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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 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2015 or tax year beginning and ending Name of foundation A Employer identification number 72-6018322 ELLA WEST FREEMAN FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 1100 POYDRAS ST., SUITE 1350 504-895-1984 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW ORLEANS, LA 70163 G Check all that apply: I Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 27,793,125. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) for charitable purposes (cash basis only) expenses per books income ıncome N/A Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 12,731. 12,731 STATEMENT 338,514. 338,514. STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 253,759 62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 255,588. 253,759. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 32,108 32,108. STATEMENT 11 Other income 637,112 637.112 12 Total, Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees 7,000. 15,000. STMT 22,000. **b** Accounting fees 16,605. 16,605 c Other profession Operating and Administrative 17 Interest 7,628 0. 0. 18 Taxes 19 Depreciation and Оссиралсу 🔯 21 Travel, conferences, and meetings 1. 22 Printing and publications 23 Other expenses STMT 7 69,547. 69,241 24 Total operating and administrative 115,780 92,846. 15,000. expenses. Add lines 13 through 23 576,475 ,576,475. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 1,692,255 92,846 591,475 Add lines 24 and 25 27 Subtract line 26 from line 12; <1,055,143.b a Excess of revenue over expenses and disbursements 544,266 b Net investment income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

C Adjusted net income (if negative, enter -0-)

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N/A

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ELLA WEST FREEMAN FOUNDATION

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_		1,238,231.	26,908,219.		.046017
	Total of line 1, column (d)			2	.229456
3	Average distribution ratio for the 5-year bas the foundation has been in existence if less	e period - divide the total on line 2 by 5, or by the than 5 years	number of years	3	.045891
4	Enter the net value of noncharitable-use ass	ets for 2015 from Part X, line 5		4	29,355,690.
5	Multiply line 4 by line 3			5	1,347,162.
6	Enter 1% of net investment income (1% of	Part I, line 27b)	-	6	5,443.
7	Add lines 5 and 6			7	1,352,605.
8	Enter qualifying distributions from Part XII,	line 4		8	1,591,475.
	If line 8 is equal to or greater than line 7, ch-	eck the box in Part VI, line 1b, and complete that	part using a 1% tax rate.		

See the Part VI instructions.

	990-PF (2015) ELLA WEST FREEMAN FOUNDATION	<u> 72-</u>	<u>601832</u>	<u> 2</u>	Page 4
	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	r 4948	- see instr	ructio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		,		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%	1	ļ	_ <u>5,</u> 4	<u>143.</u>
	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	ļ		0.
3	Add lines 1 and 2	3	ļ	5,4	<u>143.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<del> </del>		<u>      0                              </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5_	ļ	5,4	143.
6	Credits/Payments:	_	1		
a	2015 estimated tax payments and 2014 overpayment credited to 2015  6a 36,57	2.			
b	Exempt foreign organizations - tax withheld at source	[			
C	Tax paid with application for extension of time to file (Form 8868)		}		
d	Backup withholding erroneously withheld				
	Total credits and payments. Add lines 6a through 6d	7	<u> </u>	<u> 36, 5</u>	<u>572.</u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here If Form 2220 is attached	8	<del> </del>		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>▶</b> <u>9</u>	<del> </del>		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>▶</b> 10	<del> </del>	<u>31,1</u>	129.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax   31,129. Refunded	<u> </u>	<u> </u>		<u> </u>
	art VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interv	ene in		Yes	
	any political campaign?		<u> 1a</u>		<u>X</u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the defin		<u>1b</u>		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pub	lished or	)	}	
	distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?		1c	<del></del>	<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_	Ì		
		<u>0 .</u>	}	ļ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		l		
_	managers. ▶ \$0 .				-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u> </u>
	If "Yes," attach a detailed description of the activities.				İ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporati	on, or		Ì	<b>.</b>
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
	1 Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		+
	olf "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?		4b 5	+^	X
O			3	+	+
٥	If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				1
6	By language in the governing instrument, or			1	1
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the</li> </ul>	wel ateta			
	remain in the governing instrument?	State law	6	x	1
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 Par	+ X1/	7		+-
′	υιο της τουτισμένη πάνε αι ισμός φό,ουσ τη μόσους αι από τίπο αυτίπο με γεαι · π τες, Complete Fait II, Col (c), and Fai		<del></del>	1	+-
Rα	Enter the states to which the foundation reports or with which it is registered (see instructions)		}	}	
Ja	LA				
ь	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	<del></del> -			1
•	of each state as required by General Instruction G? If "No," attach explanation		86	$\mathbf{x}$	1
9		calendar	30	T-	+-
•	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	234.	9		х
10			10		X
	g and year of the second secon				(2015)

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Pa	art VII-A Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	ļ	ļ	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1	ł	
	If "Yes," attach statement (see instructions)	_12	Ĺ	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X_	
	Website address   WWW.ELLAWEST.ORG			
14	The books are in care of ► CRESCENT CAPITAL CONSULTING  Telephone no. ► 504	207-8	<u>555</u>	
	Located at ► 1100 POYDRAS ST, SUITE 1350 , NEW ORLEANS, LA ZIP+4 ►	<u>70163</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	N	[/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_	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	ł		ł
	foreign country			<u> </u>
Pa	art 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	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	0		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
	a disqualified person? Yes X N			}
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	0	1	)
	(5) Transfer any income or assets to a disqualified person (or make any of either available		l	ļ
	for the benefit or use of a disqualified person)?	0	1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			Ì
	if the foundation agreed to make a grant to or to employ the official for a period after	1	ł	{
	termination of government service, if terminating within 90 days.)	0	ļ .	
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1	Ì	1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	<u> 1b</u>		
	Organizations relying on a current notice regarding disaster assistance check here	_		
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		x
2				
	defined in section 4942(j)(3) or 4942(j)(5)):			ſ
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015? Yes X N	o		
	If "Yes," list the years <b>&gt;</b>	j		}
1	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			l
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		1	
	statement - see instructions.) N/A	2 <u>2</u> 2 b		<b> </b>
(	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
34	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		[
-	during the year?			
i	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,	1		1
	Form 4720, to determine if the foundation had excess business holdings in 2015)	3 В		
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	.4a	$\top$	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:				ļ	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	s X No	1	ł
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			ļ	
any voter registration drive?			s X No	1	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Ye	s X No	ľ	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				1
4945(d)(4)(A)? (see instructions)		Ye	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			l	ł
the prevention of cruelty to children or animals?		Ye	es 🗶 No		ł
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc	fer the exceptions described i	n Regulations	İ		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	ֈ
Organizations relying on a current notice regarding disaster assistance check h	ere			1	ĺ
${f c}$ If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?	N	「/A	s L No		
If "Yes," attach the statement required by Regulations section 53 4945	• •		}		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	pay premiums on				
a personal benefit contract?		Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		Ĺ	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗓 No		4
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors	ees, Foundation Ma	magers, Highly	/		
<u></u>					
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(-) [·	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accour	xpense nt, other
(2)	to position	enter -0-)	compensation	allow	vances
		}		)	
					•
SEE STATEMENT 10		0.	0.	<del>├</del>	0.
				<del> </del>	
		}		1	
		<u> </u>	<del>                                     </del>	<del>├</del>	
				ļ	
			{		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "	<u> </u>	<u> </u>	
2 Compensation of live mignest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to employee benefit plans	(e) F:	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	and deferred	accour	nt, other
NOTE:	devoted to position	<del> </del>	compensation	anow	vances
NONE			1		
		ļ	<u> </u>	<del></del>	
	-		ļ	}	
	<del></del>	<del>                                     </del>		<del> </del>	
	}		•	)	
		<del> </del>		<del> </del>	
	-		]	]	
	<del> </del>	<del> </del>		<del> </del> -	
	1		}	}	
Total number of other ampleyees and sup- 050 000	<u> </u>	<u> </u>	<del></del>	Ь	0
Total number of other employees paid over \$50,000			<u>_</u>		<u>_</u>

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

	HEET REETAN FOUNDATION	<del></del>	2-0010322 Tage 0
P:	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dation	ns, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
-	Average monthly fair market value of securities	1a	29,311,456.
	Average of monthly cash balances	1b	487,733.
	Fair market value of all other assets	1c	3,542.
_	Total (add lines 1a, b, and c)	1d	29,802,731.
	Reduction claimed for blockage or other factors reported on lines 1a and	- <del>``</del> -	
·	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	29,802,731.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	447,041.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	29,355,690.
6	Minimum investment return. Enter 5% of line 5	6	1,467,785.
<u> </u>	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an		
	foreign organizations check here and do not complete this part.)	u oci ia	
1	Minimum investment return from Part X, line 6	1	1,467,785.
	Tax on investment income for 2015 from Part VI, line 5		=7=0.7.000
b	Income tax for 2015. (This does not include the tax from Part VI.)  2b 917.		
C	Add lines 2a and 2b	2c	6,360.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,461,425.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,461,425.
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	1,461,425.
	art YII		1,401,425.
Ë	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Ì	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,591,475.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	ļ	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,591,475.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	5,443.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,586,032.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies	

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4940(e) reduction of tax in those years.

## ELLA WEST FREEMAN FOUNDATION 72-6018322 Form 990-PF (2015) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) 2014 Years prior to 2014 2015 Corpus 1 Distributable amount for 2015 from Part XI. 1,461,425. line 7 2 Undistributed income, if any, as of the end of 2015 1,561,668 a Enter amount for 2014 only 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: $\triangleright$ \$\_\_\_1,591,475. 1,561,668 a Applied to 2014, but not more than line 2a **b** Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 29,807. d Applied to 2015 distributable amount 0. e Remaining amount distributed out of corpus 0. 0. Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 0 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income. Subtract 0. line 4b from line 2b 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 0. assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2014. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must 1,431,618. be distributed in 2016 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election

0

0.

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

may be required - see instructions)

8 Excess distributions carryover from 2010

Subtract lines 7 and 8 from line 6a

Excess distributions carryover to 2016.

not applied on line 5 or line 7

	art XIV   Private Operating Fo	OUNDATIONS (See uns		A guestion 9)	N/A	5018322 Page 10
—	<del></del>		<del>-</del>	A, question 9)	N/A	
1 8	If the foundation has received a ruling of					
	foundation, and the ruling is effective for		=	n nontion	4942(j)(3) or	4942(j)(5)
	Check box to indicate whether the found Enter the lesser of the adjusted net	Tax year	ig touttuation described i	Prior 3 years	4942(J)(3) 01	1 4942(])(3)
2 8	income from Part I or the minimum	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for	(4) 2010	(0/2071	(0) 2010	(4)20.2	(0) 10141
	each year listed			<u> </u>		
	9 85% of line 2a					
(	Qualifying distributions from Part XII,					
	line 4 for each year listed					
(	Amounts included in line 2c not					
	used directly for active conduct of					
	exempt activities				<del> </del>	
•	Qualifying distributions made directly		,			
	for active conduct of exempt activities.					
3	Subtract line 2d from line 2c Complete 3a, b, or c for the					
Ū	alternative test relied upon:					
í	"Assets" alternative test - enter:					
	(1) Value of all assets				ļ	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
	"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) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					<del></del>
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)				<u> </u>	
	(3) Largest amount of support from					
	an exempt organization				<del> </del>	<del></del>
Б	(4) Gross investment income art XV Supplementary Info	rmation (Comple	to this port only	if the foundation	had \$5 000 az	more in eccete
	at any time during t		•	ii the loungation	nau \$5,000 or	more in assets
_			uotions.j			
1	Information Regarding Foundation	<u> </u>	than 20/ of the total cont	ributions received by the	foundation hafors the	alone of any tax
i	a List any managers of the foundation wh year (but only if they have contributed n			ributions received by the	ioundation before the	close of any tax
NI/	ONE	10.0 επαπ φοισσορί (σσο σ				
_	b List any managers of the foundation wh	o own 100/ or more of th	en stock of a corporation (	for an aqually large porty	an of the ownership of	a partmerchip or
	other entity) of which the foundation ha			or all equally large portion	on or the ownership of	a partitership of
NC	ONE	• •				
2		ion Cront Cift Loon	Cohelenship etc. Dr			
2	Information Regarding Contribute Check here ► X if the foundation of				not account uncollected	requests for funds. If
	the foundation makes gifts, grants, etc.	-		•	•	•
_	The name, address, and telephone num	<del></del>				
	OUIS M. FREEMAN, CH					
	)28 MAGAZINE ST., N	=		MMM.EDDAMES	or.org	
				aould include.	_ <del></del>	
	b The form in which applications should to RANT PROPOSAL SUMMA					
		KI SHEET -	DEE MMM.BUL	WARDI ONG		
	c Any submission deadlines:  CADLINE BY JANUARY	מאס פיד	יסיקאאקקים ממאקיים!	י אר האלה או	ZAR.	
	d Any restrictions or limitations on award					
	RGANIZATIONS IN THE					F CTVIC
	FAIRS, COMMUNITY D			EDUCATION,		
_	OFAIRS, COMMONITY D	'E A BUOLMENT'	THE WELD!	PDOCULTON'	WAY UONWIA	Form <b>990-PF</b> (2015)
						1 OTHER 200-1 1 (2013)

**Analysis of Income-Producing Activities** 

ter gross amounts unless otherwise indicated.		isiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
Program service revenue:	code	Amount	code	Amount	function income
·					
<u> </u>					
·		<del></del>			
·			<del>  -</del>		
			<del>  </del>		
Fees and contracts from government agencies	<u> </u>		<del>                                     </del>		
Membership dues and assessments	<del> </del>				
nterest on savings and temporary cash			14	12 721	
nvestments Dividends and interest from securities		<del></del> -	14	12,731. 338,514.	
let rental income or (loss) from real estate;			T 45	330,314.	
Debt-financed property	<del></del>		<del>  </del>		
Not debt-financed property			<del>  </del>		
Not debt-illianced property Net rental income or (loss) from personal			1	<del></del>	
ver remai income or (loss) from personal property					
Other investment income	445200	9,881.	14	22,227.	
Gain or (loss) from sales of assets other	223200				
than inventory			18	253,759.	
Net income or (loss) from special events			- 4		
Gross profit or (loss) from sales of inventory					
Other revenue:					
1	1		} }	}	
	1				<del></del>
	_				
·			1 1		
c	1 1		<del></del>		
c	1 1				
c d	1 1	9,881.		627,231.	
s b Subtotal, Add columns (b), (d), and (e) Fotal, Add line 12, columns (b), (d), and (e) s worksheet in line 13 instructions to verify calculation	18.)			13	637,1
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculation  That XVI-B Relationship of Activitions  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Exercise worksheet in line 13 instructions to verify calculation  The results of the columns of th	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  Art XVI-B  Relationship of Activiti  Re No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculation  art XVI-B  Relationship of Activitions  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  ART XVI-B  Relationship of Activitions  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  Art XVI-B  Relationship of Activiti  Re No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  Art XVI-B  Relationship of Activiti  Re No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  ART XVI-B  Relationship of Activitions  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  Art XVI-B  Relationship of Activiti  Re No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  ART XVI-B  Relationship of Activitions  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculation  art XVI-B  Relationship of Activiti  ne No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  ART XVI-B  Relationship of Activitions  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculation  Art XVI-B  Relationship of Activiti  Re No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculation  art XVI-B  Relationship of Activiti  ne No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activitions be No.  Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation eart XVI-B Relationship of Activitions the No. Explain below how each activity for which	es to the Accom	plishment of Explored to plant XVI-A	xempt P	urposes	

Form 990	)-PF (2015) <b>ELL</b>	A WEST FREE	MAN FO	UNDATIO	N		72-6	018322	<u>P</u> a	ge <b>13</b>
Part 2	(VII Information Exempt Org	Regarding Tran	sfers To a	and Transa	ctions a	nd Relations	hips With Non	charitable	•	
1 Did	the organization directly or		of the following	ng with any other	r organization	n described in secti	on 501(c) of		Yes	No
	Code (other than section 50									
	nsfers from the reporting fo			-						
	Cash			<b>3</b>				1a(1)		X
٠,	Other assets							1a(2)		X
	er transactions:							12(2)		
_	Sales of assets to a nonch	aritable evemnt organiza	ition					1b(1)		X
	Purchases of assets from							1b(2)		X
٠.			oi yanization					1b(3)		X
	Rental of facilities, equipme							1b(4)		X
	Reimbursement arrangem	31112						1b(5)		X
	Loans or loan guarantees	r mambarahin ar fundra	icina colinitatio	200				1b(6)		X
	Performance of services of	•	-					10(0)		X
	aring of facilities, equipment ne answer to any of the abov				A chould alw	rave chow the fair n	narket value of the or		ate	
	services given by the reporti								cis,	
	umn (d) the value of the goo				Illainet value	t in any transaction	or snaring arrangen	icii, silow iii		
(a) Line n	<del></del>			e exempt organı	zation	(d) Description	of transfers, transaction	is and sharing an	angeme	ents
(W) Cille II	(b) Amount involved	(o) itamo o	N/A	o oxompt organi	Lation	(a) Bosanphor	or danolors, danoaston	io, and onlying an	angom.	
			M/V			<del> </del>				·
						<b></b>		· -		
					<del>_</del>					
								-		
	-									
		-					2			
						<del></del>				
	-	-				-				
			·			_				
2a  s1	he foundation directly or inc	lirectly affiliated with, or	related to, one	e or more tax-ex	empt organiz	rations described				
	section 501(c) of the Code (	•			<b>p . .</b>			Yes	X	ON [
	Yes," complete the following	·	-,(-,,							
		f organization		(b) Type of or	ganization		(c) Description of rel	ationship		
	N/	A					-			
								•		
	Under penalties of peruary, I de							May the IRS		
Sign	and belief, it is true correct, ar			an taxpayer) is base	o on all inform	ation of which prepare	r nas any knowledge	return with th shown below	e prepar (see ins	er tr)?
Here	Vou	M. Oren	u.Bu.	6//	طاله	CHAIR	MAN	_ X Yes		No
	Signature of officer or tri	ıstee		Date	•	Title				
	Print/Type prepare	's name	Preparer's	signature		Date		PTIN		
	RICHARD	G. MUELLER	n Q.	()-A	n n - 1		self- employed			
Paid	CPA	<u>-</u>	Juka	4 UNIL	lhc P/	+ 11-14-16		P00442		1
Prep		RICKSEN, K	RENTEL	& LAPOR	RTE, L	LP	Firm's EIN ► 72	2-05497	33	
LICA	UNIV I						1			

Firm's address > 4227 CANAL STREET

NEW ORLEANS, LA 70119

FORM 990-PF. INTERI	EST ON SAVING	S AND TEM	PORARY	CASH	INVI	ESTMENTS	STATEME	ENT	1
SOURCE		(A REVEI PER BO	NUE	NET		B) ESTMENT OME	(C) ADJUS NET IN	TED	<u>c</u>
CAPITAL ONE CHARLES SCHWAB - MO GOLDMAN SACHS HIBERNIA BANK INTER	REST		66. 118. 29. 102.			66. 118. 29. 102.			
INTEREST INCOME FRO PASSTHROUGH K-1'S MISCELLENEOUS INTER		13	2,415. 1.		;	12,415. 1.			
TOTAL TO PART I, L	INE 3	1:	2,731.	·		12,731.			<u> </u>
FORM 990-PF	DIVIDENDS	AND INTER	EST FR	OM SE	CURI'	ries	STATEME	ENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) EVENUI R BOOI		(B) NET INVES MENT INCO	T- ADJ	C) USTE	
CAPITAL ONE CAPITAL GAIN DISTRIBUTIONS CHARLES SCHWAB	116.	5	6.	(	60.	6	0.		
#5986-3020 DIVIDEND INCOME FROM PASSTHROUGH	5,478.		0.	5,4	78.	5,47	<b>'8.</b>		
K-1'S GMO CAPITAL GAIN	29,389.		0.	29,3		29,38			
DISTRIBUTIONS	460,222.	156,63		303,5					
TO PART I, LINE 4	495,205.	156,69	====		14· === :	338,51			<del></del>
FORM 990-PF		OTHER I	NCOME				STATEME	ENT	3
DESCRIPTION			(A) REVEN PER BO	UE		(B) T INVEST- NT INCOME	JUCA ·	C) JSTEI	
RENTAL REAL ESTATE K-1S OTHER RENTAL INCOM		ROUGH		<89.7	.>	<897	'.> ,		
PASSTHROUGH K-1S ORDINARY INCOME FR		ЭН		2			·		
K-1S			<	1,161	•>	<1,161	. •>		

ELLA WEST FREEMAN FOUNDATION	ON			72-6018322
OTHER PORTFOLIO INCOME FROM	-	22.250	22 250	
PASSTHROUGH K-1S UBTI INCOME FROM PASSTHROUGH	<b>⊮</b> _1¢	23,259. 9,881.	23,259. 9,881.	
ROYALTY INCOME FROM PASSIFICOUGH		3,001.	3,001.	
K-1'S		395.	395.	
NET SECTION 1231 GAIN FROM				
PASSTHROUGH K-1'S		1,389.	1,389.	
OTHER INCOME FROM PASSTHROUG		<817.>	<817.>	
CANCELLATION OF DEBT INCOME PASSTHROUGH K-1'S	FROM	32.	32.	
SECTION 1256 CONTRACT		25.	25.	
TOTAL TO FORM 990-PF, PART I	, LINE 11	32,108.	32,108.	
FORM 990-PF	ACCOUNTI	NG FEES	S1	PATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	<del></del>		(D) CHARITABLE PURPOSES
ERICKSEN, KRENTEL, & LAPORTE	15,000.	0.		15,000.
FIRST LINE SERVICES	1,000.			0.
EK&L CAS FEE	6,000.	•		0.
TO FORM 990-PF, PG 1, LN 16B	22,000.	7,000.		15,000.
FORM 990-PF	OTHER PROFES	SIONAL FEES	S'	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	16,605.	16,605.		0.

16,605.

TO FORM 990-PF, PG 1, LN 16C

16,605.

FORM 990-PF	TAX	ES	STATEMENT (			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
FOREIGN TAXES PAID FROM	<del></del>			<del></del>		
K-1'S	1,143.	0.		0.		
FEDERAL EXCISE TAX	5,443.			0.		
UBTI TAX	917.			0.		
LOUISIANA INCOME TAX	125.	0.	· <del></del>	<u> </u>		
TO FORM 990-PF, PG 1, LN 18	7,628.	0.	<del></del>	0.		
FORM 990-PF	OTHER E	XPENSES	<del></del>	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
PORTFOLIO DEDUCTIONS FROM		·				
K-1'S	67,224.	67,224.		0.		
OTHER DEDUCTIONS FROM K-1'S	1.			0.		
INTEREST EXPENSE FROM K-1'S	872.	872.		0.		
NONDEDUCTIBLE EXPENSE FROM	155	•		•		
K-1'S MISCELLANEOUS	155. 263.			0.		
ROYALTY DEDUCTIONS FROM	203.	203•		0.		
K-1'S	152.	152.		0.		
SECTION 59(E)(2)						
EXPENDITURES FROM K-1'S	729.			0.		
PENALITIES	151.	0.		0.		
TO FORM 990-PF, PG 1, LN 23	69,547.	69,241.		0.		
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 8		
DECORTOM ON		LUATION	OF WALLE	FAIR MARKET		
DESCRIPTION	M	ETHOD BO	OK VALUE	VALUE		
CAPITAL ONE INVESTMENTS		FMV	497,471.	497,471.		
EQUITAS EVERGREEN FUND		FMV	34,121.	6,558.		
FUNDING CASH ACCOUNT		FMV -	2,178.	2,178.		
GMO - BENCHMARK-FREE ALLOCATI	ION	FMV	4 040 601	22 224 254		
FUND - III GOLDMAN SACHS		F <b>M</b> V	4,049,621.	22,330,274. 0.		
COLDIENT DACID		T 7.1 A	0.	0.		

· ELLA WEST FREEMAN FOUNDATION			72-6018322	
INVESTMENT MM	FMV	132,634.	126,521.	
NATURAL GAS PARTNERS IX, L.P	FMV	240,553.	280,274.	
NGP MIDSTREAM & RESOURCES, LP	FMV	364,277.	795,291.	
OLD WESTBURY VENTURE CAPITAL FUN	ID FMV	•	• • •	
II, LLC		24,673.	11,093.	
TIFF PARTNERS II	$\mathbf{FMV}$	<7,969.>	> 3,134. 102,994. 68,213.	
TIFF PARTNERS, IV	FMV	148,843.		
TIFF PARTNERS, V - INTERNATIONAL	FMV	128,987.		
TIFF PARTNERS, V - US	FMV	249,425.		
TIFF PRIVATE EQUITY PARTNERS, 20	05 FMV	312,197.	404,690.	
TIFF PRIVATE EQUITY PARTNERS, 20		264,019.	303,672. 475,267. 1,928,270.	
TIFF REALTY & RESOURCES 2008	FMV	357,864.		
WINSTON HEDGED EQUITY FUND	FMV	1,500,000.		
ROUNDING DIFFERENCE	COST	<26.>		
TOTAL TO FORM 990-PF, PART II, L	INE 13	28,298,868.	27,640,584.	
			<del></del>	
FORM 990-PF	OTHER ASSETS		STATEMENT 9	
FORM 990-PF DESCRIPTION	OTHER ASSETS  BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	STATEMENT 9  FAIR MARKET VALUE	
	BEGINNING OF		FAIR MARKET	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	BOOK VALUE	FAIR MARKET VALUE	
DESCRIPTION PREPAID TAXES - 990-PF	BEGINNING OF YR BOOK VALUE	31,129.	FAIR MARKET VALUE	
DESCRIPTION  PREPAID TAXES - 990-PF TAXES RECEIVABLE	BEGINNING OF YR BOOK VALUE  22,572. 0.	BOOK VALUE 31,129. 477.	FAIR MARKET VALUE 31,129. 477.	

	ST OF OFFICERS, DIRECTORS D FOUNDATION MANAGERS		STATEMENT 10	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
LOUIS M. FREEMAN 425 NOTRE DAME ST, UNIT 707 NEW ORLEANS, LA 70130	CHAIRMAN 1.00	0.	0.	0.
R. WEST FREEMAN, III 714 FERN STREET NEW ORLEANS, LA 70118	TRUSTEE 1.00	0.	0.	0.
VIRGINA FREEMAN ROWAN 1727 ARABELLA NEW ORLEANS, LA 70115	TRUSTEE 1.00	0.	0.	0.
PHILIP WOOLLAM 295 WALNUT STREET NEW ORLEANS, LA 70118	TRUSTEE 1.00	0.	0.	0.
RICHARD W. FREEMAN, JR. P.O. BOX 957 FOLSOM, LA 70437	VICE-CHAIRMAN 1.00	0.	0.	0.
TINA FREEMAN WOOLLAM 295 WALNUT STREET NEW ORLEANS, LA 70118	SECRETARY 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	0.	0.	0.