Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	2023 calend	dar year, or tax year beginning	01/01/2023 ar	nd ending	12/3	1/2023				
В	Check if a	applicable:	C Name of organization FRIENDS	OF BAYOU ST JOHN			D Emplo	yer identification number			
	Address	change	Doing business as					20-3461817			
	Name cha	ange	Number and street (or P.O. box if	mail is not delivered to street address	s) F	Room/suite	E Teleph	none number			
$\overline{\Box}$	Initial retu	ĭ	1211 N Gayoso St					504-488-3865			
$\overline{\Box}$		n/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code							
$\overline{\Box}$	Amended		New Orleans, LA 70119	<i>y</i> .			G Gross	G Gross receipts \$838,071			
ī		on pending	F Name and address of principal offi	cer: Jared Zeller		H(a) Is this a	group return fo	r subordinates? Yes V No			
			1211 N Gayoso St, New Orlean					es included? Yes No			
$\overline{}$	Tax-exem	npt status:	✓ 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	- '		ee instructions.			
		•	bayouboogaloo.com	, ()				exemption number			
K											
_	art I	Summa				2555	111111111111111111111111111111111111111	of legal domicile: LA			
			cribe the organization's missi	ion or most significant activiti	ies: PROM	OTING THE S	TEWARDS	SHIP CUI TURAL			
ø			TION, RESPONSIBLE RECREA								
Activities & Governance	1		CCESSIBLE TO ALL.	THOU THE INTERPOLATION OF THE	SOLI OKT	OLL/III, IIL/					
Ĩ			box if the organization di	scontinued its operations or	disposed o	of more than	25% of its	 s net assets			
ŏ	1		voting members of the government				1 1	0			
ত			independent voting member	9 7 1				9			
es			per of individuals employed in			•	5				
Ϋ́				-	iiile Zaj		6	2			
ĆĖ	1		per of volunteers (estimate if r				7a	10			
4	1		ated business revenue from F ed business taxable income				7a 7b	0			
	В	ivet urireiai	ed business taxable income	Irom Form 990-1, Part 1, line	11	Prior Ye	_	Current Year			
		Contributio	and grants (Bart VIII line)	16)		Prior re					
ne	1		ons and grants (Part VIII, line	20,576	161,162						
Revenue	1	_	ervice revenue (Part VIII, line		602,805	0					
Be	1		t income (Part VIII, column (A)		0	362,084					
			nue (Part VIII, column (A), line		14,362	314,825					
			ue—add lines 8 through 11 (m				637,743	838,071			
			I similar amounts paid (Part I)		2,327	0					
	1		aid to or for members (Part IX				0	0			
Expenses	1		her compensation, employee b		-		86,210	81,189			
eus			al fundraising fees (Part IX, co				0	6,332			
Ϋ́	1		aising expenses (Part IX, colu		22,345						
_	1	-	enses (Part IX, column (A), line				739,983	794,840			
	1	-	nses. Add lines 13-17 (must				828,520	882,361			
. "	19	Revenue le	ess expenses. Subtract line 1	8 from line 12			-190,777	-44,290			
Net Assets or Fund Balances		.	(D. 1)(1)			Beginning of Cu		End of Year			
sse	20		s (Part X, line 16)				304,332	251,263			
et A	21		ties (Part X, line 26)				150,365	151,736			
			or fund balances. Subtract li	ne 21 from line 20			153,967	99,527			
	art II		re Block								
			, I declare that I have examined this r e. Declaration of preparer (other than					my knowledge and belief, it is			
	-,					I	9				
Qi,	~n	0:	of officer.				_4_				
Sig	- 1	Signature				Ľ	ate				
He	ere		ller, President								
			int name and title	Preparer's signature							
Pa	id	Print/Type	preparer's name	[Date		if PTIN				
	epareı	Victor Ro					self-emp	P01232203			
	e Only		ne VGR CPA LLC			Firn	n's EIN	71-1037748			
		Firm's add				Pho	ne no.	504-494-1902			
Ma	v tha IR	S discuss t	this return with the preparer s	shown above? See instruction	ne			✓ Voc No			

Part			Part III	. п
1	Briefly describe the organization's mission: APPRECIATION, RESPONSIBLE RECREATION TO ALL. THE ORGANIZATIONS MOST SIGNIF FESTIVAL.	N AND INCENTIVES FOR A HEALTH	HY BAYOU ST. JOHN THAT IS ACCESSIBLE	
2	Did the organization undertake any signification prior Form 990 or 990-EZ?			
3	If "Yes," describe these new services on Sc Did the organization cease conducting, c services?	or make significant changes in	how it conducts, any program	✓ No
4		e accomplishments for each of it rganizations are required to repo	s three largest program services, as measurert the amount of grants and allocations to o	red by
4a	(Code:) (Expenses \$ 776 MIDCITY BAYOU BOOGALOO FESTIVALS CO PROVIDING ART, CULTURE, MUSICAL ENTER GENERAL PUBLIC. THEY ALSO PROVIDE EC MUSIC FESTIVAL ATTRACTS AN ESTIMATE OF ENCOURAGE SOCIAL CHANGE BY MOTIVAT AFFECT THEIR COMMUNITY, COLLABORATE BUILD AWARENESS FOR LOCAL INITIATIVES	RTAINMENT, AND RECREATIONAL ONOMIC OPPORTUNITIES FOR ST. OF 15,000 PEOPLE. BAYOU BOOGA ING CITIZENS TO ACTIVELY ENGA E WITH OTHER NONPROFIT ORGAN	ACTIVITIES AND OPPORTUNITIES TO THE AKEHOLDERS. THE THREEDAY ART AND ALOO IS A CRUCIAL OUTREACH TOOL TO GE THEMSELVES IN MATTERS THAT NIZATIONS AND LOCAL BUSINESSES,	
4b	(Code:) (Expenses \$) (Revenue \$))
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$))
4d	Other program services (Describe on Sched (Expenses \$ 0 including grant		e\$ 0)	
4e	Total program service expenses	776,368		

21

orm 99	90 (2023)			Page
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	<i>V</i>	,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		V
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		\ \
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		,
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	~	
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14a		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		,
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		,

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

20a

20b

Part l	V Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		,
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		\ \
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Ť
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		,
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		v
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		,
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		\(\tau \)
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
D	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	,	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1		
C	reportable gaming (gambling) with backup withholding rules for reportable payments to vendors and	10		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		,
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	O.D		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	~	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		~
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		/
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
g h	If the organization received a contribution of qualified intellectual property, and the organization file Form 8099 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
47	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?. 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 1 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain on Schedule O) Own website Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Jared Zeller, (504)488-3865

Part VI

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ited any current	officer, director,	or trustee.
		(C)								
(A)	(B)			Pos				(D)	(E)	(F)
Name and title	Average					e than o		Reportable	Reportable	Estimated amount
	hours					or/trust		compensation	compensation	of other
	per week (list any	or Inc	Ing	♀	6	en I	Fo	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	ctor	tion	·	n pic	ee t co	<u> </u>	1099-NEC)	1099-NEC)	related organizations
	below	trus	al tru		yee	mp				
	dotted line)	tee	ıste			ensa				
		١. ١	e			ted				
Jared Zeller	40.00									
Board President	0.00				~	~		47,999	0	0
Geoff Coats	2.00									
Board Member	0.00	1						0	0	0
Rodney Beals	2.00									
Board Member	0.00	~						0	0	0
lan McNulty	2.00									
Board Secretary	0.00	~		~				0	0	0
William Ramsey	2.00									
Board Member	0.00	~						0	0	0
Jason Hemel	2.00									
Board Vice President	0.00	~		~				0	0	0
Becker Rutledge	2.00									
Board Treasurer	0.00	~		~				0	0	0
Sara Howard	2.00									
Board Member	0.00	~						0	0	0
Kristal Huggins	2.00									
Board Member	0.00	~						0	0	0
		_								
		-								
	ļ	1								

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emp	ploy	yee	s, an	ıd F	lighest Compe	nsated Emplo	yees (continued)
					•	C)					
	(A)	(B) Position (do not check more than c			one	(D)	(E)	(F)			
	Name and title	Average	box, ι	unles	s pe	rson	is both	n an	Reportable	Reportable	Estimated amount
		hours per week					or/trus	-	compensation from the	compensation from related	of other compensation
			ndiv or di	nstit	Officer	ey	High empl	Former	organization (W-2/ 1099-MISC/	organizations (W-2/	from the organization and
		hours for related	idua	utio	ଫ୍	emp	est c	e	1099-NEC)	1099-NEC)	related organizations
		organizations below	Individual trustee or director	nal t		Key employee	ömp				
		dotted line)	stee	Institutional trustee		Ф	Highest compensated employee				
				æ			ated				
									<u> </u>		
			-								
			-								
			1						2		
			1				. 1				
					×						
				7							
		<u> </u>									
		······•									
1b	Subtotal								47,999	0	0
c	Total from continuation sheets to Part		n A						41,777		
d	Total (add lines 1b and 1c)								47,999	0	0
2	Total number of individuals (including	but not	limite	d t	o t	hos	e lis	ted		eceived more t	han \$100,000 of
	reportable compensation from the organi	zation							0		
											Yes No
3	Did the organization list any former of										
	employee on line 1a? If "Yes," complete s										3 🗸
4	For any individual listed on line 1a, is the organization and related organizations										
	individual									dule J for such	
5	Did any person listed on line 1a receive of									tion or individua	4 /
Ū	for services rendered to the organization'		•				,		•		5
Secti	on B. Independent Contractors								,		
1	Complete this table for your five high	nest comp	ensate	ed	inde	epei	ndent	CC	ontractors that r	eceived more	than \$100,000 of
	compensation from the organization. Repe	ort compen	satior	n for	r the	e ca	lenda	r ye	ar ending with or	within the orgar	nization's tax year.
	(A)								(B)		(C)
	Name and business add	ress							Description of serv	vices	Compensation
None											
2	Total number of independent contractor	re (includi	aa bu	ıt n	ot I	limit	od to	\ \ \ +b	nose listed about	e) who	
_	received more than \$100,000 of compens						.cu il	<i>-</i> [1]	iose iisteu abuv	C) WIIO	
	. ,										

D //////	01 - 1
Part VIII	Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	y line in this Pa	rt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaig	ns .		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	2,900				
ည် ရု	С	Fundraising events			1c	0				
fts,	d	Related organization	ns .		1d	0				
ia gi	е	Government grants			1e	0				
ns, Sir	f	All other contribution								
tio er		and similar amounts no	ot incl	uded above	1f	158,262				
혈된	g	Noncash contribution	ons in	cluded in						
a d		lines 1a-1f			1g	\$ 0				
Contributions, Gifts, Grants, and Other Similar Amounts	h	Total. Add lines 1a-	-1f .				161,162			
						Business Code				
Ce	2a									
e Z	b									
gram Ser Revenue	С									
an Se	d									
g &	е									
Program Service Revenue	f	All other program se								
_	g	Total. Add lines 2a-					0			
	3	Investment income								
		other similar amoun	nts) .			🗼				
	4	Income from investr	nent o	of tax-exem	npt bo	and proceeds				
	5	Danielli's a								
		,		(i) Real		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c		0	0				
	d	Net rental income o		s)		. 74				
	7a	Gross amount from	((i) Securit		(ii) Other				
		sales of assets								
		other than inventory	7a		0	362,084				
Φ	b	Less: cost or other basis		N		-				
Revenue		and sales expenses .	7b		0	0				
e e	С	Gain or (loss)	7c		0	362,084				
		Net gain or (loss)					362,084	362,084	0	0
Other		Gross income from								
ō		events (not including		0						
		of contributions rep		d on line						
		1c). See Part IV, line	18		8a	10,260				
	b	Less: direct expens	es .		8b	0				
	С	Net income or (loss)) from	fundraisin	g eve	nts	10,260		0	10,260
	9a	Gross income f	from	gaming						
		activities. See Part I	IV, lin	e 19 .	9a					
	b	Less: direct expens	es .		9b					
	С	Net income or (loss)) from	gaming ac	ctivitie	es				
	10a	Gross sales of ir								
		returns and allowan	ces		10a	283,380				
	b	Less: cost of goods	sold		10b	0				
	С	Net income or (loss)) from	sales of in	vento	ory	283,380	0	0	283,380
S						Business Code				
<u>e</u>	11a									
an	b									
scellaneo Revenue	С									
Miscellaneous Revenue	d	All other revenue					21,185	21,185	0	0
Σ	е	Total. Add lines 11a	<u>a–1</u> 1c	<u>I</u>	<u>.</u>		21,185			
	12	Total revenue. See					838,071	383,269	0	293,640

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete coll	ımn (A).
Check if Schedule O contains a response or note to any line in this Part IX	

		· · · · · · · · · · · · · · · · · · ·			
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .		·	-	·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	75,152		75,152	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		20		
7 8	Other salaries and wages	0	95	0	
9	Other employee benefits				
10	Payroll taxes	6,037		6,037	
11	Fees for services (nonemployees):				
а	Management	28,791	28,791		
b	Legal				
C	Accounting	12,272	12,272		
d	Lobbying	(222			/ 222
e f	Investment management fees	6,332			6,332
g	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A), amount, list line 11g expenses on Schedule O.)	17,015		1,638	15,377
12	Advertising and promotion			·	·
13	Office expenses	24,053	23,417		636
14	Information technology	1,520	1,520		
15	Royalties				
16	Occupancy	25,278	25,278		
17 18	Travel	508	508		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	4,765	4,765	0	0
21	Payments to affiliates		,		
22	Depreciation, depletion, and amortization .				
23	Insurance	2,117	1,296	821	0
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Event Poverages	86,498	86,498	0	0
b	Logistics	24,584	24,584	0	0
c	Security	87,185	87,185	0	0
d	Rentals	144,408	144,408	0	0
е	All other expenses	335,846	335,846		
25	Total functional expenses. Add lines 1 through 24e	882,361	776,368	83,648	22,345
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
					200

Part X Balance Sheet

		Check if Schedule O contains a response or	note	to any line in this Pa	rt X		
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			150,193	1	91,936
	2	Savings and temporary cash investments			154,139	2	122,389
	3	Pledges and grants receivable, net	0	3	0		
	4	Accounts receivable, net			0	4	0
	5	Loans and other receivables from any current of trustee, key employee, creator or founder, substantial in the contract of the					
	_	controlled entity or family member of any of thes	-		0	5	0
	6	Loans and other receivables from other disqual under section 4958(f)(1)), and persons described	0	6	0		
s	7	Notes and loans receivable, net			0	7	0
Assets	8	Inventories for sale or use			0	8	0
As	9	Prepaid expenses and deferred charges			0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D					J
	b	Less: accumulated depreciation	10b	16,113		10c	4,922
	11	Investments—publicly traded securities		0	11	0	
	12	Investments - other securities. See Part IV, line 1		0	12	0	
	13	Investments-program-related. See Part IV, line		0	13	0	
	14	Intangible assets		0	14	0	
	15	Other assets. See Part IV, line 11	0	15	32,016		
	16	Total assets. Add lines 1 through 15 (must equa			304,332	16	251,263
	17	Accounts payable and accrued expenses			365	17	1,736
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	rax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete F			21		
Liabilities	22	Loans and other payables to any current or trustee, key employee, creator or founder, substantially active or family member of any of these	antial	contributor, or 35%			
iab		controlled entity or family member of any of thes			22		
_	23	Secured mortgages and notes payable to unrela		•		23	
	24	Unsecured notes and loans payable to unrelated			150,000	24	150,000
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D	17–2	24). Complete Part X			
	00					25	
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, chee			150,365	26	151,736
nces		and complete lines 27, 28, 32, and 33.	JK HE	re v			
alaı	27	Net assets without donor restrictions			153,967	27	99,527
I B	28				0	28	0
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 95 and complete lines 29 through 33.	58, cl	neck here			
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or eq				30	
1ss	31	Retained earnings, endowment, accumulated inc	ome	or other funds .		31	
et /	32				153,967	32	99,527
ž	33	Total liabilities and net assets/fund balances .			304,332	33	251,263

Page **12** Form 990 (2023)

Part	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					~
1	Total revenue (must equal Part VIII, column (A), line 12)	1			838	8,071
2	Total expenses (must equal Part IX, column (A), line 25)	2			882	2,361
3	Revenue less expenses. Subtract line 2 from line 1	3			-44	4,290
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			153	3,967
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain on Schedule O)	9			-10	0,150
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			90	9,527
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	kplain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. [2a		>
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	l or			
	reviewed on a separate basis, consolidated basis, or both.					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		. [2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both.					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over					
	the audit, review, or compilation of its financial statements and selection of an independent accounts			2c		
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	audits	•	3b		
				Form	₁ 990	(2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

2023
Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number

FRIE	FRIENDS OF BAYOU ST JOHN 20-3461817							
Par	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.							
The c	organiz	zation is not a private founda	ation because it i	s: (For lines 1 through	12, chec	k only or	ne box.)	
1	\square A	church, convention of churc	hes, or associati	on of churches descri	ibed in se	ection 17	0(b)(1)(A)(i).	
2		school described in section			-			
3		hospital or a cooperative hos						
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the							
-		ospital's name, city, and state						
5	se	n organization operated for ection 170(b)(1)(A)(iv). (Com	plete Part II.)			(al unit described in
6 7	☐ Ar	federal, state, or local gover n organization that normally escribed in section 170(b)(1)	receives a subs	tantial part of its sup				n the general public
8	\square A	community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part II.)			
9	or un	n agricultural research organ university or a non-land-gra niversity:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
10	re su	n organization that normally in ceipts from activities related upport from gross investment cquired by the organization a	to its exempt ful t income and uni	nctions, subject to ce related business taxal	rtain exce ble incom	eptions; a ne (less se	and (2) no more than ection 511 tax) from	33 ¹ / ₃ % of its
11	☐ Ar	n organization organized and	l operated exclus	sively to test for public	c safety.	See sect i	ion 509(a)(4).	
12		n organization organized and						
		ne or more publicly supported						
	th	e box on lines 12a through 12					•	
а		Type I. A supporting organization supporting organization. Y	(s) the power to	regularly appoint or e	lect a ma	ijority of t		
b		Type II. A supporting orga	nization supervis	ed or controlled in co	nnection	with its s	supported organizati	on(s), by having
		control or management of organization(s). You must	the supporting o	rganization vested in	the same			
С		Type III functionally integ its supported organization(ally integrated with,
d		Type III non-functionally that is not functionally interequirement (see instructionally interequirement)	grated. The orga	nization generally mu	st satisfy	a distribu	ıtion requirement an	
е		Check this box if the organ functionally integrated, or						e II, Type III
f	Ente	er the number of <mark>supported</mark> o	organizations .					
g		vide the following information	n about the supp	orted organization(s).				
	(i) Nan	ne of supported organization	e of supported organization (iii) EIN (iiii) Type of organization (described on lines 1–10 above (see instructions)) (iv) Is the organization (v) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions)					other support (see
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								

Schedule A (Form 990) 2023 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (d) 2022 (c) 2021 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 4 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) % Public support percentage from 2022 Schedule A, Part II, line 14 15 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Schedule A (Form 990) 2023 Page **3**

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			, , ,		,	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees			• •			
	received. (Do not include any "unusual grants.")	174,897	38,046	400,354	20,576	161,162	795,035
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an	528,359	25,543	27,263	602,805	645,464	1,829,434
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					,	
5	The value of services or facilities furnished by a governmental unit to the organization without charge			~	5 *		
6	Total. Add lines 1 through 5	703,256	63,589	427,617	623,381	806,626	2,624,469
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	102,000	17,000	5,000	0	0	124,000
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b	102.000	17,000	F 000		0	124.000
с 8	Public support. (Subtract line 7c from	102,000	17,000	5,000	0	0	124,000
Casti	on B. Total Support						2,500,469
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(a) 2021	(4) 0000	(a) 2022	(f) Total
9	Amounts from line 6		• • •	(c) 2021	(d) 2022	(e) 2023	(f) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	703,256	63,589	427,617	623,381	806,626	2,624,469
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	2,					
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			2,999	14,270	28,665	45,934
13	Total support. (Add lines 9, 10c, 11,			,		·	
14	and 12.)	•			•	835,291 ar as a section	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8			3. column (f))		15	93.64 %
16	Public support percentage from 2022 Sch					16	97.7 %
	on D. Computation of Investment In	come Percer	ntage	<u> </u>	<u> </u>	1 1	7 73
17	Investment income percentage for 2023 (v line 13. colu	mn (f))	17	0 %
18	Investment income percentage from 2022			•	,	18	0 %
19a	33 ¹ / ₃ % support tests—2023. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2022. If the organiz	_	_	=		_	_
	line 18 is not more than 331/3%, check this I						
	Private foundation. If the organization di	d not chock a k	ooy on line 14	10a or 10b o	hack this hav	and see instru	tions \Box

Schedule A (Form 990) 2023 Page 4

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Se

.	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	Ito
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10b

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Scheau	e A (Form 990) 2023			Page C
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Section	
Sect	on A—Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	Ó	
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-function	ally	integrated Type III support	ting organization
	(see instructions).			

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions** Section E—Distribution Allocations (see instructions) **Distributable Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 From 2019 **c** From 2020 **d** From 2021 From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) i j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 Excess from 2023 . . .

Schedule A (Form 990) 2023 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part III, Line 12 - NA

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection Go to www.irs.gov/Form990 for instructions and the latest information.

Internal Revenue Service Name of the organization Employer identification number FRIENDS OF BAYOU ST JOHN 20-3461817 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) . . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2b Number of conservation easements on a certified historic structure included on line 2a . . . 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

Schedu	le D (Form 990) 2023								Page 2
Part									
3	Using the organization's acquisition, collection items (check all that apply).		ner reco	rds, check any of th	ne follov	ving that make s	ignificar	nt use	of its
а	☐ Public exhibition		d	Loan or exchang	ge prog	ram			
b	☐ Scholarly research		е	☐ Other					
С	☐ Preservation for future generations	i							
4	Provide a description of the organization XIII.	zation's collections and explain how they further the organization's exempt purpose in Par							
5	During the year, did the organization assets to be sold to raise funds rather						ar □Y	es [□No
Part	IV Escrow and Custodial Arra	ingements							<u> </u>
	Complete if the organization 990, Part X, line 21.	answered "Yes"	on For	m 990, Part IV, lin	e 9, or	reported an an	nount o	n For	m
1a	Is the organization an agent, trustee,				itions o	r other assets no	ot		
	included on Form 990, Part X?				. (□ Y	es [☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the fo	llowing table.					
							mount		
С	Beginning balance				10				
d	Additions during the year				10				
e	Distributions during the year				16				
f	Ending balance			04 (11		0 D V	,	7
2a	Did the organization include an amount if "You" available to a green gament in D								_ NO □
	If "Yes," explain the arrangement in Part Endowment Funds	art Alli. Grieck riere	e ii tile e.	xpiariation rias beer	provid	eu iii Fait Aiii .			
ı aı	Complete if the organization	answered "Yes"	on For	m 990 Part IV lin	e 10				
	Complete if the organization	(a) Current year		or year (c) Two yea		(d) Three years back	(e) Fou	ur years	back
1a	Beginning of year balance	(2)	1-7	(5) 112 / 52		(4)	(-,	,	
b	Contributions								
C	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs	, W							
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t	he current year en	d balanc	e (line 1g, column (a	a)) held	as:			
а	Board designated or quasi-endowmer	nt9	%						
b	Permanent endowment	%							
С	Term endowment%								
0-	The percentages on lines 2a, 2b, and								
3a	Are there endowment funds not in the organization by:	e possession of th	e organi	zation that are neid	and ac	iministered for th	e	Yes	No
							3a(i)		NO
	(i) Unrelated organizations?(ii) Related organizations?						3a(ii		
h	If "Yes" on line 3a(ii), are the related o		ae requi				3b	+	
4	Describe in Part XIII the intended uses	•	•				OD		1
Part			ir o oriac	Willom Tarias.					
	Complete if the organization		on For	m 990, Part IV. lin	e 11a.	See Form 990.	Part X.	line ⁻	10.
	Description of property	(a) Cost or oth		(b) Cost or other basis		Accumulated	•	ok valu	
		(investme		(other)		epreciation			
1a	Land		0	0					0
b	Buildings		0	0		0			0
С	Leasehold improvements		0	0		0			0
d	Fauipment		21 035	0		16 113			4 922

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

0

Other

0

0

Part VII	Investments—Other Securities	V line 11h Coo E	aura 000 Davit V lina 10
	Complete if the organization answered "Yes" on Form 990, Part I (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		-
	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G) (H)			
	mn (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII	Investments—Program Related Complete if the organization answered "Yes" on Form 990, Part	V line 11c. See Fo	orm 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(a) Description of investment	b) Book value	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6) (7)			
(8)			
(9)			
_ ` '	mn (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX	Other Assets		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
	(a) Description		(b) Book value
(1) Other As	ssets		32,016
(2)			
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
	mn (b) must equal Form 990, Part X, line 15, col. (B))		. 32,016
raitA	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See Form 990, Part X,
1.	line 25. (a) Description of liability		#ND- 1
(1) Federal in			(b) Book value
	come taxes		
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colu	mn (b) must equal Form 990, Part X, line 25, col. (B))		
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ		
organization's	s liability for uncertain tax positions under FASB ASC 740. Check here if the text	of the footnote has b	een provided in Part XIII .

Schedule D (Form 990) 2023 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . Amounts included on line 1 but not on Form 990. Part VIII, line 12: 2 Net unrealized gains (losses) on investments Donated services and use of facilities Recoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d 2e 3 3 Subtract line **2e** from line **1** . . . Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments 2b Other losses 2c Other (Describe in Part XIII.) Add lines 2a through 2d 2e 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) 4b Add lines **4a** and **4b** 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 **Supplemental Information** Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for the latest information.

FRIENDS OF BAYOU ST JOHN	20-3461817
Form 990, Part VI, Section B, Line 11b - ONCE THE 990 FORM IS COMPLETED, A COPY IS EMAILED TO T	HE BOARD FOR REVIEW.
Form 990, Part VI, Section B, Line 12c - ALL MEMBERS ARE GIVEN A COPY OF THE CONFLICT OF INTER	REST POLICY UPON
(A)JOINING THE BOARD OR (B) UPON UPDATE OF SAID POLICY. BOARD MEMBERS ARE REQUIRED TO	DISCLOSE ANY ACTUAL
OR POSSIBLE CONFLICTS OF INTEREST THROUGHOUT THE YEAR AND DURING BOARD MEETINGS. A	S STATED IN THE
POLICY, "AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER A	
THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING	
DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BO	
MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS." IF THERE IS A CONFLICT OF INTERES	
	31, THEN THE BOARD
FOLLOWS THE CONFLICT OF INTEREST'S PROCEDURES FOR ADDRESSING THE CONFLICT.	
Francisco Post VIII Continue D. Line 45. THE ODGANIZATION HAG A HUMAN DECOUDOES PROFESSIONAL	ON THE DOADD WILL
Form 990, Part VI, Section B, Line 15 - THE ORGANIZATION HAS A HUMAN RESOURCES PROFESSIONAL	L ON THE BOARD WHO
HANDLES JOB DESCRIPTIONS AND SALARY REQUIREMENTS FOR THE HIRING PROCESS.	
	
Form 990, Part VI, Section C, Line 19 - ALL INFORMATION IS AVAILABLE UPON REQUEST.	
Form 990, Part IX, Line 24e - Other Expenses	
Form 990, Part XI, Line 9 - Net asset correction	
. (7)	
7/1	
······	