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DLN: 93491319024046

OMB No 1545-0052

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Form 990-PF

▶ 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 <u>www.irs.gov/form990pf</u>.

| For | caler | ndar year 2015, or tax year beginning 01 | -01 | l-2015 | , a | nd ending 1 | 2-31-2015 | |
|--------------------------------------|-----------------|--|----------------|------------------------------------|-----|------------------------|---|---|
| | e of four | | | | | A Employer Id | entification numb | er |
| KI | KSCHMAI | N FOUNDATION HEALTH & EDUCATION | | | | 72-6033084 | | |
| Num | ber and : | street (or P O box number if mail is not delivered to street addre | ss) | Room/suite | | B Telephone nur | nber (see instruction | ıs) |
| | | ELAND AVENUE | | · | | (504) 512-7438 | | |
| | | state or province, country, and ZIP or foreign postal code S, LA 70119 | | | | C If exemption | application is pendir | ig, check here |
| INEVV | OKLEAN | 3, IA 70119 | | | | | | l |
| G C I | neck all | Final return A mended return | | rmer public charity | | _ | ganızatıons, check h | Γ |
| | | Address change Name change | | | | | ganizations meeting k here and attach co | |
| | | pe of organization \sqrt{S} Section 501(c)(3) exempt priv 4947(a)(1) nonexempt charitable trust \sqrt{O} Other tax | | | n | | indation status was n 507(b)(1)(A), che | |
| of | year <i>(fr</i> | t value of all assets at end from Pait II, col (c), Solution 1,125,324 JAccounting method Tom Pait II, column (d) must be supported by the second of the sec | | ▼ Cash | ıal | | ition is in a 60-mont n 507(b)(1)(B), chec | |
| Pa | rt I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | | Revenue and expenses per (a) books | (b) | Net investment income | Adjusted net | Disbursements for chantable purposes (d) (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received (attach | + | | | | | (a) (cash basis shiry) |
| | | schedule) | . | 500,500 | | | | |
| | 2 | Check ► ☐ If the foundation is not required to attach | | | | | | |
| | _ | Sch B | . - | | | | | |
| | 3 | Interest on savings and temporary cash investment Dividends and interest from securities | .s - | 35,064 | | 32,240 | | |
| | 5a | Gross rents | | 180 | | 180 | | |
| | b | Net rental income or (loss) 180 | | 100 | | 100 | | |
| Revenue | 6a | Net gain or (loss) from sale of assets not on line 10 | \vdash | 5,965 | | | | |
| | b | Gross sales price for all assets on line 6a 81,294 | | | | | | |
| | 7 | Capital gain net income (from Part IV, line 2) | | | | 5,965 | | |
| | 8 | Net short-term capital gain | \cdot | | | | | |
| | 9 | Income modifications | • | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | | |
| | b | Less Cost of goods sold | | | | | | |
| | c | Gross profit or (loss) (attach schedule) | $\cdot \top$ | | | | | |
| | 11 | Other income (attach schedule) | - | | | | | |
| | 12 | Total.Add lines 1 through 11 | | 541,709 | | 38,385 | | |
| | 13 | Compensation of officers, directors, trustees, etc | | 0 | | 0 | | C |
| | 14 | Other employee salaries and wages | . [| | | | | |
| Ş | 15 | Pension plans, employee benefits | . [| | | | | |
| n St | 16a | Legal fees (attach schedule) | $\cdot \lceil$ | | | | | |
| 8 | ь | Accounting fees (attach schedule) | . • | 3,701 | | 2,775 | | С |
| perating and Administrative Expenses | с | Other professional fees (attach schedule) | . | 494 | | 494 | | 0 |
| ₹ | 17 | Interest | . [| | | | | |
| ਸ਼ ਹ | 18 | Taxes (attach schedule) (see instructions) | . [| 703 | | 3 | | С |
| ≘ | 19 | Depreciation (attach schedule) and depletion | . [| | | | | |
| Ē | 20 | Occupancy | | | | | | |
| Ā | 21 | Travel, conferences, and meetings | . [| | | | | |
| anc | 22 | Printing and publications | $\cdot \lceil$ | | | | | |
| 5 | 23 | Other expenses (attach schedule) | . [| 453 | | 453 | | 0 |
| aţī | 24 | Total operating and administrative expenses. | | | | | | |
| be | | Add lines 13 through 23 | . | 5,351 | | 3,725 | | C |
| ō | 25 | Contributions, gifts, grants paid | . [| 120,400 | | | | 120,400 |
| | 26 | Total expenses and disbursements. Add lines 24 and | · [| 125 751 | | 2 715 | | 120.400 |
| | 27 | Subtract line 26 from line 12 | + | 125,751 | | 3,725 | | 120,400 |
| | a | Excess of revenue over expenses and disbursements | s | 415,958 | | | | |
| | Ь . | Net investment income (If negative, enter -0-) | | , | | 34,660 | | 1 |
| | С | Adjusted net income(if negative, 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 o | f year | | | | |
|-----------|----------|---|------------------------|------------------|-------------------------|--|--|--|--|
| _ | | | (a) Book Value | (b) Book Value | (c) Fair Market Value | | | | |
| | 1 | Cash—non-interest-bearing | 89,983 | 490,158 | · | | | | |
| | 2 | Savings and temporary cash investments | 32,897 | 28,745 | 28,745 | | | | |
| | 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 ▶ | | | | | | | |
| ts | 8 | Inventories for sale or use | | | | | | | |
| 4ssets | 9 | Prepaid expenses and deferred charges | | | | | | | |
| As | | schedule) | , | | | | | | |
| | _ | Investments—corporate stock (attach schedule) | 9 596,347 | 606 421 | | | | | |
| | | Investments—corporate bonds (attach schedule) | 596,347 | 606,421 | | | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | | | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | | | | | |
| | | Investments—mortgage loans | | | | | | | |
| | | Investments—other (attach schedule) | | | | | | | |
| | | Land, buildings, and equipment basis ▶ | | | | | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | | | | | |
| | 15 | Other assets (describe | | | | | | | |
| | 16 | Total assets(to be completed by all filers—see the | 699,292 | 1 115 250 | 1 175 274 | | | | |
| | 47 | Instructions Also, see page 1, item I) | 099,292 | 1,115,250 | 1,125,324 | | | | |
| | 17 | Accounts payable and accrued expenses | | | | | | | |
| ş | 18 | Grants payable | | | | | | | |
| abilities | 19 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | | | | |
| api | 21 | Mortgages and other notes payable (attach schedule) | | | | | | | |
| ב | 22 | Other liabilities (describe | | | | | | | |
| | 23 | Total liabilities(add lines 17 through 22) | 0 | 0 | | | | | |
| | | Foundations that follow SFAS 117, check here | - | <u> </u> | | | | | |
| e s | | and complete lines 24 through 26 and lines 30 and 31. | | | | | | | |
| ınc | 24 | Unrestricted | 699,292 | 1,115,250 | | | | | |
| Balance | 25 | Temporarily restricted | , , | , , | | | | | |
| | 26 | Permanently restricted | | | | | | | |
| Fund | | Foundations that do not follow SFAS 117, check here | | | | | | | |
| or F | | and complete lines 27 through 31. | | | | | | | |
| | 27 | Capital stock, trust principal, or current funds | | | | | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | | | | | |
| As | 29 | Retained earnings, accumulated income, endowment, or other funds | | | | | | | |
| Net | 30 | Total net assets or fund balances(see instructions) | 699,292 | 1,115,250 | | | | | |
| _ | 31 | Total liabilities and net assets/fund balances(see instructions) | 699,292 | 1,115,250 | | | | | |
| Pa | rt III | | · | | | | | | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column (| (a), line 30 (must ac | jree | | | | | |
| | | | | | 699,292 | | | | |
| 2 | | Enter amount from Part I, line 27a | | 2 | 415,958 | | | | |
| 3 | | Other increases not included in line 2 (itemize) | | 3 | 0 | | | | |
| 4 | | Add lines 1, 2, and 3 | | 4 | 1,115,250 | | | | |
| 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)—Pa | art II, column (b), lı | ne 30 . 6 | 1,115,250 | | | | |
| | | | | Fo | rm 990-PF (2015) | | | | |

the Part VI instructions

| | | ne kınd(s) of property sold (e g , ouse, or common stock, 200 sh | P—Purchase (b) D—Donation | Date acquired | Date sold (d) (mo , day, yr) | | |
|---------------------|---|--|----------------------------|------------------------|---|-----------------------------|--|
| 1 a | PUBLICLY TRADED SE | ECURITY | | (2) B B G H d C H d H | | | |
| b | PUBLICLY TRADED SE | - ECURITY | | | | | |
| | CAPITAL GAINS DIVI | | | Р | | + | |
| d | | | | · · | | | |
| e | | | | | | | |
| | | Depreciation allow | ied Cos | l st or other basis | T Gau | n or (loss) | |
| (€ | e) Gross sales price | (f) (or allowable) | | expense of sale | | (f) minus (g) | |
| а | 77 | 7,656 | | 71,49 | 9 | 6,157 | |
| b | 3 | 1,182 | | 3,83 | 0 | -648 | |
| С С | | 456 | | | 1 | 456 | |
| d | | | | | | | |
| е | | | | | - | | |
| | mnlete only for assets sho | owing gain in column (h) and own | ned by the foundation | on on 12/31/69 | Gains (Col | (h) gain minus | |
| | · | Adjusted basis | · . | cess of col (i) | | ot less than -0-) or | |
| (i) | FM V as of 12/31/69 | (j) as of 12/31/69 | | ercol (j), ıfany | (I) Losses | (from col (h)) | |
| а | | | | | | 6,157 | |
| b | | | | | | -648 | |
| С | | | | | | 456 | |
| d | | | | | | | |
| e | | | | | | | |
| 3 | · · · | gain or (loss) sgain or (loss) sgain or (loss) as defined in sections of the same of the s | | 0- in Part I, line 7 } | 3 | 5,965 | |
| Part | _ | ider Section 4940(e) for | | | nt Income | | |
| If secti Was the | on 4940(d)(2) applies, lea e foundation liable for the s | section 4942 tax on the distribu | itable amount of any | y year in the base pe | | ┌ Yes 🗸 No | |
| | | qualify under section 4940(e) [| • | | | | |
| 1 En | | it in each column for each year, | see instructions be | fore making any ent | | | |
| | (a) e period years Calendar or tax year beginning in) | (b) Adjusted qualifying distributions | Net value of nonch | | (d) Distributio (col (b) divideo | n ratio | |
| | 2014 | 10,600 | | 680,230 | | 0 015583 | |
| | 2013 | 110,350 | | 738,875 | | 0 149349 | |
| | 2012 | 17,000 | | 718,551 | | 0 023659 | |
| | 2011 | 103,750 | | 710,246 | | 0 146076 | |
| | 2010 Totalof line 1, column (| 217,151 | | 743,812 | | 0 291943 | |
| 2 | , , | • | | | 2 | 0 626610 | |
| 3 | the number of years the | tio for the 5-year base period—c e foundation has been in existen | ce if less than 5 yea | ars , , , | 3 | 0 125322 | |
| 4 | | ioncharitable-use assets for 201 | | <u> </u> | 4 | 641,454 | |
| 5 | | | | | 5 | 80,388 | |
| 6 | • | | | <u> </u> | 6 | 347 | |
| 7 | | | | | 7 | 80,735 | |
| 8 | | utions from Part XII, line 4 | | L | 8 120,400 | | |
| | If line 8 is equal to or gi | reater than line 7, check the box | x in Part VI, line 1b | , and complete that | part using a 1% ta | x rate See | |

| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49 | 940(e), | or 4948 —se | e page | 2 18 of | the inst | 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 | | | Ų. | | | | | |
| | (attach copy of letter if necessary-see instructions) | | | [] | | | | | |
| b | Domestic foundations that meet the section $4940(e)$ requirements in Part V, | , check | | J | 1 | | | | 347 |
| | here ▶ 🔽 and enter 1% of Part I, line 27b · · · · · · · · · · · · | | | . ′ | | | | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organization Part I, line 12, col (b) | ations e | nter 4% of | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | | | | | | 0 |
| 3 | | | | | | | | | 347 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | | | | | | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, e | nter -0 | | | 5 | | | | 347 |
| 6 | Credits/Payments | | | | | | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 | 6a | | 865 | | | | | |
| b | Exempt foreign organizations—tax withheld at source | 6b | | | | | | | |
| С | Tax paid with application for extension of time to file (Form 8868). \cdot . | 6 c | | | | | | | |
| d | Backup withholding erroneously withheld | 6d | | | | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | | 7 | | | | 865 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here $\ \ \Box$ if Form | 2220 19 | s attached | | 8 | | | | |
| 9 | $\textbf{Tax due.} If the total of lines 5 and 8 is more than line 7, enter \textbf{amount owed} \ .$ | | | • | 9 | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amoun | nt overp | aid | • | 10 | | | | 518 |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax | 518 | Refunded | <u> </u> | 11 | | | | 0 |
| Par | t VII-A Statements Regarding Activities | | | | | | | 1 | |
| 1a | During the tax year, did the foundation attempt to influence any national, state | e, or loc | al legislatio | n or dı | d | | | Yes | No |
| | | | | | | | 1a | | No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for p | | | see In | structi | ons | | | |
| | for definition)? | | | • • | | | 1b | | No |
| | If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities | ana cop | ores or any n | nateriai | 15 | | | | |
| _ | published or distributed by the foundation in connection with the activities Did the foundation file Form 1120-POI for this year? | | | | | | 1c | | No |
| | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | | | | 110 | |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \triangleright \$ | | | | | | | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for poli | | | | osed | | | | |
| | on foundation managers > \$0 | | į | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been rep | ported t | to the IRS? | | | | 2 | | No |
| | If "Yes," attach a detailed description of the activities | | | | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in it | ts gove | rning instrui | ment, | articles | 6 | | | |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf | ormed c | copy of the cl | hanges | | | 3 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more d | luring th | ne year? | | | | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | | | | | | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction du | ring the | year? | | | | 5 | | No |
| | If "Yes," attach the statement required by General Instruction T | | | | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 49 • By language in the governing instrument, or | 45) sat | isfied eithei | r | | |)] | | |
| | By state legislation that effectively amends the governing instrument so th | at no m | andatory di | rection | าร | | | | |
| | that conflict with the state law remain in the governing instrument? | | | | | | 6 | Yes | ĺ |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year | ?If "Yes | ," complete l | Part II, | col (c, |), | | | |
| | and Part XV | | | | | | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered ($\blacktriangleright_{\text{LA}}$ | see ins | tructions) | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99 | 90-PF t | o the Attorr | ney | | | | | |
| | General (or designate) of each state as required by General Instruction G? If | "No," att | tach explanat | ion . | | | 8b | Yes | |
| 9 | Is the foundation claiming status as a private operating foundation within the $\ensuremath{\text{r}}$ | meaning | g of section | 4942(| ່ງ)(3) | | | | |
| | or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s | ee insti | ructions for | Part X | IV)? | | | | |
| | If "Yes," complete Part XIV | | | | | | 9 | | No |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes, | | | _ | their na | ames | | | |
| | and addresses 🕏 | | | | | | 10 | Yes | |

| Par | t VII-A Statements Regarding Activities (continued) | | | age . |
|------------|---|--------|------|-------|
| 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 ▶PEGGY WILLEM Telephone no ▶(504) | 1)512- | 7438 | |
| | Located at ▶2600 CLEVELAND AVE NEW ORLEANS LA ZIP+4 ▶70119 | | | |
| 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 | | - 1 | |
| 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 ▶ | | | |
| Pai | 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 |
| 1 a | 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? | ļ | | ļ |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | ļ |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | ļ | | ļ |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (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 🔽 No | | | ļ |
| | (6) A gree to pay money or property to a government official? (Exception. Check "No" | | | |
| | ıf 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) $	extstyle 	ext$ | 1 | | ļ |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | l | | |
| | 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 | 1 | | l |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | 1 | | I |
| | 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)) | | | |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2015? Yes ▼ No | ! | | ļ |
| | If "Yes," list the years ▶ 20, 20, 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) | l | | |
| | to all years 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 | | | |
| За | ▶ 20, 20, 20, 20 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 | i | | İ |
| _ | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | | | |
| | by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) | | | |
| | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine | | | |
| | if the foundation had excess business holdings in 2015) | 3b | | |
| 4 a | 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 |

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| a | A verage monthly fair market value of securities. | 10 | |
|---|--|------------|---|
| b | A verage of monthly cash balances | 1 b | |
| c | Fair market value of all other assets (see instructions) | 1 c | |
| d | Total (add lines 1a, b, and c) | 1d | (|
| | | | |

Reduction claimed for blockage or other factors reported on lines 1a and

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5

1

2

Part XII

1e

651,222 2 2

3 3 651,222 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4

9,768 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 641,454 32,073 Distributable Amount

5 (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.)

Part XI 1 1 32,073 347 **2**a Tax on investment income for 2015 from Part VI, line 5. 2a

Income tax for 2015 (This does not include the tax from Part VI). . . 2b 2c 347 Distributable amount before adjustments Subtract line 2c from line 1. 3 31,726

3 4 4 Recoveries of amounts treated as qualifying distributions.

6 6 n 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 31,726

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

3а 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 120,400

5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 347 120,053 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

5

1a

1h

2

Page 8

31,726

120,400

| P | art XIII Undistributed I | income (see instri | uctions) | | | |
|----|--|--------------------------------|----------------------|----------------------------|-------------|-------------------------|
| | | | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
| 1 | Distributable amount for 2015 fi | rom Part XI, line 7 | | | | 31,720 |
| 2 | Undistributed income, if any, as of the end of 2015 | | | | | |
| а | Enter amount for 2014 only | | | | 0 | |
| b | Total for prior years 20, | . 20, 20 | | 0 | | |
| 3 | Excess distributions carryover, | ıf any, to 2015 | | | | |
| а | From 2010 | 180,274 | | | | |
| b | - · · · · · · · · · · · · · · · · · · · | 68,808 | | | | |
| | From 2012 | 74.022 | | | | |
| d | | 74,032 | | | | |
| e | | | 323,114 | | | |
| | Total of lines 3a through e | | 323,114 | | | |
| 4 | Qualifying distributions for 2015 XII, line 4 ▶ \$ | 120,400 | | | | |
| | Applied to 2014, but not more th | | | | 0 | |
| | Applied to undistributed income | | | 0 | , | |
| , | (Election required—see instructi | | | Ĭ | | |
| c | Treated as distributions out of co | · · · | 0 | | | |
| | required—see instructions) | | | | | |
| d | Applied to 2015 distributable ar | mount | | | | 31,720 |
| е | Remaining amount distributed or | ut of corpus | 88,674 | | | |
| 5 | Excess distributions carryover a | applied to 2015 | 0 | | | |
| | (If an amount appears in column (same amount must be showr | | | | | |
| 6 | Enter the net total of each colu indicated below: | mn as | | | | |
| а | Corpus Add lines 3f, 4c, and 4e | Subtract line 5 | 411,788 | | | |
| b | Prior years' undistributed income line 4b from line 2b | | | o | | |
| С | Enter the amount of prior years' income for which a notice of defice been issued, or on which the sectax has been previously assessed. | tion 4942(a) | | 0 | | |
| d | Subtract line 6c from line 6b Ta—see instructions | | | 0 | | |
| е | Undistributed income for 2014 4a from line 2a Taxable amount instructions | -see | | | 0 | |
| f | Undistributed income for 2016 slines 4d and 5 from line 1. This abe distributed in 2015. | Subtract amount must | | | | 1 |
| 7 | Amounts treated as distributions corpus to satisfy requirements in section 170(b)(1)(F) or 4942(g) be required - see instructions). | mposed by (3) (Election may | 0 | | | |
| 8 | Excess distributions carryover f applied on line 5 or line 7 (see in | rom 2010 not | 180,274 | | | |
| 9 | Excess distributions carryover to Subtract lines 7 and 8 from line | | 231,514 | | | |
| 10 | Analysis of line 9 | Ī | | | | |
| а | Excess from 2011 | 68,808 | | | | |
| b | Excess from 2012 | | | | | |
| c | Excess from 2013 | 74,032 | | | | |
| d | | 20.45 | | | | |
| e | Excess from 2015 | 88,674 | | | | |
| | | | | | Fo | orm 990-PF (2015 |

| | m 990-PF (2015) | | | | | Page 10 |
|----|---|------------------------------|---------------------|-----------------------|-----------------------|----------------|
| | Part XIV Private Operating Founda | | | | 1 9) | |
| La | If the foundation has received a ruling or detei foundation, and the ruling is effective for 2015 | | | | | |
| b | Check box to indicate whether the organizatio | n <u>is a private operat</u> | ing foundation de | scribed in section | ☐ 4942(J)(3) or | 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | | (e) Total | |
| | income from Part I or the minimum investment return from Part X for each | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (c) lotal |
| | year listed | | | | | |
| b | 85% of line 2a | | | | | |
| | Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d | A mounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon | | | | | |
| а | "Assets" alternative test—enter | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test— enter 2/3 of minimum investment return shown in | | | | | |
| | Part X, line 6 for each year listed | | | | | |
| c | "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) | | | | | |
| | (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 | | | | | |
| Pā | art XV Supplementary Information (| | | ie organizatio | n had \$5,000 o | r more in |
| _ | assets at any time during the | e year—see inst | ructions.) | | | |
| a | Information Regarding Foundation Managers: List any managers of the foundation who have before the close of any tax year (but only if the | | | | • | ation |
| | See Additional Data Table | | | | | |
| b | List any managers of the foundation who own 1 ownership of a partnership or other entity) of v | | • | , , , | large portion of the | е |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Information Regarding Contribution, Grant, Gi | ft Loan Scholarshi | n etc Programs: | , | | |
| _ | | | | | | |
| | Check here ▶ ▼ If the foundation only makes unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and | n makes gifts, grant | | | | |
| | | | | | | |
| ā | The name, address, and telephone number or | email address of the | e person to whom | applications shou | ld be addressed | |
| | | | | | | |
| Ŀ | The form in which applications should be subr | nitted and information | on and materials t | they should includ | e | |
| | | | | | | |
| | : Any submission deadlines | | | | | |
| | | | | | | |
| , | d Any restrictions or limitations on awards, suc | h as by deodraphica | al areas, charitabl | le fields, kinds of i | nstitutions, or other | - |
| • | factors | , ggrapino | | , | | |
| | | | | | | |

Form 990-PF (2015)

Part XV Supplementary Information(continued)

| 3 Grants and Contributions Paid | During the Year or App | proved for F | uture Payment | | |
|---|---|-------------------------|------------------------------------|---------|--|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or | A mount | |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | Amodile | |
| a Paid during the year See Additional Data Table | of substantial contributor | | | | |
| | | | | | |
| Total | | | ▶ 3a | 120,400 | |
| b Approved for future payment TEMPLE SINAI 6227 ST CHARLES AVENUE NEW ORLEANS, LA 70118 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 500 | |
| | | | | | |
| | | | | | |
| Total | | | ▶ 3b | 500 | |

| - | amounts unless otherwise indicated | Unrelated bu | siness income | Excluded by section | 512, 513, or 514 | (e) |
|---|--|--|----------------|--------------------------------------|------------------|--|
| 1 Program | service revenue | (a) Business code | (b) A mount | (c) Exclusion code | (d) A mount | Related or exempt function income (See |
| _ | | | | | | instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| g Fees a | nd contracts from government agencies | | | | | |
| 3 Interest | ship dues and assessments on savings and temporary cash nents | | | | | |
| | ds and interest from securities | | | 14 | 35,064 | |
| | al income or (loss) from real estate | | | | , | |
| | inanced property | | | | | |
| 6 Net rent | bt-financed property | | | 01 | 180 | |
| | vestment income | | | | | |
| 8 Gain or (| (loss) from sales of assets other than | | | 18 | 5,965 | |
| | me or (loss) from special events rofit or (loss) from sales of inventory | | | | | |
| | venue a _ | | | | | |
| | | | | | | |
| | | | | | | |
| e | | | | | | |
| 45 6 1 1 1 | Add columns (b) (d) and (s) | | C | , | 41,209 | (|
| | Add columns (b), (d), and (e) Id line 12, columns (b), (d), and (e) | | | | 3 | 41,209 |
| 13 Total. Ad (See wo | ld line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify | calculations) | | 1 | 3 | |
| 13 Total. Ad (See wo | ld line 12, columns (b), (d), and (e) rks heet in line 13 instructions to verify | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |
| 13 Total.Ad (See wo Part XVI- Line No. | Id line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify a relationship of Activities to Explain below how each activity for whe the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | olishment of E | Exempt Purpose (e) of Part XVI-A co | 3es | 41,209 ntly to |

| P | art XVII | Information Re Noncharitable | | | | actions | and R | telationships | With | | | gc = . |
|-------------|--------------------------|--|-------------------------|---------------------|--------------------------------------|-----------------------|-----------------------|--------------------------------|---------------------------------------|------------------------|----------|---------------|
| 1 | Did the o | rganization directly or i | | | | any oth | er organ | ızatıon described | lın | | | |
| | | 01(c) of the Code (other | er than sec | ction 501(c)(3) o | organizations) or | ın sectio | on 527, r | elating to politic | al | | Yes | No |
| | organızat T f | | | | | | | | | | | |
| | | from the reporting four | | | | | | | | 4-/4\ | | NI. |
| | | n | | | | | | | • | 1a(1) | | No |
| | | rassets | | | | | | | | 1a(2) | | No |
| | | nsactions | | | | | | | | | | |
| | | s of assets to a noncha | | | | | | | | 1b(1) | | No |
| | | hases of assets from a | | | | | | | • | 1b(2) 1b(3) | | No |
| | | | | | | | | | | | | No |
| | (4) Reim | bursement arrangemen | its | | | | | | | 1b(4) | | No |
| | (5) Loan | s or loan guarantees. | | | | | | | | 1b(5) | | No |
| | (6) Perfor | mance of services or m | embership | or fundraising s | olicitations | | | | | 1b(6) | | No |
| c | Sharıng o | f facılıtıes, equipment, i | mailing lis | ts, other assets, | or paid employe | es | | | | 1 c | | No |
| | of the god | wer to any of the above ods, other assets, or se nsaction or sharing arra (b) Amount involved | rvices giv angement, | en by the reporti | ng foundation If (d) the value of | the found the good | dation re s, other | eceived less than | fair marke es receive | et value ed | | nte |
| (a) | Line No | (b) Amount involved | (C) Name | or nonchantable exe | empt organization | (0) De | scription | or cransiers, cransacc | ions, and sne | illig alla | ilgenien | 11.5 |
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| | | | | | | | | | | | | |
| | described √ No | Indation directly or indit in section 501(c) of the complete the following s (a) Name of organization | ne Code (o schedule | ther than section | · · | n section | | | • • • • • • • • • • • • • • • • • • • | · | es | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | + | | | | | |
| | Und | ler penalties of perjury, | T do alara | that I have avam | and the ration | un altrelin | | | | + + | | + |
| Sig | the Info | er penaities of perjury, best of my knowledge a rmation of which prepar | nd belief, | ıt ıs true, correct | | | | | n taxpayeı | r) is bas | ed on | all |
| | re | ***** | | | 2016-11-08 | _) - | ***** | | return | ne IRS di ne prepai | | |
| | | Signature of officer or t | rustee | | Date | ı | ıtle | | (see ıı | nstr)? | Yes 🕼 | No |
| | | Print/Type preparer's S DAVID KUSHNER | | Preparer's Sign | ature | Date | | Check if self- employed ▶ ☐ | PTIN P(| 009499 | 27 | |
| | eparer | Firm's name ► KUSHNER LAGRAIZE | LLC | | | | | Firm's EIN ▶ 7. | 2-104286 | 6 | | |
| Use Only | | Firm's address 3330 WEST ESPLANADE AVENUE STE 100 Phone no (504) 838-999 METAIRIE, LA 70002 | | | | 1 | | | | | | |

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their 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 |
|---|---|--|---|--|
| MARGERY KIRSCHMAN | TRUSTEE | 0 | 0 | 0 |
| 2600 CLEVELAND AVE NEW ORLEANS, LA 70119 | 1 00 | | | |
| ARNOLD KIRSCHMAN | TRUSTEE | 0 | 0 | 0 |
| 2600 CLEVELAND AVE NEW ORLEANS, LA 70119 | 1 00 | | | |
| RICHARD KIRSCHMAN | TRUSTEE | 0 | 0 | 0 |
| 2600 CLEVELAND AVE NEW ORLEANS, LA 70119 | 1 00 | | | |
| MICHAEL KIRSCHMAN | TRUSTEE | 0 | 0 | 0 |
| 2600 CLEVELAND AVE NEW ORLEANS, LA 70119 | 1 00 | | | |
| PEGGY WILLEM | TRUSTEE | 0 | 0 | 0 |
| 2600 CLEVELAND AVE | 1 00 | | | |

2600 CLEVELAND AVE NEW ORLEANS, LA 70119 Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

MARGERY KIRSCHMAN ARNOLD KIRSCHMAN

RICHARD KIRSCHMAN

| Form 990PF Part XV Line 3 - Gra | ants and Contributions | Paid During | the Year or Approved for F | uture Payment |
|---|--|--------------------------------------|-------------------------------------|---------------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | A mount |
| a Paid during the year | | | | |
| CULVER EDUCATIONAL FOUNDATION 1300 ACADEMY ROAD CULVER,IN 46511 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 200 |
| ISIDORE NEWMAN SCHOOL 1903 JEFFERSON AVENUE NEW ORLEANS,LA 70115 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 1,000 |
| JEWISH FEDERATION OF GREATER NEW ORLEANS 3747 W ESPLANADE AVENUE NORTH METAIRIE, LA 70002 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 2,500 |
| LOUISIANA PHILHARMONIC 1010 COMMON STREET SUITE 2120 NEWORLEANS,LA 70112 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 1,000 |
| TEMPLE SINAI 6227 ST CHARLES AVENUE NEW ORLEANS,LA 70118 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 2,000 |
| UNIVERSITY OF GEORGIA FOUNDATION 394 SOUTH MILLEDGE AVENUE STE 100 ATHENS,GA 30602 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 200 |
| UNIVERSITY OF NEW ORLEANS FOUNDATION 2000 LAKESHORE DRIVE NEW ORLEANS, LA 70148 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 100,000 |
| COVENANT HOUSE 611 N RAMPART STREET NEW ORLEANS,LA 70112 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 250 |
| OCHSNER CLINIC FOUNDATION 1514 JEFFERSON HIGHWAY BRENT HOUSE 240 NEW ORLEANS, LA 70121 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 1,000 |
| ST MICHAELS SPECIAL SCHOOL 1522 CHIPPEWA STREET NEW ORLEANS,LA 70130 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 1,000 |
| EISENHOWER MEDICAL CENTER 39000 BOB HOPE DRIVE RANCHO MIRAGE,CA 92270 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 500 |
| UNIVERSITY OF PENNSYLVANIA HEALTH SYSTEM 3535 MARKET STREET SUTE 750 PHILADELPHIA,PA 19104 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 1,000 |
| UNIVERSITY OF LOUISIANA 1201 NORTH THIRD STREET SUITE 7-300 BATON ROUGE,LA 70802 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 8,750 |
| ST BALDRICK'S FOUNDATION 1333 SOUTH MAYFLOWER AVENUE SUITE 400 MONROVIA,CA 91016 | | PUBLIC | FOR GENERAL PURPOSES OF GRANTEE | 1,000 |
| Total | | | ▶ 3a | 120,400 |
| <u></u> | | | <u>'</u> | |

| TY 2015 Accounting Fees Schedule | |
|---|--|
| Name: KIRSCHMAN FOUNDATION HEALTH & EDUCATION | |

DLN: 93491319024046

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

ACCOUNTING FEES

| | EIN: 72-6 | 5033084 | | |
|----------|------------------|--------------------------|------------------------|---|
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |

2,775

3,701

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | D | LN: 93491319024046 |
|--------------------------------------|----------------------------------|---------------------------|----------------------------------|
| TY 2015 Investments Corpora | te Bonds Schedule | | |
| | KIRSCHMAN FOUNDATI 72-6033084 | ON HEALTH & EDUCATION | ON |
| Name of Bond | l | End of Year Book Value | End of Year Fair Market Value |
| WELLS FARGO | | 106,875 | 114,820 |

283,821

103,546

102,105

290,594

98,902

102,105

CREWS & ASSOCIATES

TD AMERITRADE #3926

INVESTMENT IN OCTAVIA TWO, LLC

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

EIN: 72-6033084

Net Investment

Description Revenue and Expenses **Adjusted Net Income**

Disbursements for per Books Income **Charitable Purposes**

DLN: 93491319024046

OCTAVIA TWO, LLC 453 453

ional Fees Schedule

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INVESTMENT FEES

Name: KIRSCHMAN FOUNDATION HEALTH & EDUCATION

494

DLN: 93491319024046

EIN: 72-6033084

494

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|----------|--------|--------------------------|------------------------|---|

DLN: 93491319024046

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

EIN: 72-6033084 Name Address ARNOLD KIRSCHMAN 2600 CLEVELAND AVE

NEW ORLEANS, LA 70119

FEDERAL TAX EXPENSE

FOREIGN TAX EXPENSE

efile GRAPHIC print - DO NOT PROCESS

Name: KIRSCHMAN FOUNDATION HEALTH & EDUCATION **EIN:** 72-6033084

Amount **Net Investment Adjusted Net** Category Income Income

700

As Filed Data -



DLN: 93491319024046



| efile GRAPHIC print - | DO NOT PROCESS As Filed Date | a - | | DLN: 93491319024046 | |
|--|---|--|---|---|--|
| Schedule B | Sche | dule of Contributors | | OMB No 1545-0047 | |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service | | to Form 990, 990-EZ, or 990-PF (Form 990, 990-EZ, or 990-PF) and its in www irs gov/form990 | structions is at | 2015 | |
| Name of the organizati | n FION HEALTH & EDUCATION | | Employer id | entification number | |
| - KIRSCHMAN TOONDA | TON HEALTH & EDUCATION | | 72-603308 | 4 | |
| Organization type (ch | ck one) | | | | |
| Filers of: | Section: | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) | organization | | | |
| | 4947(a)(1) nonexempt cha | aritable trust not treated as a private fou | ndation | | |
| | 527 political organization | | | | |
| Form 990-PF | √ 501(c)(3) exempt private f | foundation | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | |
| | 501(c)(3) taxable private f | foundation | | | |
| | | PF that received, during the year, contribi Parts I and Ⅱ See instructions for determi | | | |
| Special Rules | | | | | |
| under sections treceived from a | 09(a)(1) and 170(b)(1)(A)(vi), that ch | ng Form 990 or 990-EZ that met the 33 ¹ /3 necked Schedule A (Form 990 or 990-EZ tal contributions of the greater of (1) \$5,0 tarts I and II |), Part II, line 13, 16a | , or 16b, and that | |
| during the year, | |), or (10) filing Form 990 or 990-EZ that r 0 <i>exclusively</i> for religious, charitable, sc mplete Parts I, II, and III | - | | |
| during the year, this box is chec purpose Do not | contributions exclusively for religious ed, enter here the total contributions complete any of the parts unless the |), or (10) filing Form 990 or 990-EZ that r , charitable, etc , purposes, but no such that w ere received during the year for a General Rule applies to this organizatio or more during the year | contributions totaled in exclusively religiou in because it receive | more than \$1,000 lf us, charitable, etc , ed <i>nonexclusively</i> | |
| 990-EZ, or 990-PF), but | t must answer "No" on Part IV, line 2 | Rule and/or the Special Rules does not fil 2, of its Form 990, or check the box on lin it does not meet the filing requirements o | e H of its | | |

Name of organization
KIRSCHMAN FOUNDATION HEALTH & EDUCATION

Employer identification number 72-6033084

| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional spa | ice is needed | |
|------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | | | Person ✓ |
| | MICHAEL KIRSCHMAN 2600 CLEVELAND AVE | \$ 500 | Payroll |
| | NEW ORLEANS, LA 70119 | - | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | | | Person 🗸 |
| | MARGERY KIRSCHMAN 2600 CLEVELAND AVE | \$ 100,000 | Payroll |
| | NEW ORLEANS, LA 70119 | 3 100,000 | Noncash — |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | | | Person 🗸 |
| | ARNOLD KIRSCHMAN 2600 CLEVELAND AVE | \$ 400,000 | Payroll |
| | NEW ORLEANS, LA 70119 | - | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | _ _ _ s | Payroll |
| | | | Noncash — |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | - \$ | Payroll |
| | | - | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | - | Payroll |
| | | \$ | Noncash — |
| | | | (Complete Part II for noncash contributions) |

Employer identification number

| ame of organizat | ION NDATION HEALTH & EDUCATION | Employer identification ni | ımber |
|-----------------------|--|--|----------------------|
| arsenhanioo | | 72-6033084 | |
| Part II | Noncash Property | | |
| | (see instructions) Use duplicate copies of Part II if additional space is needed | (c) | |
| (a) No.from Part I | (b) Description of noncash property given | FMV (or estimate) (see instructions) | (d) Date received |
| | | s | |
| (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 |
| | | | |
| (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 |
| | | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |

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