Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

, 2011, and ending For the 2011 calendar year, or tax year beginning D Employer identification number C Name of organization Friends of the Fishermen Foundation Check if applicable: 27-3143286 Doing Business As Address change E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Name change 985 655 1051 PO Box 1870 Initial return City or town, state or country, and ZIP + 4 Terminated G Gross receipts \$ 83,231,55 Gray, LA 70359 Amended return H(a) Is this a group return for affiliates? Yes Vo F Name and address of principal officer: Michael Voisin Application pending H(b) Are all affiliates included? Yes No 412 Palm Avenue, Houma, LA 70364 If "No," attach a list. (see instructions)) ◀ (insert no.) ☐ 4947(a)(1) or 501(c) (√ 501(c)(3) Tax-exempt status: www.friendsofthefishermen.org H(c) Group exemption number ▶ Website: ▶ MI State of legal domicile: Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: Part I Briefly describe the organization's mission or most significant activities: Founded in the wake of the BP Oilspill. Initial tasks 1 was to provide financial assistance to fishermen impacted by the disaster. Initial finances handled through 501(c)1 agent, South Activities & Governance Central Planning & Development Commission. Finances transferred to FOF in 2011 after Dec 2010 award. Aftermath mission is to assist fishermen in rebranding Louisiana Seafood and education regarding new equipment requirements and regulations. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Number of voting members of the governing body (Part VI, line 1a) 5 3 5 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 0 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 20 6 7a 0 Total unrelated business revenue from Part VIII, column (C), line 12 0 7b Net unrelated business taxable income from Form 990-T, line 34 **Current Year Prior Year** Contributions and grants (Part VIII, line 1h) . . . 169,642.53 83,231.55 8 0 0 Program service revenue (Part VIII, line 2g) 9 0 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 83,231.55 169,642.53 12 0 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 128,060.03 0 Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) n 15 0 0 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 39,939,17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 0 39,939.17 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 169.642.53 43.292.38 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 41,582.50 84,874.88 20 Total assets (Part X, line 16) 0 36,737.50 21 Total liabilities (Part X, line 26) . 4.845.00 84,874.88 Net assets or fund balances. Subtract line 21 from line 20 22 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Signature of officer Sign Here Type or print name and title Date Print/Type preparer's name Preparer's signature Check | if Paid self-employed Cullen Curole Preparer ▶ South Central Planning & Development Commission Firm's EIN ▶ Firm's name **Use Only** Firm's address ▶ PO box 1870, Gray, LA 70359 985 665 1051 Phone no. √ Yes
No May the IRS discuss this return with the preparer shown above? (see instructions)

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Page	1
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Part	Statement of Program Service Accomplishments	. 8	
	Check if Schedule O contains a response to any question in this Part III	• •	. Ц
1	Briefly describe the organization's mission:		
	Generally, the organization's mission is to provide education, support and assistance to Louisiana commercial fisherm	an. In t	ne
	aftermath of the BP Oilspill, the initial task was to provide assistance to commercial fishermen negatively impacted by t	he clos	ing
	of fishing areas as a result of the oil spill. 254, \$500 Cash awards were distributed in December 2010 to fishermen nega	tively in	mpacte
	d. The program continued with new tasks of providing education, support and assistance related to new regulatory req	uireme	nts.
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	✓ No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	Yes	☐ No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measi	ured by
50.00	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report t	he am	ount of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ -0- including grants of \$ -0-) (Revenue \$	-0-)
10	Direct distribution of contributions to fishermen in the form of \$500 awards as best determined to be the neediest fisher	rmen	
	impacted by fishing closure areas due to the BP Oilspill. This program services operation ceased Dec 2010 with a distributuion of 254 \$500 awards		
	v		
4b	(Code:) (Expenses \$ -0- including grants of \$ -0-) (Revenue \$	-0-	. /
112221	Contributions from the public trickled in in 2011. Attention shifted to rebranding Louisiana Seafood as buyers were sea	ared tha	at the
	the product was in some way tainted. Fishermen were able to go back fishing, the price paid for their catch was substa	ntially	below
	prior year standards as the public was scared to purchase seafood. govt agencies continued testing programs and sea	food w	as
	deemed safe, but the season did not produce normal revenue due to low prices. FOF Directors participate with the Lot	uisiana	
	Seafood Promotion Board to assist in rebranding of the Louisiana/Gulf of Mexico Product		
		- 11	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$.)
4d	, –		
A .			
4e	Total program service expenses ▶ -0-		

Part	Checklist of Required Schedules		V	Ma
	** ** ** ** ** ** ** ** ** ** ** ** **		Yes	No
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		1
•	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	<u> </u>
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		-	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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		1
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 Revenue Procedure 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		✓
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? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
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		1
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
c	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? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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)? If "Yes," complete Schedule D, Part X.	11e		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	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, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		A.	
	fundraising, business, investment, and program service activities outside the United States, or aggregate			1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	-	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? 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 assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	1
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		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		√
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	✓

Part	M Checklist of Required Schedules (continued)			
201111111111111111111111111111111111111			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		√
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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 25	24a		√
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
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? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35a 35b	***************************************	1
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? If "Yes," complete Schedule R, Part VI	37		√
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	✓	

Form **990** (2011)

Pari	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
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 -0-			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in 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			١.
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
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?	5с		ļ
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?	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		900000	
	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		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			١.
	required to file Form 8282?	7с		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		/
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	See Action	/
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	on-obtained 6	000-0-0-0-0-0
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	Servandistation	V
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:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10-	Bergere.	
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		7
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. Enter the amount of reserves the organization is required to maintain by the states in which			
b	and the state of t			
_	<u> </u>			
C		14a		√
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		_
b	ii res, nas it liled a romi 720 to report triese payments fir No, provide an explanation in Schedule O .	ı TU		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	ee ins	tructi	ions.
Section	on 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 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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3	1	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
_	The state of the s	8a	1	
a b	The governing body?	8b		1
9	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		,
Conti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		nde l	V
Secu	on b. Policies (This Section & requests information about policies not required by the internal never	40 0	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	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 in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	√	√
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
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?			
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
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			
0	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ▶ Louisiana Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website □ Another's website ✓ Upon request	า 501(c)(3)s	only)
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or and financial statements available to the public during the tax year.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Cullen Curole, 5058 West Main Street, Gray, Louisiana 70359	of the		

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

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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Officer this box if ficitive the organization for	dily iciato	u org	uiiiz	utio	110	ompo	1100	teod arry ourror	1	,
					C)					
(A)	(B)	(do not check more than one		(D)	(E)	(F)				
Name and Title	Average			Reportable	Reportable	Estimated				
Name and Title	hours per					or/trus		compensation	compensation from	amount of
	week	5-00/07/10/25		0.0000			-	from	related	other
	(describe hours for	r di	ısti	Officer	ey	Bigh	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	rect	utic	<u>a</u>	amk	est o	ler	(W-2/1099-MISC)	(** 2/ 1000 141100)	organization
	organizations	우류	nal		Key employee	eom				and related
	in Schedule	Individual trustee or director	trus		ee	per				organizations
	O)	8	Institutional trustee			Highest compensated employee				
Market Control of the						ă.				
(1) Michael Voisin										
President/Chairman	5	✓		✓				-0-	-0-	-0-
(2) Harlin Pearce										
Vice President/Vice Chair	5	✓		1				-0-	-0-	-0-
(3) Marcy Nathan										
Secretary/Treasurer	1	1		1				-0-	-0-	-0-
(4) Ewell Smith										
Member/Director	5	1						-0-	-0-	-0-
(5) Stan Harris										
Member/Director	1	✓						-0-	-0-	-0-
(6)										
(7)										
										2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
(8)										
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(13)										
(14)										

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo <u>y</u>	/ees		nd H C)	lighe:	st C	ompensated E	mployees (c	ontinue 	d)
	(A)	(B)	(do n	ot ch	Pos	ition	e than o	one	(D)	(E)		(F)
	Name and title	Average hours per	box,	unles	s pe	rson	is both	n an	Reportable compensation	Reportable compensation from		Estimated amount of
		week (describe hours for related organizations in Schedule O)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organization (W-2/1099-Mi		other compensation from the organization and related organizations
(15)												
(16)												
(17)		-	-									
(18)												
(19)		•	<u> </u>									
(20)												
(21)		-										
(22)												
(23)		-								And a		
(24)												
(25)												
1b	Sub-total			•	•	<u></u>	<u> </u>	<u> </u>	-0-		-0-	-0-
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			•				A	-0- -0-		-0- -0-	-0- -0-
2	Total number of individuals (including but reportable compensation from the organization)	t not limited ization ▶ 0	to th	ose	list	ted -	above	e) w	ho received m	ore than \$10	0,000 d	of
3	Did the organization list any former of employee on line 1a? If "Yes," complete								oloyee, or high		sated	Yes No 3 ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ble (con	npei	nsatio	on a s,"	nd other comp complete Sch	pensation from	m the	4
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co ? If "Yes." o	 ompe	nsat <i>'ete</i>	ion Scł	froi nedi	m any ule J 1	un or s	related organiz such person	zation or indi	vidual	5 /
Section	on B. Independent Contractors	. 11 700, 0	,0,1,0,	010		,,,,,,						
1	Complete this table for your five highest compensation from the organization. Repyear.	compensat oort compe	ed ind nsatio	depe on fo	end or th	ent ne c	contr alenc	acto lar y	ors that receive rear ending wit	ed more thar In or within th	1 \$100,0 ne orga	000 of nization's tax
	(A) Name and business add	lress							(B) Description of s	ervices	C	(C) ompensation
N/A												
								-				
	Total number of independent contractor	vo finalisalis	og b	ı+ 1×	O+ 1	limi*	ad +) +h	nce listed sh	oval who		
2	received more than \$100,000 of compens							, Lji	n n	CAEL MINO		

Part	: VIII	Statement of Revenue				
		Check if Schedule O contains a response to any ques			(C)	<u>.</u>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Grants	1a b	Federated campaigns 1a Membership dues 1b				
s, G	С	Fundraising events 1c				
Gift	d	Related organizations 1d				
ıs, (е	Government grants (contributions) 1e				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above 11 32 65 1				
d O	g	Noncash contributions included in lines 1a-1f: \$				
a C	h	Total. Add lines 1a–1f ▶	32651			
ne		Business Code				
Program Service Revenue	2a					
e R	b					
ζįς	С					
Sel	d					
am,	е					
rogi	f	All other program service revenue .	_			
Δ.	g	Total. Add lines 2a–2f	0			
	3	Investment income (including dividends, interest, and other similar amounts)				
	224					
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties	Version Education (457a)		THE MARKETSON	
	60	Gross rents				
	6a	Less: rental expenses				
	b	Rental income or (loss)				
	c d	Net rental income or (loss)				
	7a	Gross amount from sales of (i) Securities (ii) Other	energy in the second of the second			
	14	assets other than inventory				
	b	Less: cost or other basis				
	13	and sales expenses .				
	С	Gain or (loss)				
	d	Net gain or (loss)				
ō		Gross income from fundraising				
venu	88	events (not including \$				
Other Revenue		of contributions reported on line 1c). See Part IV, line 18 a				
Cth	b	Less: direct expenses b				
		Net income or (loss) from fundraising events . ▶				
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a				
	b	Less: direct expenses b				
	С	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances a				
	b	Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a					
	b			500000000000000000000000000000000000000		
	С					
	d	All other revenue				
	е	Total. Add lines 11a–11d				
	12	Total revenue. See instructions	32451			

Part	VIII	Statement of Revenue			T		(5)
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns 1a	0				78988888
ıran	b	Membership dues 1b	0				
, G	С	Fundraising events 1c	62,642.52				
ar /	d	Related organizations 1d	0				
S, C	е	Government grants (contributions) 1e	0				
tion sr S	f	All other contributions, gifts, grants,					
ibu		and similar amounts not included above 1f	20,589.03				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f		83,231.55			
Program Service Revenue			Business Code				
€.	2a						
e E	b						
ζ̈	С						
Sel	d						
щ,	е						
ğ	f	All other program service revenue .		-0-			
<u> </u>	<u>g</u>	Total. Add lines 2a-2f		-0-			
	3	Investment income (including divide and other similar amounts)		-0-			
	_			-0-			
	4	Income from investment of tax-exempt bo		-0-			
	5	Royalties	(ii) Personal	-0-			
			(ii) i Orboniai				
	6a	Gross rents					
	b	Less: rental expenses					8 10 10 10 10 10 10 10 10
	C	Rental income or (loss) Net rental income or (loss)		-0-			
	d 7a	Gross amount from sales of (i) Securities	▶ (ii) Other	-0-			
	l a	assets other than inventory					
	b	Less: cost or other basis					
	"	and sales expenses .					
	_	Gain or (loss)					
	C d	Net gain or (loss)		-0-			*
	"	Net gain or (1033)					
ě	8a	Gross income from fundraising		\$437766.5.5.5			
Ē	"	events (not including \$					
ě		of contributions reported on line 1c).					
r.		See Part IV, line 18 a				1966988	
Other Revenu	h	Less: direct expenses b					
0		Net income or (loss) from fundraising	events . >	-0-		3 () () () () () () () () () (
		Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming acti	vities 🕨	-0-			
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve	entory 🕨	-0-			
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d	🚩	-0-			
	12	Total revenue. See instructions	>	83,231.55	-0-	-0-	-0-

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

FD	Check it Schedule O contains a respon				
	ot include amounts reported on lines 6b, 7b, o, 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 governments and organizations in the United States. See Part IV, line 21	-0-	-0-		
2	Grants and other assistance to individuals in	-0-			
6m	the United States. See Part IV, line 22	-0-	-0-		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	-0-	-0-		
4	Benefits paid to or for members	-0-	-0-		
5	Compensation of current officers, directors, trustees, and key employees	0	0-	-0-	-0-
		-0-	0-	-0-	-0-
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	-0-	-0-	-0-	-0-
7	Other salaries and wages	-0-	-0-	-0-	-0-
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	-0-	-0-	-0-	-0-
9	Other employee benefits	-0-	-0-	-0-	-0-
10	Payroll taxes	-0-	-0-	-0-	-0-
11	Fees for services (non-employees):				
а	Management	39,939.17	36,000.00	3,939.17	-0-
b	Legal	-0-	-0-	-0-	-0-
C	Accounting	-0-	-0-	-0-	-0-
d	Lobbying	-0-	-0-		-0-
e	Professional fundraising services. See Part IV, line 17 Investment management fees	-0-	-0-	-0-	-0-
f	Other	-0-	-0-	-0-	-0-
g 12	Advertising and promotion	-0-	-0-	-0-	-0-
13	Office expenses	-0-	0-0	-0-	-0-
14	Information technology	-0-	-0-	-0-	-0-
15	Royalties	-0-	-0-	-0-	-0-
16	Occupancy	-0-	-0-	-0-	-0-
17	Travel	-0-	-0-	0-	-0-
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	-0-	-0-	-0-	-0-
19	Conferences, conventions, and meetings .	-0-	-0-	-0-	-0-
20	Interest	-0-	-0-	-0-	-0-
21 22	Payments to affiliates	0-	-0-	-0-	-0-
23	Insurance	-0-	0-	-0-	-0-
24	Other expenses. Itemize expenses not covered				
24	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d				0	0
е	All other expenses	-0-	26,000,00	-0- 3939.17	-0-
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	39.939.17	36,000.00	3939.17	-0-
26	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)	-0-	-0-	-0-	-0-
	Comment of the second of the s	L.	A STATE OF THE PARTY OF THE PAR		- 000

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	41,582.5	1	84,874.88
	2	Savings and temporary cash investments	-0-	2	-0-
	3	Pledges and grants receivable, net	-0-	3	-0-
	4	Accounts receivable, net	-0-	4	-0-
	5	Receivables from current and former officers, directors, trustees, key			
	•	employees, and highest compensated employees. Complete Part II of			
		Schedule L	-0-	5	-0-
	6	Receivables from other disqualified persons (as defined under section			
	U	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
Ś		employees' beneficiary organizations (see instructions)	-0-	6	-0-
Assets	7	Notes and loans receivable, net	-0-	7	-0-
As	8	Inventories for sale or use	-0-	8	-0-
	9	Prepaid expenses and deferred charges	-0-	9	-0-
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a -0-			
	b	Less: accumulated depreciation 10b -0-	-0-	10c	-0-
	11	Investments—publicly traded securities	-0-	11	-0-
	12	Investments – other securities. See Part IV, line 11	-0-	12	-0-
	13	Investments - program-related. See Part IV, line 11	-0-	13	-0-
	14	Intangible assets	-0-	14	-0-
	15	Other assets. See Part IV, line 11	-0-	15	-0-
	16	Total assets. Add lines 1 through 15 (must equal line 34)	41,582.5		84,874.88
	17	Accounts payable and accrued expenses	36,000	17	-0-
	18	Grants payable	-0-	19	-0-
	19	Deferred revenue	-0-	20	-0-
	20	Tax-exempt bond liabilities	-0-	21	-0-
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		41	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			
III		Complete Part II of Schedule L	-0-	22	-0-
2		Secured mortgages and notes payable to unrelated third parties	-0-	23	-0-
	23	Unsecured notes and loans payable to unrelated third parties	-0-	24	-0-
	24	Other liabilities (including federal income tax, payables to related third			
	25	parties, and other liabilities not included on lines 17-24). Complete Part X	-0-		-0-
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	36,000		-0-
	_20	Organizations that follow SFAS 117, check here ▶ ✓ and complete			
es		lines 27 through 29, and lines 33 and 34.			
Balances	27	Unrestricted net assets	5582.50	27	84,874.88
Sals	28	Temporarily restricted net assets		28	
О	29	Permanently restricted net assets		29	
Ë	027/2024	Organizations that do not follow SFAS 117, check here ▶ ☐ and			
7		complete lines 30 through 34.			
Net Assets or Fund	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
let	33	Total net assets or fund balances		33	
ofine)	34	Total liabilities and net assets/fund balances		34	
					Form 990 (2011)

	-6	8
Page	- 1	1
, ago		-

Part	XI Reconciliation of Net Assets	¥			
	Check if Schedule O contains a response to any question in this Part XI	* * *		. :	<u> </u>
	·				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			31.55
2	Total expenses (must equal Part IX, column (A), line 25)	2			39.17
3	Revenue less expenses. Subtract line 2 from line 1	3			92.38
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		41,5	82.50
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
5.	column (B))	6		84,8	74.88
Part	XII Financial Statements and Reporting				
15 Control	Check if Schedule O contains a response to any question 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," exp	lain in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		✓_
b	Were the organization's financial statements audited by an independent accountant?		2b		✓_
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight			-21
	of the audit, review, or compilation of its financial statements and selection of an independent account	itant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, exp	lain in			
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	r were			
	issued on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		017	a provi	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f	orth in			
	the Single Audit Act and OMB Circular A-133?		3a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	go the	Contraction (
1,557	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits	3b		
all control on the control of			Forr	n 990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

OMB No. 1545-0047 2011

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Employer identification number Name of the organization 27-3143286 Friends of the Fishermen Foundation Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated b Type II e 🗌 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(i) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (iii) Type of organization (vi) Is the (vii) Amount of (iv) Is the organization (v) Did you notify (i) Name of supported (ii) EIN the organization in (described on lines 1-9 in col. (i) listed in your organization in col. support organization (i) organized in the col. (i) of your governing document? above or IRC section support? U.S.? (see instructions)) Yes Yes No Yes No No (A) (B) (C) (D) (E)

Page 2

Part	Support Schedule for Organiza	ations Descr	ibed in Secti	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of ar the tests lis	Part For It the	e organizatio lease comple	n falled to qua ete Part III \	any under
Casti	on A. Public Support	yuaniy unu	al the tests is	sted below, p	icase comple	to rait iii.j	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Calen	Gifts, grants, contributions, and	(a) 2001	(6) 2000	(6) 2555	(4) = 0.10	(-/ : :	(7)
ı	membership fees received. (Do not						
	include any "unusual grants.")					1	
2	Tax revenues levied for the						
_	organization's benefit and either paid						
	to or expended on its behalf					i	
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
•	each person (other than a				886888		
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount		*				
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support	(-) 0007	(F) 0000	T (a) 2000	(d) 2010	(e) 2011	(f) Total
•	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(u) 2010	(6) 2011	(i) Total
7	Amounts from line 4		-				
8	Gross income from interest, dividends,	<u></u>			-		
	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						
10	loss from the sale of capital assets						
	(Explain in Part IV.)				<i>,</i> .	, i	
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	. (see instructi	ions)			12	
13	First five years. If the Form 990 is for the	he organizatio	n's first, secon	id, third, fourth	ı, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	ere				x .	🕨 🗆
Secti	on C. Computation of Public Suppo	rt Percentag	je				
14	Public support percentage for 2011 (line	6, column (f) d	livided by line 1	11, column (f))		14	<u>%</u>
15	Public support percentage from 2010 Sc	hedule A, Part	II, line 14 .			15	%
16a	331/3% support test - 2011. If the organi	ization did not	check the box	on line 13, and			
	box and stop here. The organization qua	unes as a pub	liciy supported	rorganization			. P
þ	331/3% support test-2010. If the orga	nization did n	ot check a box	x on line 13 or	r 16a, and line	9 10 18 00 /370	
	check this box and stop here. The organ						. > [
17a	10%-facts-and-circumstances test—2	011. If the org	anization did n	ot check a box	on line 13, 16	oa, or 160, and	iirie 14 IS Evolaio in
	10% or more, and if the organization me Part IV how the organization meets the "	ets the "tacts-	-and-circumsta	inces test, cit et The organiz	eck tris box ar ation qualifies	ae a publich e	unnorted
	-	iacis-and-circ	umstances te	at. The Olyaniz	auon quannes	as a publicly s	upported . ► [
	organization						
b	10%-facts-and-circumstances test-2	010. If the org	anization did n	ot check a box	con line 13, 16	oa, 160, or 1/a	, and line on bore
	15 is 10% or more, and if the organiza Explain in Part IV how the organization n	ition meets th	e "racts-and-c	rcumstances"	iesi, CHECK II he organizatio	na DUX allU ST na cualifice se s	op nere. a publick
	supported organization		is-and-circums		no organizatio	n quannos as a	. ► F
40	Private foundation. If the organization d				a, or 17b, chec	k this box and	see
18	Flivate Inditioning II the organization of	is not bricon a	SON OIL INTO TO	.,	,		· -

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

(Complete only if you checked the box on line 9 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")				169642	83231	252873
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						
3	Gross receipts from activities that are not an						
	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						
3	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5				169642	83231	252873
6 7a	Amounts included on lines 1, 2, and 3						
Ia	received from disqualified persons .				0	0	0

b	Amounts included on lines 2 and 3 received from other than disqualified						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year				0	0	0
	Add lines 7a and 7b				0	0	0
C	Public support (Subtract line 7c from	ren estimation					
8	line 6.)						252873
Coati	on B. Total Support						
100000	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	(a) 2001	(6) 2000	(0) 2000	169642	83231	252873
0203050	Gross income from interest, dividends,						and a second for the second
10a	payments received on securities loans, rents,						
	royalties and income from similar sources .				o	0	0
la	Unrelated business taxable income (less						
b	section 511 taxes) from businesses						
	acquired after June 30, 1975				0	0	0
					0	0	0
С	Add lines 10a and 10b				· ·	<u> </u>	
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on				٥	0	0
000000					0	U	
12	Other income. Do not include gain or						
	loss from the sale of capital assets				o	0	0
40	(Explain in Part IV.)				U	· ·	
13	Total support. (Add lines 9, 10c, 11, and 12.)				169642	83231	252873
4.4	First five years. If the Form 990 is for the	o organizatio	n'e firet secon	d third fourth			
14	organization, check this box and stop he						
Casti	on C. Computation of Public Suppor			* * : : :			
7.00 Variati	Public support percentage for 2011 (line			13 column (fl)		15	%
15	Public support percentage for 2011 (line of Public support percentage from 2010 Sci					16	%
16 Socti	on D. Computation of Investment In			* * * * *		1.01	70
	Investment income percentage for 2011 (v line 13 colu	mn (fl)	17	%
17	Investment income percentage for 2011 (Investment income percentage from 2010)					18	%
18	33 ¹ / ₃ % support tests—2011. If the organ	ization did no	t check the ho	von ling 14 a	nd line 15 is m		
19a	17 is not more than 331/3%, check this box	and stop here	The organizati	ion qualifies as	a publicly suppr	orted organization	on . ▶ □
4	33 ¹ / ₃ % support tests—2010. If the organiz	ration did not	shock a hoven	line 14 or line	19a and line 16	is more than 3	3¹/₃% and
b	line 18 is not more than 331/3%, check this	hov and ctor!	nere The organ	iization qualifice	s as a nuhlicly e	ipported organi	zation $ ightharpoonup$
	Private foundation. If the organization di	id not check a	boy on line 14	10a or 10h	check this hav	and see instru	ctions >
20	Private roundation. If the organization of	u not check a	DOX OIT III 6 14	, 130, 01 130, 0	SHOOK HIIS DOX	and Joo monuc	

Part V	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).					
N/A						
~~~~						
	,					
y yyy arh dag bah tah ani ani ani ani ani ani ani ani ani						

Name of organization Friends of the Fishermen Foundation Employer identification number 27-3143286

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Princeton, NJ 08543-7907	φ 2000.00	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Protect our Coastline.Org  PO box 5545  Bossier City, La 71171	\$\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	United Way/New Orleans Hornets  2515 Canal Street  New Orleans, LA70119	\$ \$59,142.00	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Employer identification number

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
	\$					
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
	\$					
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
	\$					
	Description of noncash property given  (b)  Description of noncash property given	(b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  \$  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  \$  Description of noncash property given  (c) FMV (or estimate) (see instructions)  \$  Description of noncash property given  (c) FMV (or estimate) (see instructions)  \$  Description of noncash property given  (c) FMV (or estimate) (see instructions)  \$  Description of noncash property given  \$  FMV (or estimate) (see instructions)  \$  Description of noncash property given  \$  FMV (or estimate) (see instructions)  \$  Description of noncash property given  \$  FMV (or estimate) (see instructions)				

Part III

Employer identification number

Part III	Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)						
	Use duplicate copies of Part III if ad	ditional space is nee	ded.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Trans		nship of transferor to transferee			
	Transferee's name, address, a	and ZIP + 4	Relatio	nship of transieror to transieree			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
-		(e) Trans	fer of gift				
	Transferee's name, address, a	and ZIP + 4	Relatio	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, a	and ZIP + 4	Relatio	enship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
-	(e) Transfer of gift						
	Transferee's name, address,	and ZIP + 4	Relatio	onship of transferor to transferee			

### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Note.** Terms in **bold** are defined in the *Glossary* of the Instructions for Form 990.

### Purpose of Schedule

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

- Form 990-PF, Return of Private Foundation, Part I, line 1;
- Form 990, Return of Organization Exempt from Income Tax, Part VIII, Statement of Revenue, line 1; or
- Form 990-EZ, Short Form Return of Organization Exempt from Income Tax, Part I, line 1.

### Who Must File

Every organization must complete and attach Schedule B to their Form 990, 990-EZ, or 990-PF, unless it certifies that it does not meet the filing requirements of this schedule by taking the following action:

- Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2, or
- Checking the box on
  - Form 990-EZ, line H, or
  - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms.

If an organization is not required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

# **Accounting Method**

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, Financial Statements and Reporting, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

### **Public Inspection**

- Schedule B is open to public inspection for an organization that files Form 990-PF.
- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.

• For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors are not required to be made available for public inspection. All other information, including the amount of contributions, the description of noncash contributions, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it should not include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that do not require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

### Contributors to be Listed on Part I

A contributor (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report **governmental units** as contributors.

#### Contributions

Contributions reportable in Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions do not include fees for the performance of services. See the instructions for Form 990, Part VIII, line 1, for a fuller discussion of what constitutes contributions.

### **General Rule**

Unless the organization is covered by one of the *Special Rules* below, it must list in Part I every contributor who, during the year, gave the organization directly or indirectly, money, **securities**, or any other type of property that total \$5,000 or more for the organization's **tax year**. In determining the total amount, separate and independent gifts of less than \$1,000 can be disregarded.

### Special Rules

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h, or Form 990-EZ, line 1.

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that were not for an exclusively religious, charitable, etc., purpose, list in Part I each contributor who contributed \$5,000 or more during the tax year, as described under the General Rule, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

However, if a section 501(c)(7), (8), or (10) organization did not receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently was not required to complete Parts I through III with respect to these contributions, it need only check the third *Special Rules* box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

## **Specific Instructions**



Do not attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II,

and III of Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part.

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number consecutively. In column (b), enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization does not know the donor's identity. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a cash contribution came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an **employee's** cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "noncash" box for any contribution of property other than cash during the tax year, and complete Part II of this schedule.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that are not reported on Form 8872, Political Organization Report of Contributions and Expenditures, do not need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the noncash contribution received by the organization during the tax year. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, marked quotations for securities) by listing its fair market value (FMV). If the organization immediately sells securities contributed to the organization (including through a broker or agent), the contribution still must be reported as a gift of property (rather than cash) in the amount of the net proceeds plus the broker's fees and expenses. See the instructions to Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property is not immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any qualified conservation contributions and contributions of conservation easements listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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 990-EZ.

27-3143286 Friends of the Fisherman Foundation In the aftermath of the BP Oilspill, Friends of the Fishermen distributed 254 - \$500 awards to fishermen determined to be needy after a season/year where most southeast Louisiana fishing areas were closed for most of the year. FOF wanted to supply these award to those certified Louisiana commercial who's incomes were impacted & who were not then compensated by the BP Vessels of Opportunity Program. This process proved to be difficult as the Louisiana Wildlife and Fisheries Dept hold very confidential the personal data of Louisiana fishermen. The LDWF database was eventually made available, but it did not separate certified fishermen from part-time weekend fishermen who had other sources of revenue. FOF prepare and mailed a survey to fishermen to help determine the needlest. This process took time and was labor intensive. With no staff, South Central Planning and Development Commission (FOF's fiscal agent) staff prepared, mailed and collected the data and with the directives of the Board of Directors, they created a list and made awards. The award went out in Dec 2010 and nearly wiped out the coffers of the Foundation. In 2011, the Board decided to allow contributions to build before initiating another service program. By year end, contributions were merely half of 2010 and a second distribution did not occur. (Program Service ceased) part VI 3 - FOF contracts with South Central Planning and Development Commission to serve as agent and SCPDC staff operate as staff collecting mail, donations, accounting and Administrator Cullen Curole serves as the Registered Agent for Service of Process. Part VI 8 - SCPDC staff prepare agendas, minutes and financial reports which are reviewed and approved by FOF Board/Officers.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
	1. (2.11)
·	
•	



### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

### Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Do not use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

### Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization is not required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

# **Specific Instructions**

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return is not filed by the due date (including any extension granted), use a separate attachment to provide a statement giving the reasons for not filing on time. Do not use this schedule to provide the late-filing statement.

Amended return. If the organization checked the Amended return box on Form 990, Heading, item B, or Form 990-EZ, Heading, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a) but "No" to line H(b), use a separate attachment to list the name, address, and EIN of each affiliated organization

included in the group return. Do not use this schedule. See the instructions for Form 990, I. Group Return.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

- 1. Part III, Statement of Program Service Accomplishments.
  - a. "Yes" response to line 2.
  - b. "Yes" response to line 3.
  - c. Other program services on line 4d.
- 2. Part V. Statements Regarding Other IRS Filings and Tax Compliance.
  - a. "No" response to line 3b.
  - b. "Yes" or "No" response to line 13a.
  - c. "No" response to line 14b.
- Part VI, Governance, Management, and Disclosure.
- a. Material differences in voting rights among members of the governing body in line 1a.
- b. Delegation of governing board's authority to executive committee.
- c. "Yes" responses to lines 2 through 7b.
- d. "No" responses to lines 8a, 8b, and 10b.
  - e. "Yes" response to line 9.
- f. Description of process for review of Form 990, if any, in response to line 11b.
  - g. "Yes" response to line 12c.
- h. Description of process for determining compensation in response to lines 15a and 15b.
- If applicable, in response to line 18, an explanation as to why the organization did not make any of Forms 1023, 1024, 990, or 990-T publicly available.
- i. Description of public disclosure of documents in response to line 19.
- 4. Part VII, Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors.
- Estimate of average hours per week, if any, devoted to related organizations.
- b. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.
- c. Description of reasonable efforts undertaken in regard to column (E).

- 5. Explanation for Part IX, Statement of Functional Expenses, line 24e (all other expenses), if amount in Part IX, line 24e. exceeds 10% of amount in Part IX, line 25 (total functional expenses).
- 6. Part XI, Reconciliation of Net Assets. Explain any other changes in net assets or fund balances reported on line
- 7. Part XII. Financial Statements and Reporting.
- a. Change in accounting method or description of other accounting method used on line 1.
- b. Change in committee oversight review from prior year on line 2c.
  - c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions:

- 1. Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.
- a. Description of other revenue, in response to line 8.
- b. List of grants and similar amounts paid, in response to line 10.
- c. Description of other expenses, in response to line 16.
- d. Explanation of other changes in net assets or fund balances, in response to line 20.
  - 2. Part II. Balance Sheets.
- a. Description of other assets, in response to line 24.
- b. Description of total liabilities, in response to line 26.
- 3. Description of other program services in response to Part III. Statement of Program Service Accomplishments, line 31.
  - 4. Part V, Other Information.
  - a. "Yes" response to line 33.
  - b. "Yes" response to line 34.
- c. Explanation of why organization did not report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Do not include on Schedule O (Form 990 or 990-EZ) any social security number(s), CAUTION because this schedule will be

made available for public inspection.