSCI EAFE INDEX FD		2010-12-07	2015-04-23

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
13,499		13,439	60
2,546		2,534	12
1,816		1,785	31
43,945		42,549	1,396
109,044		107,942	1,102
25,033		24,903	130
16,948		15,949	999
28,333		24,694	3,639
17,668		16,337	1,331
24,333		20,969	3,364

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

	Gains (Col (h) gain minus	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		
)r	col (k), but not less than -0-) ((I) Losses (from col (h))	Excess of col (1) (k) over col (1), If any	Adjusted basis (j) as of 12/31/69	(i) F M V as of 12/31/69
0	6			
2	1			
1	3			
6	1,39			
2	1,10			
0	13			
9	99			
9	3,63			
1	1,33			
4	3,36			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

orni processi and the capital canno and hospital sax on him of			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
ISHARES RUSSELL MIDCAP VALUE INDEX		2010-12-07	2015-04-23
VANGUARD MSCI EMERGING MARKETS ETF		2010-12-07	2015-04-23
CAPITAL GAINS DIVIDENDS	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

Commoder Furtile Cupic	ar camb and Losses for Ta	X OII IIIV CDEIIICIIC IIICOIIIC	COIGINIS C 11
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
44,428		24,969	19,459
10,601		11,505	-904
9			9

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

of in 990FF Fart 14 - Capital Gams and Losses for Tax on Investment Income - Columns 1 - 1					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus		
(i) F M V as of 12/31/69	9 A djusted basis Excess of col (i) (j) as of 12/31/69 (k) over col (j), if any		col (k), but not less than -0-) or (l) Losses (from col (h))		
			19,459		
			-904		
			9		

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LUCIEN BOURGEOIS	MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			
DON CLARK	MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			
DONNA JACOBS	MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			
CARA BAER	MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND, MS 39157	0 00			
MELVIN MALONE	MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND, MS 39157	0 00			
META DANZEY	ADVISORY MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			
TRAY HAIRSTON	ADVISORY MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			
SARA ANNE QUINN	ADVISORY MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			
ANGIE MCEWEN	MEMBER	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			
TOMMY WILLIAMS	CHAIR	0	0	0
1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND,MS 39157	0 00			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NASHVILLE CARES 633 THOMPSON LANE NASHVILLE,TN 37204	NONE	EXEMPT	CHARITABLE	9,148
URBAN MINISTRY INC 1551 REGENCY CT CALUMET CITY,IL 60409	NONE	EXEMPT	CHARITABLE	15,000
DELTA FRESH FOODS INITIATIVE 1074 EMMA WILLIAMS ROAD TUNICA,MS 38676	NONE	EXEMPT	CHARITABLE	15,500
SUMMER SCHOLARS PO BOX 1848 UNIVERSITY,MS 38677	NONE	EXEMPT	CHARITABLE	10,000
UM FOUNDATION LAW SCHOOL CAMPAIGN PO BOX 1848 UNIVERSITY,MS 38677	NONE	EXEMPT	CHARITABLE	50,000
NEIGHBORHOOD CHRISTIAN CENTERS OF JXN INC 417 ASH STREET JACKSON,MS 39203	NONE	EXEMPT	CHARITABLE	16,000
PALMER HOME FOR CHILDREN 422 MS - 12 STARKVILLE, MS 39759	NONE	EXEMPT	CHARITABLE	25,000
Total			▶ 3a	140,648

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491134007316

TY 2015 Investments Corporate Stock Schedule

Name: BUTLER SNOW O'MARA STEVENS & CANNADA

FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
HANCOCK BANK	819,816	952,035

TY 2015 Other Assets Schedule

Name: BUTLER SNOW O'MARA STEVENS & CANNADA

FOUNDATION

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
PREPAID EXCISE TAXES	376	400	400

TY 2015 Other Expenses Schedule

Name: BUTLER SNOW O'MARA STEVENS & CANNADA

FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	7,996	7,996		0
BANK CHARGES	125	125		0

TY 2015 Substantial Contributors Schedule

Name: BUTLER SNOW O'MARA STEVENS & CANNADA

FOUNDATION

Name	Address
	1020 HIGHLAND COLONY PARKWAY STE 1400 RIDGELAND, MS 39157

TY 2015 Taxes Schedule

Name: BUTLER SNOW O'MARA STEVENS & CANNADA

FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	397	0		0
FOREIGN TAXES	82	82		0

efile GRAPHIC print - DO NOT PROCESS

BUTLER SNOW O'MARA STEVENS & CANNADA

As Filed Data -

DLN: 93491134007316

=14: 00-0110-1007010

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

FOUNDATION	/2-1363024
Organization type (check	one)
Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	□ 527 political organization
Form 990-PF	▽ 501(c)(3) exempt private foundation
	☐ 501(c)(3) taxable private foundation
Note. Only a section 501(c) General Rule	s 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
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
under sections 509(received from any o	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990-EZ, line 1 Complete Parts I and II
during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, il contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or foruelty to children or animals. Complete Parts I, II, and III
during the year, con this box is checked, purpose Do not con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, itributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
BUTLER SNOW O'MARA STEVENS & CANNADA

Employer identification number 72-1363024

FOUNDATION Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contr	ribution
1	BUTLER SNOW ILP		Person	্
	1020 HIGHLAND COLONY PARKWAY STE 14	\$ 20,000	Payroll	Γ
	RIDGELAND, MS39157	<u> </u>	Noncash	Γ
	, in the second		(Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
2			Person	모
	INDIVIDUAL PARTNERS AND MEMBERS OF 1020 HIGHLAND COLONY PARKWAY STE 14	\$ 73,353	Payroll	Г
	RIDGELAND, MS39157	***************************************	Noncash	Γ
			(Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		s	Payroll	Г
			Noncash	Г
			(Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		s	Payroll	Г
			Noncash	Γ
			(Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		s	Payroll	Г
			Noncash	Г
			(Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
			Payroll	Γ
			Noncash	Г
			(Complete Part II fo	or noncash

Name of organization BUTLER SNOW O'MARA STEVENS & CANNADA		Employer identification number		
FOUNDATION	MARA STEVENS & CANNADA	72-1363024		
	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<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) 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	
		I		

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Page 4

Name of organization
BUTLER SNOW O'MARA STEVENS & CANNADA

Employer identification number

total more line entry. I of \$1,000 or	religious, charitable, etc., contribut than \$1,000 for the year from any or For organizations completing Part II r less for the year. (Enter this inforn e copies of Part III if additional space is n	ions to organizations described in contributor. Complete columns I, enter the total of exclusively relimation once. See instructions.)	s (a) through (e) and the following igious, charitable, etc., contributions
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP4 Rela	ationship of transferor to transferee
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP4 Rela	ationship of transferor to transferee
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
·	(e) Transfer of gift Transferee's name, address, and ZIP4 Relationship of transferor to transferee		
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gift ZIP4 Rela	ationship of transferor to transferee
			