### **HURRICANE IDA EXTENSION**

EXTENDED TO NOVEMBER 15, 2021

Return of Organization Exempt From Income Tax
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.

		f the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and	•	•	Open to Public Inspection
				ending	it information.	
_	Check if applicable	C Name o	f organization		D Employer identificat	tion number
	Addres	SS BATC	N ROUGE AREA FOUNDATION			
	Name change		usiness as		72-6030391	
	Initial return			Room/suite		-
	Final	100	NORTH STREET, SUITE 900	1100m/Junt	225-387-61	26
	return/ termin- ated		town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	35,184,310.
	Ameno		N ROUGE, LA 70802		H(a) Is this a group retu	
	Applic		and address of principal officer: JOHN DAVIES		for subordinates?	
	pendin		ORTH STREET, SUITE 900, BATON ROUG	E, LA		
ī	Tax-exe		X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1)		<b>⊣</b> `′	
			BRAF.ORG		H(c) Group exemption r	
K	Form of	organization:	X Corporation Trust Association Other ▶	L Yea	r of formation: 1964 M S	
	art I	Summary				
	1	Briefly descri	be the organization's mission or most significant activities: $ { m \underline{THE}} $	FOUND	ATION UNITES H	UMAN &
Č	<u> </u>	FINANCI	AL RESOURCES TO ENHANCE QUALITY OF	LIFE	IN SOUTHERN I	LOUISIANA
Covernonce	2	Check this bo	if the organization discontinued its operations or dispos	sed of mor	e than 25% of its net assets	S.
9	3	Number of vo	ting members of the governing body (Part VI, line 1a)		3	23
		Number of in	dependent voting members of the governing body (Part VI, line 1b)			21
Activitios &	5 5	Total number	of individuals employed in calendar year 2020 (Part V, line 2a)		5	27
;	6	Total number	of volunteers (estimate if necessary)		6	60
5	7 a				7a	-54,364.
_	<u> b</u>	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
				<u> </u>	Prior Year	Current Year
9	8   8		and grants (Part VIII, line 1h)		29,102,418.	28,575,218.
9	9	•	ice revenue (Part VIII, line 2g)		247,094.	0.
Dovonio	10		come (Part VIII, column (A), lines 3, 4, and 7d)		6,144,234.	6,347,236.
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		102,737.	108,104.
_			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		35,596,483.	35,030,558.
	1		milar amounts paid (Part IX, column (A), lines 1-3)		28,249,872.	26,391,126. 0.
	1	•	to or for members (Part IX, column (A), line 4)		4,068,508.	3,801,271.
ģ	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Evnonsee	2 10a		undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25)  510, 11	56	0.	<u> </u>
, ,	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		4,106,916.	3,910,882.
_	''		es (Fart IX, Column (A), lines 11a-11d, 111-24e) es. Add lines 13-17 (must equal Part IX, column (A), line 25)		36,425,296.	34,103,279.
	1	•	expenses. Subtract line 18 from line 12		-828,813.	927,279.
-r		Ticveriae iess	expenses. Oubtract line to from line 12	В	Beginning of Current Year	End of Year
Net Assets or	일 <b>20</b>	Total assets (	Part X, line 16)			293,247,071.
Ass	21		s (Part X, line 26)		8,713,517.	7,482,116.
Net	22		fund balances. Subtract line 21 from line 20			285,764,955.
	art II	Signatur				
Un	der pena	Ities of perjury,	I declare that I have examined this return, including accompanying schedules	s and staten	nents, and to the best of my kn	owledge and belief, it is
tru	e, correc	t, and complete	. Declaration of preparer (other than officer) is based on all information of wh	nich prepare	er has any knowledge.	
Sig	gn	Signatu	e of officer		Date	
Не	re	<b></b>				
		Type or	print name and title			
		Print/Type pre	parer's name Preparer's signature	,	Date Check	PTIN
Pai			parer's name Preparer's signature BARLOW  Preparer's signature	9W	12/17/2021 if self-employed	P01959439
	parer	Firm's name	▶ KPMG LLP		Firm's EIN ▶ 13	3-5565207
Us	Only	Firm's addres	301 MAIN STREET, SUITE 2150			
_			BATON ROUGE, LA 70801		Phone no. 225 -	344-4000
Ma	y the IF	RS discuss th	s return with the preparer shown above? See instructions			X Yes No

#### Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit <a href="https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits">https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits</a>.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts

Autom	atic 6-Month Extension of Time. Only subm	it origina	al (no copies needed).			
All corpo	orations required to file an income tax return other than Fo	rm 990-T	(including 1120-C filers), partnership	s, REMICs	s, and trusts	
must us	e Form 7004 to request an extension of time to file income	e tax retur	ns.			
Type or	Name of exempt organization or other filer, see instruc	ctions.		Taxpayer	identification numb	er (TIN)
•	BATON ROUGE AREA FOUNDATION	Ī			72-603039	1
File by the due date fo filing your return. See	Number, street, and room or suite no. If a P.O. box, set 100 NORTH STREET, SUITE 900		ions.			
instructions	City, town or post office, state, and ZIP code. For a for BATON ROUGE, LA 70802	reign add	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	a separa	te application for each return)			0 1
Applicat	tion	Return	Application			Return
Is For		Code	Is For			Code
Form 99	0 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99	0-BL	02	Form 1041-A			08
Form 47	20 (individual)	03	Form 4720 (other than individual)			09
Form 99	0-PF	04	Form 5227			10
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	0-T (trust other than above)	06	Form 8870			12
Telep  If the	brooks are in the care of   100 NORTH STREE  thone No.   225-387-6126  organization does not have an office or place of business is for a Group Return, enter the organization's four digit 0  If it is for part of the group, check this box	in the Uni	Fax No. ▶ited States, check this box	If this is fo	r the whole group, c	
the	equest an automatic 6-month extension of time untile organization named above. The extension is for the orga X calendar year 2020 or tax year beginning the tax year entered in line 1 is for less than 12 months, ch Change in accounting period	anization's	return for:	e the exem	npt organization retu ·	rn for
	this application is for Forms 990-BL, 990-PF, 990-T, 4720, y nonrefundable credits. See instructions.	or 6069, 6	enter the tentative tax, less	3a	\$	0.
b If t	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and			
es	timated tax payments made. Include any prior year overpa	ayment all	owed as a credit.	3b	\$	0.
с Ва	alance due. Subtract line 3b from line 3a. Include your page	yment witl	n this form, if required, by			
us	ing EFTPS (Electronic Federal Tax Payment System). See	instructio	ns.	3с	\$	0.
Caution instruction	: If you are going to make an electronic funds withdrawal ons.	(direct del	oit) with this Form 8868, see Form 8	453-EO an	d Form 8879-EO for	payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	BATON ROUGE AREA FOUNDATION UNITES HUMAN AND FINANCIAL RESOURCES TO
	ENHANCE THE QUALITY OF LIFE IN SOUTHERN LOUISIANA. TO ACHIEVE OUR
	MISSION, WE: SERVE DONORS TO BUILD THE ASSETS THAT DRIVE INITIATIVES
	AND SOLUTIONS; ENGAGE COMMUNITY LEADERS TO DEVELOP APPROPRIATE
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X 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 measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 28,315,206 • including grants of \$ 26,391,126 • ) (Revenue \$)
	SERVING THE BATON ROUGE AND SOUTH LOUISIANA AREA BY FUNDING VARIOUS
	NONPROFITS, PROGRAMS, AND PROJECTS BENEFITTING THE NEEDY AND THE
	COMMUNITY AS A WHOLE.
4b	(Code:) (Expenses \$1,528,268 • _ including grants of \$) (Revenue \$)
75	SPONSORING AND ADMINISTERING A NUMBER OF PROGRAMS AND PROJECTS THAT ARE
	DEDICATED TO PROVIDING THE APPROPRIATE RESPONSE TO EMERGING COMMUNITY
	NEEDS SUCH AS COORDINATING PROCESSES TO IMPROVE THE EDUCATION OF
	STUDENTS IN EAST BATON ROUGE PARISH; HOSTING THE 10X WATER SUMMIT THAT
	GATHERED SCIENTISTS, POLICYMAKERS, AND ENGINEERS TO DISCUSS HOW TO LIVE
	WITH TOO LITTLE AND TOO MUCH WATER AND SHARE THIS KNOWLEDGE AROUND THE
	WORLD; PLANNING AND DEVELOPING A MENTAL HEALTH AND SUBSTANCE ABUSE
	CRISIS CENTER TO HELP FOLKS WHO SUFFER FROM MENTAL ILLNESS AND/OR
	ADDICTIONS TO AVOID JAIL; SUPPORTING LIGO-LIVINGSTON (LASER
	INTERFEROMETER GRAVITATIONAL-WAVE OBSERVATORY) WHICH STUDIES AND
	DETECTS GRAVITATIONAL WAVES BY MEASURING DISTORTIONS IN SPACE AND TIME;
	AND THE ONGOING ACTIVITIES OF THE WATER INSTITUTE OF THE GULF.
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 29,843,474.
	Form <b>990</b> (2020)

Form 990 (2020) BATON ROUGE AREA FOUNDATION
Part IV Checklist of Required Schedules

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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	X	
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		X
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	X	
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	X	
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?			
	If "Yes," complete Schedule D, Part IV	9		<u> X</u>
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	X	
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,		7.7	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		37	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
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? If "Yes," complete Schedule D, Part VIII	11c		X
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	Х	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes." <i>complete</i>	11f	Λ	_
128		12a		x
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b		174		
~	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	14b	Х	
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	X	
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	X	
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	17		X
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	X	
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		X
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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	21	X	

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Form **990** (2020)

Form	990 (2020) BATON ROUGE AREA FOUNDATION 72-60	<u> 30391</u>	Р	age 4
Pai	rt IV 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	Х	
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	Х	
24 a	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			
		24a		x
h	Schedule K. If "No," go to line 25a	24b		
		240		
С	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		
	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			\ <sub>3,7</sub>
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
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? If "Yes," complete Schedule L, Part II	26		X
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		Х
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
-	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	. 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II, III, or IV, and	00		
J-T		34	х	
25.0	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. —	X	
		354	22	
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256	х	
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		- 22	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
	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			<b>.</b>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		37	
Dai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	 T	
		7.7	Yes	No
		37		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	2		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

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1c X Form 990 (2020)

(gambling) winnings to prize winners?

#### BATON ROUGE AREA FOUNDATION 72-6030391 Page 5 Form 990 (2020) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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 Х 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) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х **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)? X 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? 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? 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? Х b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). Х 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 Х If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the Х sponsoring organization have excess business holdings at any time during the year? 8

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 11a 11b 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state?

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

c Enter the amount of reserves on hand

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation on Schedule O

14b

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O

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?

If "Yes," see instructions and file Form 4720, Schedule N.

Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Form **990** (2020)

16

Х

X

Х

X

9a

10a

032005 12-23-20

9

10

Sponsoring organizations maintaining donor advised funds.

Section 501(c)(7) organizations. Enter:

Did the sponsoring organization make any taxable distributions under section 4966?

Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

a Initiation fees and capital contributions included on Part VIII, line 12

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 on Schedule 0.  Enter the number of voting members included on line 1a, above, who are independent  1b			
b	, , , , , , , , , , , , , , , , , , , ,			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	2	X	
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision		- 21	
3		3		Х
4	of officers, directors, trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
	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	Х	
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
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	v	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
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	X	
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 organization's		37	
800	exempt status with respect to such arrangements? tion C. Disclosure	16b	X	
	List the states with which a copy of this Form 990 is required to be filed ►AL, AK, AR, CA, CT, DC, FL, GA, HI	TT.	кc	KA
17 10	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3):			
18	for public inspection. Indicate how you made these available. Check all that apply.	orny)	avana	DIE
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l financ	cial	
	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			
	DEBORAH PICKELL - 225-387-6126			
	100 NORTH STREET, SUITE 900, BATON ROUGE, LA 70802			
022006	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2020)

## 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

X

#### 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.

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

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

(A) Name and title	(B) Average hours per week	box	not c , unle:	Pos heck i ss per	more rson i	than o	n an	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JOHN G. DAVIES PRESIDENT & CEO	35.00	х		х				893,153.	100,000.	58,607.
(2) JOHN M. SPAIN	45.00								•	•
EXECUTIVE VICE PRESIDENT	1.00			Х				420,474.	0.	49,337.
(3) DEBORAH PICKELL	45.00									
DIRECTOR OF FINANCE	1.00				Х			227,069.	0.	58,460.
(4) EDMUND J. GIERING, IV	40.00									
ASSISTANT SECRETARY	1.00			Х				181,331.	0.	51,055.
(5) MUKUL VERMA	40.00									
DIRECTOR OF COMMUNICATIONS	0.00					Х		133,112.	0.	26,457.
(6) ELIZABETH HUTCHISON	40.00									
DIRECTOR OF PHILANTHROPIC SVCS	0.00					X		109,540.	0.	24,104.
(7) RAYMOND PRINCE	40.00									
FINANCIAL OPERATIONS MANAGER	0.00					Х		107,290.	0.	25,058.
(8) LAUREN C. JUMONVILLE	40.00	1								
DIRECTOR OF CIVIC LEADERSHIP	0.00					X		101,830.	0.	39,451.
(9) COURTNEY GUSTIN	40.00							0.5 = 5.5		
CONTROLLER	0.00					X		96,765.	0.	37,374.
(10) WILLIAM E. BALHOFF	2.00	ļ								
CHAIR	0.00	Х		Х				0.	0.	0.
(11) JENNIFER EPLETT REILLY	1.00								•	•
VICE-CHAIR	0.00	Х		Х				0.	0.	0.
(12) DONNA D. FRAICHE	1.00	3,7		,,					0	0
SECRETARY	0.00	X		Х				0.	0.	0.
(13) FRANCIS C. JUMONVILLE, JR.	2.00	v		х					0	0
TREASURER	1.00	X		Α				0.	0.	0.
(14) S. DENNIS BLUNT DIRECTOR	1.00	Х						0.	0.	0.
(15) ANNETTE D. BARTON		Δ						0.	0.	<u> </u>
DIRECTOR	1.00	v						0.	0.	0.
(16) THOMAS J. ADAMEK	1.00	^				$\vdash$		0.	0.	<u>U•</u>
DIRECTOR	0.00	y						0.	0.	0.
(17) B. EUGENE BERRY, MD	1.00	-22	$\vdash$	<del>                                     </del>	$\vdash$			0.	0.	<u></u>
DIRECTOR		Х						0.	0.	0.
	1 0.00	-22							<b>J</b> •	Form <b>990</b> (2020)

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Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloye	ees,	and	Hiç	ghes	t C	compensated Employee	s (continued)				
(A)	(B)		(C)					(D)	(E)		(F)		
Name and title	Average	(-1-	Position (do not check more than one					Reportable	Reportable		Estimate	ed	
	hours per	box,	, unles	ss per	son i	s both	n an	compensation	compensation		amount	of	
	week		cer an	d a di	irecto	r/trus	tee)	from	from related		other		
	(list any	ector						the	organizations		mpensa		
	hours for	or dir	e e			ated		organization	(W-2/1099-MISC	′ I	from th		
	related organizations	ıstee	truste		eo	bens		(W-2/1099-MISC)			ganizat		
	below	ual trı	ional		ploye	t com					nd relat ganizati		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			01	yarıızatı	0115	
(18) RODNEY C. BRAXTON	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(19) PRESTON J. CASTILLE, JR.	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(20) HELENA R. CUNNINGHAM	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(21) BEVERLY M. HAYDEL	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(22) JEFFREY W. KOONCE	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(23) CHARLES W. LAMAR, III	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(24) TODD S. MANUEL	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(25) LINDA O. POSNER	1.00												
DIRECTOR	0.00	Х						0.		0.		0.	
(26) MATTHEW C. SAURAGE	1.00												
DIRECTOR	0.00	X						0.		0.		0.	
1b Subtotal								2,270,564.	100,00		59,9		
c Total from continuation sheets to Part VII								0.		0.		0.	
d Total (add lines 1b and 1c)							<u> </u>	2,270,564.	100,00	0. 30	59,9	03.	
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable			^	
compensation from the organization												9	
0 Dilli											Yes	No	
3 Did the organization list any <b>former</b> officer,	•	-	•	•	•	•	Ŭ		•			v	
line 1a? If "Yes," complete Schedule J for so										3		X	
4 For any individual listed on line 1a, is the su	•		•					•	· ·	_	37		
and related organizations greater than \$150										4	X		
5 Did any person listed on line 1a receive or a												37	
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedule	e J fo	or su	ıch r	oers	on .				5		Х	
Complete this table for your five highest core	mpensated ind	lene	nder	nt cc	ntra	acto	rs th	nat received more than \$	100 000 of compe	nsation t	rom		
the organization. Report compensation for t											. 5		
(A)	_							(B)			(C)	_	
Name and business								Description of s	ervices	Comp	ensatio	n	
KPMG, LLP, 301 MAIN ST, S	UITE 21	50	,	BA'	TO:	N							

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
KPMG, LLP, 301 MAIN ST, SUITE 2150, BATON		105 440
·	TAX SVCS/FIN. CONSUL	105,440.
STELLAR TECHNOLOGY SOLUTIONS, LLC		
612 MAIN ST, STROUDSBURG, PA 18360	IT SOFTWARE PROVIDER	103,125.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	

\$100,000 of compensation from the organization ► 2

SEE PART VII, SECTION A CONTINUATION SHEETS

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	UGE AREA								72-603	0391
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee			lighe	est (		ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	١,,			Position call that apply)			Reportable	Reportable compensation	Estimated
	hours	(cl						compensation from		amount of other
	per week					/ee		the	from related organizations	compensation
	(list any	ector				oldme		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee.			sated 6		(W-2/1099-MISC)		organization
	related organizations	rustee	ıl trust		,ee	m pen s				and related organizations
	below	Individual trustee or director	Institutional trustee	ia ia	Key employee	Highest compensated employee	er			organization o
	line)	Indiv	Instit	Officer	Key 6	High	Former			
(27) NICKLOS S. "NICK" SPEYRER, JR.	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(28) MARK C. DRENNAN	1.00							_	_	_
DIRECTOR	0.00	Х						0.	0.	0.
(29) PERRY J. FRANKLIN	1.00									•
DIRECTOR	0.00	Х						0.	0.	0.
(30) ROSE J. HUDSON DIRECTOR	1.00	X						0.	0.	0 .
(31) JEFFREY ZEHNDER	1.00	Λ						0.	0.	0 .
DIRECTOR	0.00	Х						0.	0.	0 .
		•								
		•								
		L		L						
	1									

Form 990 (2020) BATON R
Part VIII Statement of Revenue

		Check if Schedule O contains a respons	e or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					lunction revenue	business revenue	sections 512 - 514
ည လ	1 8	a Federated campaigns1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b					
ي ق		c Fundraising events 1c	71,506.				
fts,		d Related organizations 1d	1,168,967.				
nila		e Government grants (contributions)	. , ,				
Sin		f All other contributions, gifts, grants, and					
uti je		similar amounts not included above	27,334,745.				
SE			4,106,890.				
no nd		\ <u></u>	1,100,050.	28,575,218.			
OB		n Total. Add lines 1a-1f	Business Code	20,373,210:			
	•	_	Business Code				
ice	2 6		-				
erv ue		o					
am Ser							
jrar Re	•	d	-				
Program Service Revenue		Ð	-				
_	1	f All other program service revenue					
_		g Total. Add lines 2a-2f					
	3	Investment income (including dividends, inte		4 504 460		F4 264	4 550 000
		other similar amounts)		4,704,469.		-54,364.	4,758,833.
	4	Income from investment of tax-exempt bond					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	<b>a</b> Gross rents <b>6a</b> 239,67	_				
	ŀ	b Less: rental expenses 6b 137,95					
		Rental income or (loss) 6c 101,72	7.				
	•	d Net rental income or (loss)	<b>.</b>	101,727.			101,727.
	7 a	a Gross amount from sales of (i) Securities	``'				
		assets other than inventory 7a 1,642,76	7.				
	ŀ	b Less: cost or other basis					
ne		una careo experiece	0.				
ther Revenue		c Gain or (loss) <b>7c</b> 1,642,76					
Be		d Net gain or (loss)	<b>.</b>	1,642,767.			1,642,767.
þer	8 8	a Gross income from fundraising events (not					
ᅙ		including \$ 71,506. of					
		contributions reported on line 1c). See					
		· · · · · · · · · · · · · · · · · · ·	3a 22,179.				
			3b 15,802.				
		Net income or (loss) from fundraising events		6,377.			6,377.
	9 a	a Gross income from gaming activities. See					
			Эа				
	ŀ	b Less: direct expenses	9b				
	(	Net income or (loss) from gaming activities	<b>_</b>				
	10 a	a Gross sales of inventory, less returns					
		and allowances1	0a				
	ŀ	b Less: cost of goods sold1	0b				
		Net income or (loss) from sales of inventory	<b>&gt;</b>				
<b>"</b>			Business Code				
ons	11 a	a					
ane	ŀ	<u> </u>					
Miscellaneous Revenue	(						
Aisc B	(	d All other revenue					
_		Total. Add lines 11a-11d					
	12	Total revenue. See instructions	<b>•</b>	35,030,558.	0.	-54,364.	6,509,704.

#### 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).

Do i	Check if Schedule O contains a responder include amounts reported on lines 6b,	(A)	(B)	(C)	<b>(D)</b> Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	22 752 052	22 752 052		
	and domestic governments. See Part IV, line 21	22,753,852.	22,753,852.		
2	Grants and other assistance to domestic	2 014 004	2 014 004		
	individuals. See Part IV, line 22	3,214,824.	3,214,824.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	400 450	400 450		
	individuals. See Part IV, lines 15 and 16	422,450.	422,450.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 040 515	772 020	004 060	171 (10
	trustees, and key employees	1,849,517.	773,030.	904,868.	171,619
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 422 766	F01 104	0.41 0.50	00 700
7	Other salaries and wages	1,432,766.	501,124.	841,850.	89,792
8	Pension plan accruals and contributions (include	270 006	140 763	200 000	26 425
_	section 401(k) and 403(b) employer contributions)	379,096.	142,763.	209,908.	26,425
9	Other employee benefits	-24,204. 164,096.	-9,396 <b>.</b>	-12,880.	-1,928 13,069
0	Payroll taxes	104,090.	63,701.	87,326.	13,069
1	Fees for services (nonemployees):				
	Management	33,466.	23,164.	4 002	E 200
b	Legal	165,009.	23,104.	4,903.	5,399
	Accounting		35,484.	103,009.	
	Lobbying	35,484.	33,404.		
e	Professional fundraising services. See Part IV, line 17	1,003,498.		1,003,498.	
f	Investment management fees	1,003,490.		1,003,490.	
g	Other. (If line 11g amount exceeds 10% of line 25,	120,260.	59,054.	20,663.	10 513
	column (A) amount, list line 11g expenses on Sch 0.)	23,290.	33,034.	20,003.	40,543 23,290
2	Advertising and promotion	201,053.	50,454.	71,025.	79,574
13	Office expenses	149,676.	26,475.	109,525.	13,676
4   <i>E</i>	Information technology	140,070.	20,475.	105,525.	13,070
15 16	Royalties	391,798.	164,191.	197,978.	29,629
	Occupancy	17,972.	14,099.	3,567.	306
7  8	Travel  Payments of travel or entertainment expenses	11,512.	14,000.	3,3074	300
0	· -y				
9	for any federal, state, or local public officials  Conferences, conventions, and meetings	47,966.	13,168.	29,894.	4,904
9 20		47,500.	13,100.	23,034.	1,501
21	Payments to affiliates				
2	Depreciation, depletion, and amortization	89,192.	34,624.	47,465.	7,103
3		62,369.	24,211.	33,191.	4,967
	Other expenses. Itemize expenses not covered	02,303.	24,211.	33,131.	±,501
24	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 0.)				
_	PROJECT EXPENSES	1,528,269.	1,528,269.		
a b	DUES AND SUBSCRIPTIONS	21,826.	7,544.	12,494.	1,788
С	OTHER EXPENSES	19,718.	389.	19,329.	1,700
d	UBI TAXES	36.	307.	36.	
	All other expenses	50.		30.	
е 25	Total functional expenses. Add lines 1 through 24e	34,103,279.	29,843,474.	3,749,649.	510,156
:5 :6	Joint costs. Complete this line only if the organization	01,100,210.		3 , , 13 , 0 13 4	310,130
.0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	oudoational campaign and fundraising solicitation.				

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Part X | Balance Sheet

Pai	rt X	Balance Sheet					
Check if Schedule O contains a response or note to any line in this Part X							
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			9,680,016.	1	16,017,308.
	2	Savings and temporary cash investments			17,926,615.	2	15,271,460.
	3	Pledges and grants receivable, net			0.	3	0.
	4	Accounts receivable, net			135,086.	4	265,713.
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
		controlled entity or family member of any of the	se pers	ons		5	0.
	6	Loans and other receivables from other disqual	fied per	sons (as defined			
		under section 4958(f)(1)), and persons describe				6	0.
ţ	7	Notes and loans receivable, net			2,498,987.	7	2,222,238.
Assets	8	Inventories for sale or use				8	0.
⋖	9	Prepaid expenses and deferred charges			6,080.	9	6,080.
	10a	Land, buildings, and equipment: cost or other		04 050 504			
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  Less: accumulated depreciation	10a	21,879,521.	00 000 000		04 000 000
	b				22,360,975.	10c	21,080,977.
	11	Investments - publicly traded securities			127,585,082.	11	143,793,899.
	12	Investments - other securities. See Part IV, line			84,440,075.	12	77,970,945.
	13	Investments - program-related. See Part IV, line			11,703,379.	13	11,144,245.
	14	Intangible assets			F 241 01F	14	0.
	15	Other assets. See Part IV, line 11			5,341,015.	15	5,474,206.
	16	Total assets. Add lines 1 through 15 (must equ			281,677,310.	16	293,247,071.
	17	Accounts payable and accrued expenses			190,150. 3,429,177.	17	409,136.
	18	Grants payable			1,739,690.	18	2,794,290. 533,217.
	19	Deferred revenue			1,739,090.	19 20	0.
	20 21	Tax-exempt bond liabilities				21	0.
	22	Escrow or custodial account liability. Complete Loans and other payables to any current or form				21	0.
Liabilities	22	trustee, key employee, creator or founder, subs					
≣		controlled entity or family member of any of the				22	0.
Lia	23	Secured mortgages and notes payable to unrela				23	434,510.
	24	Unsecured notes and loans payable to unrelate				24	0.
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line					
		of Schedule D			3,354,500.	25	3,310,963.
	26	Total liabilities. Add lines 17 through 25			8,713,517.	26	7,482,116.
		Organizations that follow FASB ASC 958, che					
es		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			167,656,124.	27	174,648,666.
Bal	28	Net assets with donor restrictions			105,307,669.	28	111,116,289.
п		Organizations that do not follow FASB ASC 9	58, che	eck here 🕨 🗌			
Ţ		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds				29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or e	quipme	nt fund		30	
As	31	Retained earnings, endowment, accumulated in	come,	or other funds		31	
Ret	32	Total net assets or fund balances			272,963,793.	32	285,764,955.
	33	Total liabilities and net assets/fund balances			281,677,310.	33	293,247,071.

Form **990** (2020)

Pai	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,030		
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u>34</u>	<u>,10:</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3			7,2	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	272			
5	Net unrealized gains (losses) on investments	5	<u> </u>	<u>,809</u>	<del>7</del> ,7	<u>44.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		64	1,1	39.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	coluṃn (B))	10	285	<u>,764</u>	1,9	<u>55.</u>
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			Ш
					Yes	No
1	Accounting method used to prepare the Form 990:		I			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a				2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled 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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X 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 oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audi	t			
	Act and OMB Circular A-133?			За		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	t			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u>	3b		
				Form	990 (	(2020)

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(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

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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

BATON POLICE APEA FOLINDATION

Employer identification number

72-6030391

				EA FOUNDATION				2-0030391
Pa	rt I	Reason for Public C	Charity Status.	(All organizations must c	omplete th	is part.) S	ee instructions.	
he o	organi	zation is not a private founda	ation because it is: (F	For lines 1 through 12, cl	heck only o	one box.)		
1		A church, convention of chu	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii).	Attach Schedule E (Form	n 990 or 99	0-EZ).)		
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).	
4		A medical research organiza	ation operated in cor	njunction with a hospital	described	in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:						
5		An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit describ	ed in
		section 170(b)(1)(A)(iv). (C	omplete Part II.)					
6		A federal, state, or local gov		nental unit described in	section 17	'0(b)(1)(A)	(v).	
7	X	An organization that normal	lly receives a substar	ntial part of its support fr	om a gove	rnmental	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)					
8		A community trust describe	d in <b>section 170(b)(</b>	1)(A)(vi). (Complete Part	t II.)			
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	nction with a land-grant	college
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the r	name, city	, and state of the college	e or
		university:				•	_	
10		An organization that normal	lly receives (1) more	than 33 1/3% of its supp	ort from co	ontribution	ns, membership fees, an	d gross receipts from
		activities related to its exem	pt functions, subjec	t to certain exceptions; a	and (2) no i	nore than	33 1/3% of its support f	rom gross investment
		income and unrelated busin	ess taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)					
11		An organization organized a	and operated exclusi	vely to test for public sat	fety. See	section 50	)9(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform th	ne function	ns of, or to carry out the	purposes of one or
		more publicly supported org	ganizations describe	d in <b>section 509(a)(1)</b> o	r section (	509(a)(2).	See <b>section 509(a)(3).</b>	Check the box in
		lines 12a through 12d that of						
а		Type I. A supporting orga						giving
		the supported organization	n(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustees of the s	upporting
		organization. You must c	omplete Part IV, Se	ections A and B.				
b		Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	supporte	ed organization(s), by ha	ving
		control or management of	f the supporting orga	anization vested in the sa	ame persoi	ns that co	ntrol or manage the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally integ	grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)	. You must complete i	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nection w	vith its supported organi	zation(s)
		that is not functionally into	egrated. The organiz	ation generally must sat	isfy a distri	bution rec	uirement and an attenti	veness
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	٧.	
е		Check this box if the orga	nization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporting	ng organiza	ation.		
f	Ente	r the number of supported o	rganizations					
g		ide the following information						
	(i	Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	39891968.	40131081.	31752259.	29102418.	28575217.	169452943
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	39891968.	40131081.	31752259.	29102418.	28575217.	169452943
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)						34805586.
6	Public support. Subtract line 5 from line 4.						134647357
Sec	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	39891968.	40131081.	31752259.	29102418.	28575217.	169452943
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	3839358.	4849720.	5899806.	4912836.	4812573.	24314293.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	4,609.					4,609.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						193771845
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
	organization, check this box and stop	p here					
Sec	ction C. Computation of Publi						
14	Public support percentage for 2020 (l	line 6, column (f), d	livided by line 11, o	column (f))		14	69.49 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	71.20 %
16a	33 1/3% support test - 2020. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				<b>&gt;</b> X
b	33 1/3% support test - 2019. If the	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances to	est. The organization	on qualifies as a pu	blicly supported o	rganization		▶□
b	10% -facts-and-circumstances test	t - 2019. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circun	nstances test, che	ck this box and s	<b>top here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
18							
	Schedule A (Form 990 or 990-EZ) 2020						

### 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ					
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-	ļ					
	formed, or facilities furnished in any activity that is related to the	ļ					
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support				<b>.</b>	_	
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,	ļ					
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in 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.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organization	on,
_	check this box and stop here		<u> </u>				<b>&gt;</b>
	ction C. Computation of Publi					т т	
	Public support percentage for 2020 (li					15	<u>%</u>
	Public support percentage from 2019					16	<u>%</u>
	ction D. Computation of Inves					<del></del>	
	Investment income percentage for 20						<u>%</u>
18	Investment income percentage from 2					18	<u>%</u>
19a	33 1/3% support tests - 2020. If the						7 is not
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2019. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	▶Ш

### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

#### Section A. All Supporting Organizations

- 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.
- 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).
- **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.
- **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.
- c 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.
- **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.
- **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.
- c 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined in 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.
- 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.
  - **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.)

	Yes	No
1		
2		
_		
За		
3b		
3с		
4a		
4b		
40		
40		
4c		
5a		
Ja		
5b		
5c		
6		
,		
7		
8		
9a		
9b		
9с		
30		
10a		
134		
105		
10b		

Pa	Triv Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		-
	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	<u>detail in</u> Part VI. tion B. Type I Supporting Organizations	11c		
360	tion B. Type I Supporting Organizations		V	
	Did the accoming hady members of the accoming hady officers acting in their official conscity or membership of one or		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 <b>Part VI</b> 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	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  Did the organization operate for the benefit of any supported organization other than the supported	•		
2	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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	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		
Sec	tion 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		
2	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		
3	By reason of the relationship described in 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			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	1-		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		,	
с 2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in Activities Test. Answer lines 2a and 2b below.	struction	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
u	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	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 in 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		
3	Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
а	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		
b	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		

#### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.

All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

1 Net short-term capital gain			(optional)
	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		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection 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):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e 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		
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		
Minimum Asset Amount (add line 7 to line 6)	8		
ection C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
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		
criticization temporary reduction (see instructions).			

Schedule A (Form 990 or 990-EZ) 2020

instructions).

Schedule A (Form 990 or 990-EZ) 2020

a Excess from 2016
 b Excess from 2017
 c Excess from 2018
 d Excess from 2019
 e Excess from 2020

### Schedule A

# Identification of Excess Contributions Included on Part II, Line 5

2020

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Contributor's Name	Total Contributions	Excess Contributions
TOTAL	38,681,023.	34,805,586.
Total Excess Contributions to Schedule A. Part II. Line 5		34,805,586.

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2020

Name of the organization

**Employer identification number** 

#### BATON ROUGE AREA FOUNDATION

72-6030391

Organization type (check one):

Filers of: Section:

X 501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF 501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ \bigset\*

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization Employer identification number

### BATON ROUGE AREA FOUNDATION

72-6030391

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	6	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Hume, address, and Zii + +	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5			Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

### BATON ROUGE AREA FOUNDATION

72-6030391

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	SHARES STERIS PLC, ABBOTT LABS, AMICUS THERAPEUTICS, ANTHEM, ASTRAZENECA, ETC.		
		\$\$777,509.	12/31/20
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
000450 44 05		<u> </u>	200 000 F7 ar 000 PF) (0000)

Name of organization **Employer identification number** BATON ROUGE AREA FOUNDATION 72-6030391 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE C**

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2020

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

Ope

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of ord	ranization	loris. Complete Part III.		Emi	oloyer identification number
Ivanie or orç	•	OUGE AREA FOUNDA	TT ∩NI	-   -   -   -   -   -   -   -   -   -	72-6030391
Part I-A		anization is exempt und		or is a section 527 o	
1 Provid 2 Politica	e a description of the organiz	ation's direct and indirect politic	al campaign activities i	n Part IV.	\$
Part I-B	Complete if the org	anization is exempt und	er section 501(c)(	3).	
1 Enter t	he amount of any excise tax	incurred by the organization und	der section 4955	<b>&gt;</b>	\$
2 Enter t	he amount of any excise tax	incurred by organization manage	ers under section 4955	<b></b>	\$
		n 4955 tax, did it file Form 4720			
					Yes No
	," describe in Part IV.	anization is exempt und	or soction 501(a)	execut section 501/	0)(3)
Part I-C		•		<u>-</u>	
		I by the filing organization for se ization's funds contributed to ot	•		\$
			*		¢
		. Add lines 1 and 2. Enter here a			Ψ
					\$
		1120-POL for this year?			
made <sub>l</sub> contrib	payments. For each organizations received that were pro	nployer identification number (El tion listed, enter the amount pai comptly and directly delivered to additional space is needed, prov	d from the filing organiz a separate political orga	ation's funds. Also enter that anization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	contributions received and

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

No

# Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check X if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ if the filing organization checked box A and "limited control" provisions apply.

	Limits on Lobb (The term "expenditures" m	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals	
1a	Total lobbying expenditures to influence publ			
b	Total lobbying expenditures to influence a leg	sislative body (direct lobbying)	53,707.	
С	Total lobbying expenditures (add lines 1a and	l 1b)	53,707.	
d	Other exempt purpose expenditures		29,789,766.	
е	Total exempt purpose expenditures (add lines	s 1c and 1d)	29,843,473.	
f	Lobbying nontaxable amount. Enter the amount	unt from the following table in both columns.	1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of	line 1f)	250,000.	
h	Subtract line 1g from line 1a. If zero or less, e	nter -0-	0.	
i	Subtract line 1f from line 1c. If zero or less, en	nter -0-	0.	
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		

#### 4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	( <b>d)</b> 2020	(e) Total		
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.		
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.		
c Total lobbying expenditures	118,792.	316,080.		53,707.	488,579.		
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.		
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.		
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2020

reporting section 4911 tax for this year?

## Schedule C (Form 990 or 990-EZ) 2020 BATON ROUGE AREA FOUNDATION 72-60303 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Yes" response on lines 1a through 1i below, provide in Part IV a detailed description (a)			(b)	
the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- F04(-)(F)			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5),	or sec	tion	
301(0)(0).			Yes	N
		1	100	
Work substantially all (000), or mare) duce received pendeductible by members?				
, , , , , , , , , , , , , , , , , , , ,				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section	e prior year? n 501(c)(5),	2 3 or sec		0 :-
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior year? n 501(c)(5), "No" OR (b)	or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	e prior year? n 501(c)(5), "No" OR (b	or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5), "No" OR (b	or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5), "No" OR (b)	or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	e prior year? n 501(c)(5), "No" OR (b)	or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	e prior year? n 501(c)(5), "No" OR (b)	2 3 or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year	e prior year? n 501(c)(5), "No" OR (b)	2 3 or sec ) Part I		3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception 162 (e) to the carryous description of the exception 162 (e) to the carryous description of the exception 162 (e) to the carryous description of the exception 162 (e) to the carryous description of the exception 162 (e) to the carryous description of the exception 162 (e) to the carryous description of the exception 162 (e) to the carryous description of the exception 162 (e) to the carryous description 162	e prior year? n 501(c)(5), "No" OR (b)	2 3 or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and parametrized.	e prior year? n 501(c)(5), "No" OR (b) cal ess	2 3 or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?	e prior year? n 501(c)(5), "No" OR (b) cal ess	2 3 or sec ) Part I 2 2b 2c 3		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the Cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (See instructions)	e prior year? n 501(c)(5), "No" OR (b) cal ess	2 3 or sec ) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the Cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditure next year?	e prior year? n 501(c)(5), "No" OR (b) cal ess	2 3 or sec ) Part I 2 2b 2c 3		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded section to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (See instructions)  Part IV Supplemental Information  Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5), "No" OR (b) cal ess	2 3 or sec ) Part I 2 2b 2c 3	II-A, line	3, is
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#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

BATON ROUGE AREA FOUNDATION

**Employer identification number** 72-6030391

Par	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	244	201
2	Aggregate value of contributions to (during year)	8,342,886.	5,879,654.
3	Aggregate value of grants from (during year)	12,411,484.	5,552,892.
4	Aggregate value at end of year	75,013,939.	82,756,583.
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advise	
	are the organization's property, subject to the organization's e	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be ι	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose of	•
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (for example, recreat	. —	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
_			4.
b			
С.	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		I I
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
	year •	amount in located .	
4 5	Number of states where property subject to conservation easi		
3	Does the organization have a written policy regarding the peri violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
Ü	Land volunteer mouns devoted to morntoning, inspecting, in	landing of violations, and emorning cons	ervation casements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conservat	ion easements during the year
•	S	ing of violations, and emoroting conservat	ion casements daring the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170/h	n)(4)(B)(i)
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footnote	· · · · · · · · · · · · · · · · · · ·	
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Otl	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement ar	nd balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that describes these items	S.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and b	alance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under FASB AS		
	Revenue included on Form 990, Part VIII, line 1		
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2020

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

		OUGE AREA I						30391	
Par	t III   Organizations Maintaining Co	ollections of Art	t, Historical Tre	asures, or C	Other S	Similar	Asset	3 (continu	ued)
3	3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its								
	collection items (check all that apply):								
а	X Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	n how they further th	ne organization's	s exemp	t purpos	se in Part	XIII.	
5	During the year, did the organization solicit or	•	•	ŭ	•				
	to be sold to raise funds rather than to be ma							Yes	X No
Par	t IV Escrow and Custodial Arrang								
	reported an amount on Form 990, Par	•	oto ii tilo organizatio	ir anowered Te	01110	JIIII 000	, , , ,	11100,01	
12	Is the organization an agent, trustee, custodia		ian, for contribution	e or other accet	s not inc	ludod			
Ia			•					Yes	☐ No
	on Form 990, Part X?						∟	_ res	NO
р	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:						
						$\vdash$		Amount	
	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or cu	ıstodial account	t liability'	?	L	Yes	X No
	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete if	the organization an	swered "Yes" on Fo	rm 990, Part IV	, line 10.				
		(a) Current year	(b) Prior year	(c) Two years b	oack (d	<b>)</b> Three y	ears back	(e) Four	years back
1a	Beginning of year balance	100,267,019.	96,266,917.	105,251,5	590.	105,23	33,528.	100,	570,775.
	Contributions	1,722,473.	2,109,156.	1,281,8	803.	2,9	53,433.	13,3	203,329.
	Net investment earnings, gains, and losses	7,383,459.	10,538,884.	328,1	182.	9,0	42,836.	5,	058,469.
	Grants or scholarships		•						
	Other expenditures for facilities								
Ŭ	. '	7,612,709.	8,265,719.	10,144,3	362.	11 51	16,730.	13	236,061.
	and programs Administrative expenses	413,153.	382,219.	<del> </del>			61,477.	<del>  '</del>	362,984.
		101,347,089.	100,267,019.	· ·			51,590.	+	233,528.
	End of year balance				7 - 7 •	105,25	31,330.	105,	233,320.
2	Provide the estimated percentage of the curre	•		)) held as:					
	Board designated or quasi-endowment	31.5643	_%						
	Permanent endowment ► 65.2128	%							
С		%							
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held ar	nd administered	for the o	organiza	tion	_	
	by:								Yes No
	(i) Unrelated organizations							3a(i)	X
	(ii) Related organizations							3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizate	tions listed as require	ed on Schedule R?					. 3b	
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipme	ent.							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, P	art X, lin	e 10.			
	Description of property	(a) Cost or o		or other	(c) Acc		d	(d) Book	value
	2 seemplise of property	basis (investr	` ,	(other)	` '	eciation	_	(4, 200	
12	Land	1 - 604		. ,	•		1	7.604	1,854.
									2,090.
	Buildings Leasehold improvements			6,740.	3 5	8,73	35		3,005.
				5,837.		9,80			5,028.
	Equipment		-   00	3,03/•	4.3	, , o C	• •		,040.
	Other							1 000	077
Total	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990. Part 2	X. column (B). line 1	0c.)			<b>&gt;</b> 2	<u>ι , υ ο υ</u>	),977.

Schedule D (Form 990) 2020

Part VII Investments - Other Securities
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Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.					
(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					
(2) Closely held equity interests	107,200.	COST			
(3) Other					
(A) PRIVATE EQUITY	31,111,252.	END-OF-YEAR MARKET VALUE			
(B) HEDGE FUNDS	7,152,739.	END-OF-YEAR MARKET VALUE			
(C) VENTURE CAPITAL	16,070,046.	END-OF-YEAR MARKET VALUE			
(D) PRIVATE INV, P'SHIP &					
(E) OTHER	4,127,124.	END-OF-YEAR MARKET VALUE			
(F) REAL ESTATE &					
(G) INFRASTRUCTURE	5,988,346.	END-OF-YEAR MARKET VALUE			
(H) GS TACTICAL TILT	3,446,278.	END-OF-YEAR MARKET VALUE			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	77,970,945.				
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value			
(1)					
(2)					
(3)					
(4)					

(5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

#### Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Complete if the organization answered Tes of Frontin 990, Fait N, line 25.	
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LIABILITY FOR DEFERRED COMP	1,102,345.
(3) LIABILITY FOR SPLIT-INTEREST A	2,208,618.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X. col. (B) line 25.)	3,310,963.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d		2e			
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b		-			
b	Other (Describe in Part XIII.)	4b	-			
С	Add lines 4a and 4b		4c			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	nto With Evenence new I	5   Deturn			
Pal	T XII Reconciliation of Expenses per Audited Financial Stateme	nts with Expenses per i	Return.			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		<del></del>			
1	Total expenses and losses per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1				
а	Donated services and use of facilities	2a	-			
b	Prior year adjustments	2b	-			
С	Other losses	2c	-			
d	Other (Describe in Part XIII.)	•	+ -			
е	Add lines 2a through 2d		2e			
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.4.1				
a	Investment expenses not included on Form 990, Part VIII, line 7b		-			
	Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>		- 1			
			4c   5			
5 Pai	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  † XIII Supplemental Information.		] 5			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	// lines 1h and 2h: Part // line	1: Part Y line 2: Part YI			
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit		4, Fait A, IIIIe 2, Fait Ai,			
111103	2d and 4b, and 1 art xii, intes 2d and 4b. Also complete this part to provide any addit	ional imormation.				
PAF	PART III, LINE 4					
THE	SOUTH LOUISIANA ART FUND WAS DESIGNATED TO	O DEVELOP A COMM	MUNITY			
COI	LECTION OF PUBLIC ART SO THE PEOPLE OF BAT	ON ROUGE CAN APE	PRECIATE			
LOU	JISIANA ART AND ARTISTS. ALL ART WORK IS OI	L ON CANVAS AND	CREATED BY			
LOU	JISIANA ARTISTS.					
PAF	RT V, LINE 4					
DISTRIBUTIONS UP TO THE APPROVED DISTRIBUTION PERCENTAGE SHALL BE MADE AT						
SUC	CH TIMES, IN SUCH AMOUNTS, IN SUCH WAYS AND	FOR SUCH CHARIT	TABLE,			
EDU	JCATIONAL, SCIENTIFIC, LITERARY, OR RELIGIO	US PURPOSES (OR	ANY			
COI	COMBINATION OF SUCH PURPOSES) AND FOR ADMINISTRATIVE PURPOSES. ALL					
	MAD TO MA	DIIDDOG= 0=				
DISTRIBUTIONS ARE MADE IN FURTHERANCE OF THE PURPOSE OF THE FOUNDATION.						

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
OTHER ALTERNATIVES	1,252,416.	FMV
CLOSELY-HELD SECURITIES	8,715,544.	FMV
	i	

### SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

## **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

2020
Open to Public Inspection

Name of the organization

Employer identification number

BATON ROUGE AREA FOUNDATION 72-6030391

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... X Yes No.

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

United States.					
3 Activities per Region. (T	he following Part (b) Number of offices in the region		an be duplicated if additional space is ne  (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	eded.)  (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		37,150,854.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		16,785,654.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		83,350.
EAST ASIA AND THE	0	0	GRANTMAKING		105,596.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING		12,500.
NORTH AMERICA	0	0	GRANTMAKING		11,621.
SOUTH AMERICA	0	0	GRANTMAKING		34,150.
SOUTH ASIA	0	0 0	GRANTMAKING		54,184,225.
<ul><li>3 a Subtotal</li><li>b Total from continuation sheets to Part I</li></ul>	0	0			174,733.
c Totals (add lines 3a and 3b)	0	0			54,358,958.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2020

Schedule F (Form 990)	BATON RO	UGE AREA	FOUNDATION	72-6030393	1 Page 1
Part I Continuation	n of Activitie	s per Region	- (Schedule F (Form 990), Part I, line 3)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		174,733.
Totals					174,733.

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FM\ appraisal, other)
		CENTRAL AMERICA						
			GENERAL SUPPORT	50,000.	СНЕСК	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	SCHOOL SUPPORT	12,500.	WIRE	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	SCHOOL SUPPORT	10,000.	CHECK	0.		
		EAST ASIA AND THE	GENERAL SUPPORT	90,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	GENERAL SUPPORT	8,500.	снеск	0.		
		SOUTH AMERICA	PART V	250.	CHECK	0.		
		SOUTH AMERICA	PART V	2,600.	CHECK	0.		
		SOUTH AMERICA	GENERAL SUPPORT recognized as charities by the	25,000.		0.		

..... **>** \_\_\_\_\_\_\_ 17

Schedule F (Form 990) 2020

**3** Enter total number of other organizations or entities

Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ECUADOR	6,300.	CHECK	0.		
		SOUTH ASIA	GENERAL SUPPORT	500.	СНЕСК	0.		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	500.	СНЕСК	0.		
		SUB-SAHARAN AFRICA	PART V	50,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	MISSION	6,500.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	5,233.	снеск	0.		
		SUB-SAHARAN AFRICA	PART V	90,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	PART V	20,000.	WIRE	0.		
				25,500.		3.		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	2,500.	CHECK	0.		
		[ <b>/</b>		_,500.	J	· ·		1

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (f) Amount of (c) Number of (d) Amount of (e) Manner of (g) Description of (b) Region (a) Type of grant or assistance cash disbursement recipients cash grant noncash noncash assistance assistance CENTRAL AMERICA DISASTER ASSISTANCE AND THE CARIBBEAN 10,850.WIRE 0. 4 EAST ASIA AND THE DISASTER ASSISTANCE PACIFIC 4 7,096.WIRE 0 EUROPE (INCLUDING ICELAND & DISASTER ASSISTANCE GREENLAND) 5 12,500. WIRE 0. DISASTER ASSISTANCE NORTH AMERICA 7 11,621.WIRE 0.

Page 4

"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713; don't file with Form 990)

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a		
	U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing		
	Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		

Schedule F (Form 990) 2020

Yes X No

Page 5

### Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE F, PART I, LINE 2

THE FOUNDATION HAS ADOPTED A WRITTEN EXPENDITURE RESPONSIBILITY POLICY AND EXERCISES ITS EXPENDITURE RESPONSIBILITY WHEN MAKING GRANTS TO FOREIGN ORGANIZATIONS UNLESS THE GRANTEE HAS RECEIVED A RULING ON ITS PUBLIC CHARITY STATUS FROM THE IRS, OR THE FOUNDATION MAKES A GOOD FAITH EQUIVALENCY DETERMINATION IN ACCORDANCE WITH APPLICABLE IRS REGULATIONS THAT THE GRANTEE IS THE EQUIVALENT OF A U.S. PUBLIC CHARITY, BY (1) RELYING ON A REASONED WRITTEN LEGAL OPINION, OR (2) RELYING ON AN AFFIDAVIT FROM THE GRANTEE DEMONSTRATING THAT IT IS EQUIVALENT TO A PUBLIC CHARITY, IN ACCORDANCE WITH APPLICABLE IRS REVENUE PROCEDURES. THE FOUNDATION INITIATES A PRE-GRANT INQUIRY IN ORDER TO DETERMINE THAT THE INTENDED GRANTEE IS CAPABLE OF FULFILLING THE CHARITABLE PURPOSES OF THE GRANT, WHICH INCLUDES REQUESTING AND REVIEWING THE GRANTEE'S EVIDENCE OF LEGAL STATUS, GOVERNING DOCUMENTS, ANNUAL REPORTS, AUDITED FINANCIAL STATEMENTS, AND BOARD ROSTER. THE GRANTEE IS THEN REQUIRED TO ENTER INTO A GRANT AGREEMENT THAT INCLUDES SPENDING AND REPORTING RESPONSIBILITIES AND COMMITS THE GRANTEE TO SPEND THE GRANT FUNDS ONLY FOR THE SPECIFIED CHARITABLE PURPOSES. A FINAL REPORT FROM THE GRANTEE IS DUE WITHIN 60 DAYS OF THE COMPLETION OF THE PROJECT OR GRANT TERM DETAILING HOW THE GRANT FUNDS HAVE BEEN SPENT AND THE IMPACT THAT THE GRANT MAY HAVE HAD ON THE COMMUNITY IT SERVES. IF THE PROJECT OR GRANT TERM IS NOT COMPLETED WITHIN ONE YEAR, INTERIM REPORT(S) ARE REQUIRED.

SCHEDULE F, PART II, LINE 1

THE PURPOSE OF GRANTS IN SOUTH AMERICA: SUPPORT OF THE CHARLES DARWIN

FOUNDATION, SUPPORT OF THE BALCOMBE PERU MISSIONS

Schedule F (Form 990) 2020

#### **SCHEDULE G**

(Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ.  Go to www.irs.gov/Form990 for instructions and the latest information.							Open to Public Inspection	
Name of the organizatio		7 to WWW.11 3.90 V/1 OF 111350 TOF 11131	uction	3 and	the latest illiorinati		<u> </u>	ntification number	
riame er ine ergamzane		OUGE AREA FOUNDATI	ON				72-6030		
Part I Fundrais				/aall au	- Farras 000 David IV /				
	complete this part	Complete if the organization answ	erea " Y	es" or	n Form 990, Part IV, I	ine 17.	Form 990-EZ	filers are not	
					Obselvall that amply				
	<ul> <li>Indicate whether the organization raised funds through any of the following activities. Check all that apply.</li> <li>Mail solicitations</li> <li>E Solicitation of non-government grants</li> </ul>								
=	แอกร l email solicitations			-					
				•	nment grants				
c Phone solic		g Specia	al fundra	ıısıng (	events				
d In-person so		and the second s	1.6		'''				
ŭ		or oral agreement with any individua	•	•		tees, o			
		art VII) or entity in connection with p				,	Yes		
,	• .	viduals or entities (fundraisers) purs	uant to	agreer	ments under which ti	ne tunc	Iraiser is to be	)	
compensated at le	east \$5,000 by the	organization.							
(i) Name and address of individual		(ii) Activity		Did raiser ustody	(iv) Gross receipts	tò (or	mount paid retained by) undraiser	(vi) Amount paid to (or retained by)	
or entity (fund	uraiser)			ntrol of utions?	from activity		ed in col. (i)	organization	
			Yes	No					
				├─					
				├─					

3	List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2020

Total

Pa	rt I	<b>Fundraising Events.</b> Complete if the of fundraising event contributions and ground gr				
		2aa.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a	(a) Event #1 MAPP GOLF TOUR • (event type)	(b) Event #2  NEIGHBORS  (event type)	(c) Other events  NONE  (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	44,145.	49,540.	,	93,685.
Ä		Less: Contributions				71,506.
	3	Gross income (line 1 minus line 2)				22,179.
	4	Cash prizes				
,,	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	13,100.			13,100.
rect Ex	7	Food and beverages				
ä	8	Entertainment Other direct expenses				2,702.
	10		•		<b>•</b>	15,802.
		Net income summary. Subtract line 10 from				6,377.
Pa	rt l	II Gaming. Complete if the organization				<u>,                                      </u>
		\$15,000 on Form 990-EZ, line 6a.				
nue			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue						
	1	Gross revenue				+
ses	2	Cash prizes				
zxpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No No	No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line	7 from line 1, column (d)		<b>&gt;</b>	
а	ls t	ter the state(s) in which the organization condi- the organization licensed to conduct gaming a	activities in each of these			Yes No
b	IT "	No," explain:				
		ere any of the organization's gaming licenses r Yes," explain:				Yes No
_	_	,				
	_					

Schedule G (Form 990 or 990-EZ) 2020

032082 11-25-20

Sch	edule G (Form 990 or 990-EZ) 2020 BATON ROUGE AREA FOUNDATION 72-	<u>-6030391</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
12	Indicate the percentage of gaming activity conducted in:		
		100	0/
	The organization's facility		<u>%</u>
	An outside facility	13b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party  \$\bigs\\$		
_	If "Yes," enter name and address of the third party:		
	The state that the and address of the tillid party.		
	Name		
	Address ▶		
16	Gaming manager information:		
	Name		
	Gaming manager compensation  \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	·		
-	Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	
	retain the state gaming license?	L res	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
П	organization's own exempt activities during the tax year > \$		
Pa	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F	art III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			

Schedule G (For	m 990 or 990-EZ) ipplemental inforr	BATON ROUGE	AREA	FOUNDATION	72-6030391	Page 4
Part IV Su	ipplemental Inforr	nation (continued)				
-						
-						
-						

### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

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

2020

OMB No. 1545-0047

Open to Public Inspection

Name of the organization  BATON ROU	GE AREA F	OUNDATION					Employer identification number 72-6030391
Part I General Information on Grants a		<u> </u>					. = ******
<ol> <li>Does the organization maintain records criteria used to award the grants or assist</li> <li>Describe in Part IV the organization's pro-</li> </ol>	stance?						
Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990, Parl	: IV, line 21, for any
recipient that received more than	T '	·	<del></del>		(f) Method of	T	T
1 (a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACADEMIC DISTINCTION FUND							
POST OFFICE BOX 2564							
BATON ROUGE , LA 70821	72-1300995	501(C)(3)	173,282.	0.			GENERAL SUPPORT
ACADEMY OF THE SACRED HEART NEW			,				
ORLEANS FOUNDATION - DEVELOPMENT							
OFFICE							
- NEW ORLEANS , LA 70115	27-0896786	501(C)(3)	14,250.	0.			GENERAL SUPPORT
ACTS OF LOVE INC. POST OFFICE BOX 63061							
LAFAYETTE , LA 70596	27-3893664	501(C)(3)	31,800.	0.			GENERAL SUPPORT
AGENDA FOR CHILDREN INC NEW ORLEANS - 8300 EARHART BOULEVARD							LOUISIANA EDUCATION:
- NEW ORLEANS LA 70118	72-1058157	501(C)(3)	50,000.	0.			2019-2020 INITIATIV
ALLIANCE FOR CHOICE IN EDUCATION -	72 1030137	301(0)(3)	30,000.	0.			ZOIS ZOZO INIIIMIIV
LOUISIANA - 1201 EAST COLFAX							
AVENUE							ACE LOUISIANA
- DENVER . CO 80218	84-1531066	501(C)(3)	41,500.	0.			SCHOLARSHIPS
ALLIED MEDIA PROJECTS INC. 4126 THIRD STREET DETROIT , MI 48201	01-0559608		12,000.	0.			ZEAL PRESS
2 Enter total number of section 501(c)(3) a		1	a Bara di Arbita		<u> </u>	L	291
3 Enter total number of other organization	-	l Anlala					

(a) Nerne and address of organization or government (b) EIN (c) IEO section of cash grant of cash grant of cash grant organization or government (s) Annount of cash assistance (s) Annount of cash grant (s) Annount of cash assistance (s) Annount of cash grant (s) Annount of cash assistance (s) Annount of cash grant (s) Annount of cas	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
CAPTRAL AREA - 3772 NORTH BOULEVARD - BATON ROGGE , LA 70806 72-1082047 501(C)(3) 27,250. 0. BENERAL SUPPORT  AMERICAN CANCER SOCIETY INC, ATTH. DISTINGUISHED EVENTS RATAN DISTINGUISHED EVENTS RATALANTA GA 30303 13-1788491 501(C)(3) 7,500. 0. BEAUS BALL  AMERICAN CANCER SOCIETY INC. MID-SOUTH DIVISION - 2605 RIVER ROAD - NEW GRLEANS		(b) EIN		(d) Amount of cash grant	non-cash	valuation (book, FMV,		
NORTH BOULEVARD BATON ROUSE LA 70806 RATE AND ROUSE LA 70806 RATE AND ROUSE LA 70806 RETENSUISHED EVENTS RETH ROLLEY INC, AMERICAN CANCER SOCIETY INC, AMERICAN CANCER SOCIETY INC, RETH ROLL RATE ALS SOCIETY INC, REAL SUPPORT ROLL ROLL ROLL ROLL ROLL ROLL ROLL R	ALZHEIMER'S SERVICES OF THE							
- BATON ROUGE , LA 70806 72-1082047 501(c)(3) 27,250. 0. SENERAL SUPPORT  AMERICAN CANCER SOCIETY INC. ATTH: DISTINUISHED EVENTS ATTH: DISTINUISHED EVENTS ATTH: DISTINUISHED EVENTS ATTH: DISTINUISHED EVENTS ATALANTA	CAPITAL AREA - 3772							
MERICAN CANCER SOCIETY INC. ATTN: DISTINGUISHED EVENTS ATLANTA	NORTH BOULEVARD							
ATTN: DISTINGUISHED EVENTS	- BATON ROUGE , LA 70806	72-1082047	501(C)(3)	27,250.	0.			GENERAL SUPPORT
AMERICAN CANCER SOCIETY INC MID-SOUTH DIVISION - 2605 RIVER ROAD - NEW ORLEANS	ATTN: DISTINGUISHED EVENTS							
MID-SOUTH DIVISION - 2605 RIVER ROAD  - NEW ORLEANS		13-1788491	501(C)(3)	7,500.	0.			BEAUS BALL
AMERICAN HEART ASSOCIATION INC GREATER SOUTHEAS - 14241 COUNSEY BOULEVARD - BATON ROUGE	MID-SOUTH DIVISION - 2605 RIVER							ACCESS TO
GREATER SOUTHEAS - 14241 COURSEY BOULEVARD - BATON ROUGE	- NEW ORLEANS , LA 70121	13-1788491	501(C)(3)	7,500.	0.			CARE-TRANSPORTATION
AMERICAN NATIONAL RED CROSS - LOUISIANA CAPITAL AR - 4655 SHERWOOD COMMON BOULEVARD - BATON ROUGE	GREATER SOUTHEAS - 14241 COURSEY							
AMERICAN NATIONAL RED CROSS - LOUISIANA CAPITAL AR - 4655 SHERWOOD COMMON BOULEVARD - BATON ROUGE	- BATON ROUGE , LA 70817	13-5613797	501(C)(3)	37,258.	0.			GENERAL SUPPORT
SHERWOOD COMMON BOULEVARD - BATON ROUGE				,				
- BATON ROUGE , LA 70816 53-0196605 501(C)(3) 18,092. 0. SENERAL SUPPORT  AMIKIDS FOUNDATION INC. 5915 BENJAMIN CENTER DRIVE TAMPA , FL 33634 59-3095734 501(C)(3) 10,000. 0. SENERAL SUPPORT  ARIZONA STATE UNIVERSITY FOUNDATION FOR A NEW AMER - POST OFFICE BOX 877705 - TEMPE , AZ 85287 86-6051042 501(C)(3) 50,000. 0. WATER SUMMIT  ARTS COUNCIL OF GREATER BATON ROUGE INC 427 LAUREL STREET - BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379	LOUISIANA CAPITAL AR - 4655							
AMIKIDS FOUNDATION INC. 5915 BENJAMIN CENTER DRIVE  TAMPA , FL 33634 59-3095734 501(C)(3) 10,000. 0. GENERAL SUPPORT  ARIZONA STATE UNIVERSITY FOUNDATION FOR A NEW AMER - POST OFFICE BOX 877705 - TEMPE , AZ 85287 86-6051042 501(C)(3) 50,000. 0. WATER SUMMIT  ARTS COUNCIL OF GREATER BATON ROUGE INC 427 LAUREL STREET - BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379	SHERWOOD COMMON BOULEVARD							
5915 BENJAMIN CENTER DRIVE  TAMPA , FL 33634 59-3095734 501(C)(3) 10,000. 0. GENERAL SUPPORT  ARIZONA STATE UNIVERSITY  FOUNDATION FOR A NEW AMER - POST  OFFICE BOX 877705 2020 TEN ACROSS (10X)  - TEMPE , AZ 85287 86-6051042 501(C)(3) 50,000. 0. WATER SUMMIT  ARTS COUNCIL OF GREATER BATON  ROUGE INC 427 LAUREL  STREET - BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379	- BATON ROUGE , LA 70816	53-0196605	501(C)(3)	18,092.	0.			GENERAL SUPPORT
ARIZONA STATE UNIVERSITY  FOUNDATION FOR A NEW AMER - POST  OFFICE BOX 877705  - TEMPE , AZ 85287 86-6051042 501(C)(3) 50,000. 0. WATER SUMMIT  ARTS COUNCIL OF GREATER BATON  ROUGE INC 427 LAUREL  STREET  - BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS  POST OFFICE BOX 58379	5915 BENJAMIN CENTER DRIVE			40.000				
FOUNDATION FOR A NEW AMER - POST  OFFICE BOX 877705  - TEMPE		59-3095734	501(C)(3)	10,000.	0.			GENERAL SUPPORT
OFFICE BOX 877705  - TEMPE								
- TEMPE , AZ 85287 86-6051042 501(C)(3) 50,000. 0. WATER SUMMIT  ARTS COUNCIL OF GREATER BATON ROUGE INC 427 LAUREL STREET - BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379								2000 557 257055 (107)
ARTS COUNCIL OF GREATER BATON ROUGE INC 427 LAUREL STREET - BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379		96 6051042	E01/G)/3)	E0 000	0			
ROUGE INC 427 LAUREL  STREET - BATON ROUGE    , LA 70801		86-6051042	501(0)(3)	50,000.	0.			WATER SUMMIT
STREET - BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379								
- BATON ROUGE , LA 70801 72-0735814 501(C)(3) 880,000. 0. GENERAL SUPPORT  ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379								
ARTS COUNCIL OF NEW ORLEANS POST OFFICE BOX 58379		72 0725014	E01/G)/2)	000 000	0			GUNDAL GUDDADE
POST OFFICE BOX 58379	- BATON ROUGE , LA 70801	/2-0/35814	DUI(C)(3)	880,000.	0.			GENERAL SUPPORT
NEW ORLEANS , LA 70158 72-0778258 501(C)(3) 25,000. 0. SUPPORT OF LUNA FETE								
	NEW ORLEANS , LA 70158	72-0778258	501(C)(3)	25,000.	0.			SUPPORT OF LUNA FETE

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ACCENCION DADICH COUOLIC									
ASCENSION PARISH SCHOOLS									
16200 LA HIGHWAY 930	72 (00000	170/01/11	F 525	0			GENERAL GURRORE		
PRAIRIEVILLE , LA 70769	72-6000093	170(C)(1)	5,535.	0.			GENERAL SUPPORT		
BATON ROUGE CHILD ADVOCACY CENTER									
626 EAST BOULEVARD									
BATON ROUGE , LA 70802	26-0028918	501/C)/3)	28,200.	0.			GENERAL SUPPORT		
BATON ROUGE CHRISTIAN EDUCATION	20-0020918	301(C)(3)	20,200.	0.			GENERAL SUFFORT		
FOUNDATION INC 11111 ROY									
EMERSON DRIVE									
- BATON ROUGE , LA 70810	72-0921878	501/C)/3)	61,471.	0.			GENERAL SUPPORT		
BATON ROUGE CITY - PARISH	72-0321070	301(C)(3)	01,471.	0.			GENERAL SUFFORT		
GOVERNMENT - 7711 GOODWOOD									
BOULEVARD									
- BATON ROUGE , LA 70806	72-6000137	170/C)/1)	20,391.	0.			GENERAL SUPPORT		
BATON ROUGE CRISIS INTERVENTION	72-0000137	170(C)(1)	20,391.	0.			GENERAL SUFFORT		
CENTER INC 3013 OLD									
FORGE AVENUE									
- BATON ROUGE , LA 70808	72-0768965	501 (C) (3)	24,920.	0.			GENERAL SUPPORT		
	72 0700303	301(0)(3)	24,520.	0.			GENERAL BUTTORT		
BATON ROUGE GALLERY INC.									
1515 DALRYMPLE DRIVE									
BATON ROUGE , LA 70808	72-6032632	501(C)(3)	13,500.	0.			GENERAL SUPPORT		
, 211 , 6666	72 0002002		20,000.						
BATON ROUGE GREEN ASSOCIATION INC.									
2241 CHRISTIAN STREET									
BATON ROUGE , LA 70808	72-1124182	501(C)(3)	76,247.	0.			GENERAL SUPPORT		
,			,						
BATON ROUGE OPERA GUILD									
9164 OXFORD PLACE									
BATON ROUGE , LA 70809	51-0178682	501(C)(3)	16,785.	0.			GENERAL SUPPORT		
,	, , , , , , , , , , , , , , , , , , ,	, ,		••					
BATON ROUGE REGIONAL EYE BANK INC.									
7777 HENNESSY BOULEVARD									
BATON ROUGE , LA 70808	72-1513169	501(C)(3)	20,000.	0.			GENERAL SUPPORT		
	1		, , , , , , ,		1	1			

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
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BATON ROUGE YOUTH COALITION INC.									
460 NORTH 11TH STREET									
BATON ROUGE LA 70802	26-2477597	501/C\/3\	522,750.	0.			GENERAL SUPPORT		
BENOLA / BLACK EDUCATION FOR NEW	20-2411331	301(0)(3)	322,730.	0.			GENERAL SUFFORT		
ORLEANS - 9511 CHEF									
MENTEUR HIGHWAY							LOUISIANA EDUCATION:		
	82-1126823	E01/a)/2)	275 000	0.					
- NEW ORLEANS , LA 70127	82-1126823	501(C)(3)	275,000.	0.			2019-2020 INITIATIV		
BETH SHALOM SYNAGOGUE									
9111 JEFFERSON HIGHWAY									
BATON ROUGE , LA 70809	72-0804361	501/C\/3\	17,100.	0.			GENERAL SUPPORT		
BATON ROUGE , LA 70009	72-0004301	301(0)(3)	17,100.	0.			GENERAL SUFFORT		
BIG BUDDY PROGRAM									
1415 MAIN STREET									
BATON ROUGE , LA 70802	72-0904506	501(C)(3)	6,300.	0.			GENERAL SUPPORT		
BLACK TEACHER COLLABORATIVE	72 0301300	301(0)(3)	0,300.	•					
INCORPORATED - 2170									
BOULEVARD GRANADA							LOUISIANA EDUCATION:		
- ATLANTA , GA 30311	81-5155921	501(C)(3)	229,500.	0.			2019-2020 INITIATIV		
BLINDNESS-LEARNING IN NEW	01 0100711	301(0)(3)	225,500.	•			Lory Lord Intrinsity		
DIMENSIONS INC 100									
EAST 22ND STREET							KITCHEN PROJECT FOR THE		
- MINNEAPOLIS , MN 55404	36-3518140	501(C)(3)	10,000.	0.			OLDER BLIND POPU		
BOY SCOUTS OF AMERICA - ISTROUMA	30 3310110	301(0)(3)	10,000.	•			DIEM ELINE 1010		
AREA COUNCIL - 9644 BROOKLINE									
AVENUE									
- BATON ROUGE , LA	22-1576300	501(C)(3)	259,330.	0.			GENERAL SUPPORT		
BOYS & GIRLS CLUBS OF GREATER	22 20,0000		207,000.	•					
BATON ROUGE INC 8281									
GOODWOOD BOULEVARD									
- BATON ROUGE , LA 70806	72-0928014	501(C)(3)	8,250.	0.			GENERAL SUPPORT		
BREADA - BIG RIVER ECONOMIC &			5,250.	•					
AGRICULTURAL DEVELOP - POST OFFICE									
BOX 3976									
- BATON ROUGE , LA	72-1332566	501(C)(3)	22,650.	0.			GENERAL SUPPORT		
, 111				1					

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
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BRIDGE CENTER FOR HOPE										
728 NORTH BOULEVARD										
BATON ROUGE LA 70802	81-2252719	501(C)(3)	45,405.	0.			GENERAL SUPPORT			
, 111 70002	01 2232713	301(0)(3)	45,405.	· ·			DINDRIE BOTTORT			
CALVARY BAPTIST CHURCH										
5011 JACKSON STREET										
ALEXANDRIA , LA 71303	72-6000247	501(C)(3)	50,000.	0.			GENERAL SUPPORT			
,			, , , , , , ,							
CAMBIAR EDUCATION										
4653 CARMEL MOUNTAIN ROAD							LOUISIANA EDUCATION:			
SAN DIEGO , CA 92130	81-3508420	501(C)(3)	133,334.	0.			2019-2020 INITIATIV			
CAMELBACK VENTURES INC.										
612 ANDREW HIGGINS BOULEVARD							LOUISIANA EDUCATION:			
NEW ORLEANS , LA 70130	46-3169470	501(C)(3)	45,834.	0.			2019-2020 INITIATIV			
CANCER SERVICES INC.										
550 LOBDELL AVENUE										
BATON ROUGE , LA 70806	82-4227871	501(C)(3)	69,008.	0.			GENERAL SUPPORT			
CAPITAL AREA ALLIANCE FOR THE										
HOMELESS - 153 NORTH										
17TH STREET										
- BATON ROUGE , LA 70802	72-1392169	501(C)(3)	8,500.	0.			GENERAL SUPPORT			
CAPITAL AREA CASA ASSOCIATION										
848 LOUISIANA AVENUE										
BATON ROUGE , LA 70802	72-1197395	501(C)(3)	8,800.	0.			GENERAL SUPPORT			
CAPITAL AREA CORPORATE RECYCLING										
COUNSEL - 1400 MAIN										
STREET							PURCHASE PARTS TO RECYCLE			
BATON ROUGE , LA 70802	72-1315510	501(C)(3)	25,000.	0.			COMPUTERS FOR			
CAPITAL AREA UNITED WAY										
700 LAUREL STREET										
BATON ROUGE , LA 70802	72-0447100	501(C)(3)	308,112.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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CAT HAVEN INC.							
11130 NORTH HARRELLS FERRY ROAD							
BATON ROUGE , LA 70816	72-1454718	501(C)(3)	7,500.	0.			GENERAL SUPPORT
CATHOLIC CHARITIES ARCHDIOCESE OF			,				
NEW ORLEANS - 1000 HOWARD							
AVENUE							
- NEW ORLEANS , LA 70113	72-0408911	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CATHOLIC CHARITIES OF THE DIOCESE							
OF BATON ROUGE I - 1900 SOUTH							
ACADIAN THRUWAY							
BATON ROUGE , LA 70808	72-0590685	501(C)(3)	57,000.	0.			GENERAL SUPPORT
CATHOLIC HIGH SCHOOL FOUNDATION							
OFFICE OF ADVANCEMENT							
BATON ROUGE , LA 70896	72-1180623	501(C)(3)	8,815.	0.			GENERAL SUPPORT
CENTER FOR PLANNING EXCELLENCE							
INC 100							
LAFAYETTE STREET	20 2027040	E01/G\/2\	50.050	0			GUNDAL GUDAAR
BATON ROUGE , LA 70801	20-3827040	501(C)(3)	50,950.	0.			GENERAL SUPPORT
CENTRE FOR THE ARTS							
POST OFFICE BOX 440							
NEW ROADS LA 70760	90-0487110	501(C)(3)	14,350.	0.			GENERAL SUPPORT
CEREBRAL PALSY ASSOCIATION OF			==,				
GREATER BATON ROUGE - 1805							
COLLEGE DRIVE							
- BATON ROUGE , LA 70808	72-0459036	501(C)(3)	59,750.	0.			GENERAL SUPPORT
CHILDREN'S CUP							
POST OFFICE BOX 1930							
KELLER , TX 76244	42-1385361	501(C)(3)	7,700.	0.			GENERAL SUPPORT
CHRIST EPISCOPAL CHURCH							
120 SOUTH NEW HAMPSHIRE STREET		504 (5) (0)	10.000	_			
COVINGTON , LA 70433	72-0633945	p01(C)(3)	12,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
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CHRIST THE KING PARISH AND										
CATHOLIC CENTER AT LSU - POST										
OFFICE BOX 411										
BATON ROUGE , LA 70821	72-0410935	501(C)(3)	48,400.	0.			DISTRIBUTIONS			
CHURCH OF THE GOOD SHEPHERD POST OFFICE BOX 32										
CASHIERS , NC 28717	56-1142774	501(C)(3)	6,000.	0.			GENERAL SUPPORT			
CITY YEAR INC BATON ROUGE 111 NORTH THIRD STREET										
BATON ROUGE , LA 70801	22-2882549	501(C)(3)	379,100.	0.			GENERAL SUPPORT			
COMMUNITY FOUNDATION OF SOUTHWEST LOUISIANA - POST OFFICE BOX 3125										
- LAKE CHARLES , LA	72-1508036	501(C)(3)	230,080.	0.			GENERAL SUPPORT			
COMPANION ANIMAL ALLIANCE 2550 GOURRIER AVENUE BATON ROUGE , LA 70820	27-1204719	501(C)(3)	193,750.	0.			GENERAL SUPPORT			
CONGAREE FOUNDATION 1375 ENCLAVE PARKWAY HOUSTON , TX 77077	81-1718705	501(C)(3)	50,000.	0.			SUPPORT OF UNDERPRIVILEGED CHILDREN			
CONGREGATION B'NAI ISRAEL OF BATON ROUGE - 3354 KLEINERT AVENUE										
- BATON ROUGE , LA	72-0802838	501(C)(3)	130,572.	0.			GENERAL SUPPORT			
COOL COOPERATIVE INC.  105 JARRELL DRIVE  BELLE CHASSE , LA 70037	46-4909146	501(C)(3)	25,000.	0.			GENERAL SUPPORT			
CREOLE WILD WEST INC. 2907 UPPERLINE STREET NEW ORLEANS , LA 70115	27-4095736		20,000.	0.			GENERAL SUPPORT			
, 111 /0115	1 2, 10,5,50		20,000.	٠.			551.5111			

Part II Continuation of G	rants and Other <i>i</i>	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and addi organization or gove		<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CRIMINAL JUSTICE COORD	INATING							
COUNCIL -	100 NORTH							
STREET								SUPPORT CRIMINAL JUSTICE
- BATON ROUGE	, LA 70802	83-3345765	501(C)(3)	362,196.	0.			REFORM IN EAST
CRISTO REY BATON ROUGE	<b>.</b>							
4000 ST. GERARD AVENUE								
	, LA 70805	47-2311473	501(C)(3)	56,400.	0.			GENERAL SUPPORT
CULTURAL LANDSCAPE FOU	INDATTON							
1711 CONNECTICUT AVENU								
	, DC 20009	52-2092229	501 (C) (3)	6,000.	0.			GENERAL SUPPORT
MADITINGTON	, DC 20005	32 2032223	301(0)(3)	0,000.	0.			GENERAL SOFFORT
DANCE TO UNITE INC.								
222 WEST 14TH STREET								
	, NY 10011	45-1860153	501(C)(3)	15,000.	0.			GENERAL SUPPORT
NEW TORK	, NI 10011	45 1000155	301(0)(3)	13,000.	0.			GENERAL SOFFORT
DANCING GROUNDS								
3705 ST. CLAUDE AVENUE								
	, LA 70117	45-5084235	501(C)(3)	7,500.	0.			GENERAL SUPPORT
NEW ORLEANS	, LR /011/	43-3004233	301(C)(3)	7,300.	0.			GENERAL SUFFORT
DIOCESE OF LAKE CHARLE	ıa							
1225 SECOND STREET								CATHOLIC CHARITIES OF
	, LA 70601	72-0883986	501(C)(3)	10,000.	0.			LAKE CHARLES' HURR
HARE CHARLES	, LA 70001	72-0003900	301(C)(3)	10,000.	0.			LAKE CHARLES HORK
DOCTORS WITHOUT BORDER	C HCA TNC							
POST OFFICE BOX 5030	b oba inc.							
	, MD 21741	13-3433452	501/C)/3)	6,750.	0.			GENERAL SUPPORT
HAGERSTOWN	, MD 21/41	13-3433432	301(C)(3)	0,730.	0.			GENERAL SUFFORT
DOG RANCH RESCUE INC.								
10030 CR 288								
	my 75/100	47-2027094	501/C)/3)	10,000.	0.			GENERAL SUPPORT
ANNA DOUGLAS MANSHIP SR. TH	, TX 75409	41-202/094	201(C)(3)	10,000.	0.			SENERAL SUPPORT
COMPLEX HOLDING INC.	- 100							
LAFAYETTE STREET	T 3 70004	20 2000550	E01/G\/3\	100 605	•			GENERAL GURRORE
- BATON ROUGE	, LA 70801	20-3999559	DUT(C)(3)	188,605.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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DUKE UNIVERSITY - SANFORD SCHOOL							
OF PUBLIC POLICY - POST OFFICE							
BOX 90581							SANFORD SCHOOL OF PUBLIC
- DURHAM , NC 27708	56-0532129	501(C)(3)	100,000.	0.			SERVICE
EAST BATON ROUGE DISTRICT							
ATTORNEY'S OFFICE - 222							
SAINT LOUIS STREET							SUPPORT THE LAW
BATON ROUGE , LA 70802	72-0763724	170(C)(1)	50,000.	0.			ENFORCEMENT COMMUNITY
EAST BATON ROUGE PARISH SCHOOL SYSTEM - 15755 JEFFERSON HIGHWAY							
BATON ROUGE , LA 70817	72-6000353	170(C)(1)	24,238.	0.			GENERAL SUPPORT
EDNAVIGATOR INC. 612 ANDREW HIGGINS BOULEVARD NEW ORLEANS , LA 70130	47-3909778	501(C)(3)	641,667.	0.			LOUISIANA EDUCATION: 2019-2020 INITIATIV
EDUCATION ALLIANCE OF WASHOE							
COUNTY - 425 EAST							
NINTH STREET							
_ RENO , NV 89512	94-3177739	501(C)(3)	30,000.	0.			GENERAL SUPPORT
EDUCATION TRUST INC.  1250 H STREET NORTHWEST  WASHINGTON , DC 20005	52-1982223	501(c)(3)	91,667.	0.			LOUISIANA EDUCATION: 2019-2020 INITIATIV
ELLA PROJECT 400 ESPLANADE AVENUE							
NEW ORLEANS , LA 70116	81-2192048	501(C)(3)	25,000.	0.			GENERAL SUPPORT
EMERGE CENTER INC. 7784 INNOVATION PARK DRIVE	4E E434705	501/g)/2\	45 545				ADMED N. GUDDODE
BATON ROUGE , LA 70820	45-5434705	301(C)(3)	45,715.	0.			GENERAL SUPPORT
EMERGE SCHOOL FOR AUTISM INC 7784 INNOVATION PARK DRIVE	01 0251222	501 (3) (2)	10.000				
BATON ROUGE , LA 70809	81-2371323	pnT(G)(3)	10,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	_ ruge
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EPISCOPAL CHURCH OF THE HOLY							
COMMUNION - POST							
OFFICE BOX 474							
- PLAQUEMINE , LA	72-0942208	501(C)(3)	7,000.	0.			GENERAL SUPPORT
EPISCOPAL HIGH SCHOOL OF BATON							
ROUGE - 3200							
WOODLAND RIDGE BOULEVARD							
BATON ROUGE , LA 70816	72-0650540	501(C)(3)	621,724.	0.			GENERAL SUPPORT
FILM FORUM INC. 209 WEST HOUSTON STREET							
NEW YORK , NY 10014	51-0175953	501(C)(3)	30,000.	0.			GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH OF BATON ROUGE - 763 NORTH BOULEVARD							
BATON ROUGE , LA 70802	72-0417279	501(C)(3)	20,338.	0.			GENERAL SUPPORT
FIRST UNITED METHODIST CHURCH 930 NORTH BOULEVARD							
BATON ROUGE , LA 70802	72-0445325	501(C)(3)	38,200.	0.			GENERAL SUPPORT
FLETCHER TECHNICAL COMMUNITY COLLEGE FOUNDATION IN - 1407 HIGHWAY 311							
- SCHRIEVER , LA 70395	20-4415988	501(C)(3)	25,000.	0.			DISTRIBUTION
FOOD BANK OF CENTRAL AND EASTERN NORTH CAROLINA - 1924 CAPITAL BOULEVARD							
- RALEIGH , NC 27604	56-1283426	501(C)(3)	20,000.	0.			GENERAL SUPPORT
FOUNDATION FOR A BETTER LOUISIANA POST OFFICE BOX 4308							
BATON ROUGE , LA 70821	72-0575929	501(C)(3)	35,800.	0.			GENERAL SUPPORT
FOUNDATION FOR HISTORICAL LOUISIANA INC. / PRESERV - 502 NORTH BOULEVARD							
BATON ROUGE , LA 70802	72-0642810	501(C)(3)	75,785.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
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FOUNDATION FOR WOMAN'S									
POST OFFICE BOX 95009									
BATON ROUGE , LA									
70895-9009	47-1970335	509(A)(3)	48,568.	0.			GENERAL SUPPORT		
FRANCISCAN MISSIONARIES OF OUR									
LADY UNIVERSITY - 5414									
BRITTANY DRIVE									
BATON ROUGE , LA 70808	72-1173156	501(C)(3)	27,750.	0.			GENERAL SUPPORT		
FRIENDS OF CANTERA INC.									
POST OFFICE BOX 86233									
BATON ROUGE , LA 70879	77-0326005	501(C)(3)	18,500.	0.			GENERAL SUPPORT		
FRIENDS OF HILLTOP ARBORETUM INC.									
POST OFFICE BOX 82608									
BATON ROUGE , LA 70884	58-1799472	501(C)(3)	20,050.	0.			GENERAL SUPPORT		
FRIENDS OF LOUISIANA PUBLIC									
BROADCASTING INC 7733									
PERKINS ROAD									
- BATON ROUGE , LA 70810	72-0794108	501(C)(3)	36,055.	0.			GENERAL SUPPORT		
FRIENDS OF MAGNOLIA MOUND									
PLANTATION INC POST									
OFFICE BOX 45848									
BATON ROUGE , LA 70895	72-1430320	501(C)(3)	12,850.	0.			GENERAL SUPPORT		
FRONT YARD BIKES									
413 STEELE BOULEVARD									
BATON ROUGE , LA 70806	46-1149453	501(C)(3)	10,991.	0.			GENERAL SUPPORT		
GAITWAY THERAPEUTIC HORSEMANSHIP									
1300 LAWRENCE PARKWAY									
ST. GABRIEL , LA 70776	20-3367886	501(C)(3)	51,500.	0.			GENERAL SUPPORT		
GARDERE COMMUNITY CHRISTIAN SCHOOL									
8538 GSRI AVENUE									
BATON ROUGE , LA 70810	61-1614861	501(C)(3)	10,000.	0.			GENERAL SUPPORT		
, IA /0010	1 21 1014201	001(0)(0)	1 10,000.	ı		<u> </u>	PERENCE BOLLOKI		

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GENERAL HEALTH SYSTEM FOUNDATION							
8595 PICARDY AVENUE, BOX 410							
BATON ROUGE , LA 70809	74-0801335	501(C)(3)	109,080.	0.			GENERAL SUPPORT
·							
GIRLS ON THE RUN MICHIANA							
51160 BITTERSWEET ROAD							ASSIST UNDERPRIVILEGED
GRANGER , IN 46530	27-2652189	501(C)(3)	6,900.	0.			FEMALE CHILDREN W
GOOD SHEPHERD NATIVITY MISSION							
SCHOOL INC 1839							
AGRICULTURE STREET							
- NEW ORLEANS , LA 70119	72-1489054	501(C)(3)	12,000.	0.			GENERAL SUPPORT
GOVERN FOR AMERICA							
PO BOX 8257							LOUISIANA EDUCATION:
GLEN RIDGE , NJ 07028	82-5444128	501(C)(3)	83,334.	0.			2019-2020 INITIATIV
GREATER BATON ROUGE ECONOMIC							
PARTNERSHIP INC 564 LAUREL							
STREET							SUPPORT OF THE YOUNG
- BATON ROUGE , LA	72-1270359	501(C)(3)	29,250.	0.			ENTREPRENEURS ACADE
GREATER BATON ROUGE ECONOMIC							
PARTNERSHIP INC./YEA - 564 LAUREL							
STREET							
- BATON ROUGE , LA	72-1270359	501(C)(3)	5,000.	0.			GENERAL SUPPORT
GREATER BATON ROUGE FOOD BANK INC.							
POST OFFICE BOX 45830							
BATON ROUGE , LA							
70895-4830	72-1065318	501(C)(3)	204,700.	0.			GENERAL SUPPORT
GRIEF RECOVERY CENTER							
4939 JAMESTOWN AVENUE							
BATON ROUGE , LA 70808	72-1185336	501(C)(3)	7,500.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY OF GREATER							
BATON ROUGE - 6554 FLORIDA							
BOULEVARD							
BATON ROUGE , LA 70806	72-1141747	501(C)(3)	11,250.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HERITAGE RANCH										
20090 TUCKER ROAD										
ZACHARY LA 70791	41-2118848	501(C)(3)	24,491.	0.			GENERAL SUPPORT			
HOLY FAMILY CATHOLIC CHURCH			21,131.	-						
POST OFFICE BOX 290										
PORT ALLEN , LA										
70767-0290	72-6012499	501(C)(3)	73,235.	0.			DISTRIBUTIONS			
HOPE MINISTRY OF POINTE COUPEE			, , , , , , ,							
POST OFFICE BOX 45										
NEW ROADS , LA										
70760-0045	72-1350536	501(C)(3)	12,000.	0.			GENERAL SUPPORT			
HOSPICE FOUNDATION OF GREATER			·							
BATON ROUGE - 3600										
FLORIDA BOULEVARD										
- BATON ROUGE , LA 70806	58-1613267	501(C)(3)	43,318.	0.			GENERAL SUPPORT			
HUMANITIES AMPED										
POST OFFICE BOX 64653										
BATON ROUGE , LA 70806	82-4794136	501(C)(3)	24,500.	0.			GENERAL SUPPORT			
IBERVILLE FOUNDATION FOR ACADEMIC										
EXCELLENCE - POST OFFICE BOX										
672							DISTRIBUTIONS AVAILABLE			
- PLAQUEMINE , LA 70765	72-1224000	501(C)(3)	22,512.	0.			FOR GRANTMAKING			
INTERNATIONAL CENTER FOR										
JOURNALISTS INC 750										
17TH STREET, NW										
- WASHINGTON , DC 20006	11-2724905	501(C)(3)	11,000.	0.			GENERAL SUPPORT			
INTERVARSITY CHRISTIAN FELLOWSHIP										
- USA - POST OFFICE BOX										
7895				_						
- MADISON , WI	36-2171714	501(C)(3)	25,000.	0.			GENERAL SUPPORT			
ISKCON OF MISSISSIPPI INC.										
31492 ANNER ROAD	64 007000	E01/G)/3)	24 000	_			GENERAL GURRORE			
CARRIERE , MS 39426	64-0879823	DOT(C)(2)	24,000.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
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JDRF INTERNATIONAL - GULF STATES										
CHAPTER - 2360										
SOUTHERLAND STREET										
_ JACKSON , MS 39216	23-1907729	501(C)(3)	28,000.	0.			GENERAL SUPPORT			
JEFFERSON PARISH PUBLIC SCHOOL SYSTEM TOTAL - 606 CLAY STREET										
_ KENNER , LA 70062	72-6000592	170(C)(1)	62,578.	0.			GENERAL SUPPORT			
JOYCE THEATER FOUNDATION INC. 175 EIGHTH AVENUE										
NEW YORK , NY 10011	13-3038262	501(C)(3)	25,000.	0.			GENERAL SUPPORT			
JUNIOR ACHIEVEMENT OF GREATER BATON ROUGE AND ACAD - 7809										
JEFFERSON HIGHWAY										
BATON ROUGE , LA 70809	72-0485727	501(C)(3)	10,250.	0.			GENERAL SUPPRT			
JUNIOR LEAGUE OF BATON ROUGE INC. 9523 FENWAY AVENUE										
BATON ROUGE , LA 70809	72-0471493	501(C)(3)	7,000.	0.			GENERAL SUPPORT			
JUNIOR LEAGUE OF RALEIGH POST OFFICE BOX 26821 RALEIGH , NC							BACKPACK BUDDIES PROGRAM			
27611-6821	56-0562849	501(C)(3)	25,000.	0.			EXPANSION WITH			
KIDS' ORCHESTRA INC. POST OFFICE BOX 1189										
BATON ROUGE , LA 70821	27-4098793	501(C)(3)	16,664.	0.			GENERAL SUPPORT			
KING OF KINGS MINISTRIES INC. / KING OF KINGS COMM - POST OFFICE										
BOX 30607										
- PHOENIX , AZ 85046	68-0441273	501(C)(3)	5,750.	0.			MISSIONS OFFERING			
KNOCK KNOCK CHILDREN'S MUSEUM INC. 1900 DALRYMPLE DRIVE										
BATON ROUGE , LA 70808	73-1701786	501(C)(3)	43,877.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
LADI ROMNAMION											
LABI FOUNDATION POST OFFICE BOX 80258											
BATON ROUGE LA 70898	46-4858854	E01/G)/2)	25,000.	0.			LOGO LOUNGE				
BATON ROUGE , LA 70090	40-4030034	501(0)(3)	25,000.	0.			LOGO LOUNGE				
LEADERSHIP ASCENSION FOUNDATION											
1006 WEST HIGHWAY 30							VILLAGE PEOPLE FUND				
GONZALES , LA 70737	46-3520621	501(C)(3)	15,000.	0.			PROJECT				
LEUKEMIA AND LYMPHOMA SOCIETY INC.											
- MISSISSIPPI/L - 3636 SOUTH I-10											
SERVICE ROAD											
- METAIRIE , LA 70001	13-5644916	501(C)(3)	6,000.	0.			GENERAL SUPPORT				
LIFE OF A SINGLE MOM											
12015 JUSTICE AVENUE											
BATON ROUGE , LA 70816	45-3478448	501(C)(3)	6,000.	0.			GENERAL SUPPORT				
LIFE OUTREACH INTERNATIONAL											
ASSOCIATION OF CHURCHE - POST											
OFFICE BOX 982000											
- FORT WORTH , TX 76182	75-2684727	501(C)(3)	15,800.	0.			GENERAL SUPPORT				
LIGHTHOUSE CHRISTIAN FELLOWSHIP											
CHURCH - 1564											
NICHOLSON DRIVE							SUPPORT EFFORTS FOR				
- BATON ROUGE , LA 70802	46-4558967	501(C)(3)	7,500.	0.			MAKING MASKS FOR MEM				
LOUISE S. MCGEHEE SCHOOL											
2343 PRYTANIA STREET											
NEW ORLEANS , LA 70130	72-0408943	501(C)(3)	6,500.	0.			GENERAL SUPPORT				
LOUISIANA ART AND SCIENCE MUSEUM											
INC 100 RIVER ROAD											
SOUTH											
- BATON ROUGE , LA 70802	72-0542138	501(C)(3)	82,733.	0.			GENERAL SUPPORT				
LOUISIANA CHILDREN'S MUSEUM											
15 HENRY THOMAS DRIVE											
NEW ORLEANS , LA 70124	72-0929068	501(C)(3)	25,000.	0.			GENERAL SUPPORT				

Part II Continuation of Grants and Other A						T	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA DEPARTMENT OF EDUCATION							
1201 NORTH THIRD STREET							
BATON ROUGE , LA 70802	72-6000745	170(C)(1)	10,721.	0.			EDUCATION FIRST GRANT
LOUISIANA DISASTER RECOVERY							
FOUNDATION - 445 N.							
SIXTH STREET							
- BATON ROUGE , LA 70802	20-3399944	501(C)(3)	400,000.	0.			GENERAL SUPPORT
LOUISIANA ENDOWMENT FOR THE							
HUMANITIES - 938							
LAFAYETTE STREET							
- NEW ORLEANS , LA 70113	72-0795568	501(C)(3)	5,850.	0.			GENERAL SUPPORT
LOUISIANA FOOD BANK ASSOCIATION /							
FEEDING LOUISIAN - 543 SPANISH							
TOWN ROAD							DISTRIBUTION AMONG
- BATON ROUGE , LA 70802	27-0667900	501(C)(3)	500,000.	0.			FEEDING LOUISIANA'S F
LOUISIANA INDUSTRIES FOR THE							
DISABLED INC 1979							
BEAUMONT DRIVE							WOMEN'S COMMUNITY
- BATON ROUGE , LA 70806	72-1033793	501(C)(3)	6,228.	0.			REHABILITATION CENTER
LOUISIANA LEADERSHIP INSTITUTE							DDOUTDE BOOD MO MUE
5763 HOOPER ROAD	70 1401653	E01/G)/2)	F0.000	_			PROVIDE FOOD TO THE
BATON ROUGE , LA 70811	72-1421653	501(C)(3)	50,000.	0.			UNDERPRIVILEGED CHIL
LOUISIANA SUPERINTENDENTS ACADEMY							
3436 MAGAZINE STREET							LOUISIANA EDUCATION:
NEW ORLEANS , LA 70115	47-5457459	501(C)(3)	91,667.	0.			2019-2020 INITIATIV
LOUISIANA SYMPHONY ASSOCIATION /				<u> </u>			
BATON ROUGE SYMPH - 9635 FENWAY							
AVENUE							
- BATON ROUGE , LA 70809	72-6001959	501(C)(3)	45,588.	0.			GENERAL SUPPORT
LOUISIANA WILDLIFE AND FISHERIES			15,550.	<u> </u>			
FOUNDATION - POST OFFICE							
BOX 80378							BLUE-WINGED TEAL BAND:
- BATON ROUGE , LA	72-1314968	501(C)(3)	7,500.	0.			PROJECT

Schedule I (Form 990)

Part II Continuation of Gr	rants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government		(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA YOUTH SEMINA	R INC.							
POST OFFICE BOX 14241								
	, LA 70898	72-0770035	501(C)(3)	10,000.	0.			GENERAL SUPPORT
LOYOLA UNIVERSITY								
CAMPUS BOX 909								
	, LA 70118	72-0408946	501(C)(3)	21,000.	0.			GENERAL SUPPORT
LSU ALUMNI ASSOCIATION	ī							
LOD COOK ALUMNI CENTER								
	, LA 70808	72-6027430	501(C)(3)	11,250.	0.			GENERAL SUPPORT
	•							
LSU FOUNDATION								
3796 NICHOLSON DRIVE								
BATON ROUGE	, LA 70802	72-6020969	501(C)(3)	794,568.	0.			GENERAL SUPPORT
MAISON DES AMI OF LOUI								
1050 CONVENTION STREET		E0 1155054	501/61/21	16 500				
BATON ROUGE	, LA 70802	72-1177274	501(C)(3)	16,500.	0.			GENERAL SUPPORT
MANNERS OF THE HEART								
763 NORTH BOULEVARD								
	, LA 70802	68-0531760	501(C)(3)	7,600.	0.			GENERAL SUPPORT
	,		·	, ,				
MAP 1040								
POST OFFICE BOX 8301								
CLINTON	, LA 70722	72-1499143	501(C)(3)	6,500.	0.			MISSION WORK
MARIGNY OPERA HOUSE FO								
725 ST. FERDINAND STRE								
	, LA 70117	45-4231295	501(C)(3)	20,000.	0.			NUTCRACKER PROGRAM
MARTHA GRAHAM CENTER F								
CONTEMPORARY DANCE INC	- 55							
BETHUNE STREET	NTS7 10014	12 2571062	E01/G\/3\	25 000	_			CONTINUED CENCE DE CARCO
- NEW YORK	, NY 10014	13-2571063	DOT(C)(3)	25,000.	0.			CONVERGENCE PROJECT

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
MADY DIDD DEDWING CANCED CENTED											
MARY BIRD PERKINS CANCER CENTER											
OFFICE OF DEVELOPMENT BATON ROUGE LA 70809	23-7010520	E01/G\/2\	177,896.	0.			GENERAL SUPPORT				
MARY BIRD PERKINS CANCER CENTER	23-7010320	501(0)(3)	177,830.	0.			GENERAL SUFFORT				
FOUNDATION - 4950 ESSEN											
LANE											
- BATON ROUGE , LA 70809	20-2046461	501(C)(3)	127,073.	0.			GENERAL SUPPORT				
, 211 / 00005			127,676								
MEMORY PROJECT PRODUCTIONS INC.											
POST OFFICE BOX 20171											
NEW YORK , NY 10014	26-2475359	501(C)(3)	20,000.	0.			GENERAL SUPPORT				
•			,								
METROMORPHOSIS											
4163 NORTH BOULEVARD											
BATON ROUGE , LA 70806	45-5102759	501(C)(3)	277,667.	0.			GENERAL SUPPORT				
MID CITY REDEVELOPMENT ALLIANCE											
INC 419 NORTH											
19TH STREET											
- BATON ROUGE , LA 70802	72-1196990	501(C)(3)	9,250.	0.			GENERAL SUPPORT				
NATIONAL AUDUBON SOCIETY INC											
AUDUBON LOUISIANA - 5615											
CORPORATE BOULEVARD											
- BATON ROUGE , LA 70808	13-1624102	501(C)(3)	22,500.	0.			GENERAL SUPPORT				
NATIONAL FEDERATION OF THE BLIND											
INC 200 EAST WELLS											
STREET AT JERNIGAN PLACE											
- BALTIMORE , MD 21230	02-0259978	501(C)(3)	15,000.	0.			GENERAL SUPPORT				
NATIONAL REDISTRICTING FOUNDATION											
700 13TH STREET NORTHWEST											
WASHINGTON , DC 20005	82-0757693	501(C)(3)	50,000.	0.			GENERAL SUPPORT				
NATIONAL WORLD WAR II MUSEUM INC.											
945 MAGAZINE STREET											
NEW ORLEANS , LA 70130	72-1200790	501(C)(3)	5,500.	0.			GENERAL SUPPORT				

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
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NAMIDE CONCEDUANCY LOUICIANA										
NATURE CONSERVANCY - LOUISIANA POST OFFICE BOX 4125										
BATON ROUGE , LA 70821	53-0242652	501 (C) (3)	116,549.	0.			GENERAL SUPPORT			
Brion Roods , En 70021	33 0242032	301(0)(3)	110,343.	0.			SHARKIE BOTTOKT			
NEW ORLEANS AIRLIFT										
1031 PIETY STREET										
NEW ORLEANS , LA 70117	27-2795334	501(C)(3)	10,000.	0.			GENERAL SUPPORT			
,			, -							
NEW ORLEANS CAREER CENTER										
531 SECOND STREET							LOUISIANA EDUCATION:			
NEW ORLEANS , LA 70130	82-2541222	501(C)(3)	183,334.	0.			2019-2020 INITIATIV			
NEW ORLEANS MUSEUM OF ART										
POST OFFICE BOX 19123										
NEW ORLEANS , LA 70179	72-6000331	501(C)(3)	35,000.	0.			GENERAL SUPPORT			
NEW ORLEANS MUSICIANS ASSISTANCE										
FOUNDATION - 1525 LOUISIANA										
AVENUE										
- NEW ORLEANS , LA 70115	20-8139539	501(C)(3)	15,000.	0.			GENERAL SUPPORT			
NEW ORLEANS OPERA ASSOCIATION										
POST OFFICE BOX 52108										
NEW ORLEANS , LA										
70152-2108	72-0272897	501(C)(3)	34,000.	0.			GENERAL SUPPORT			
NEW PATHWAYS NOLA INC										
4035 WASHINGTON AVENUE							LOUISIANA EDUCATION:			
NEW ORLEANS , LA 70125	81-4176214	501(C)(3)	50,000.	0.			2019-2020 INITIATIV			
NEW GOUGOI G HOD DAWON DOUGH										
NEW SCHOOLS FOR BATON ROUGE										
100 LAFAYETTE STREET BATON ROUGE LA 70801	45-3843085	E01/G\/3\	110 500	0.			GENERAL SUPPORT			
BATON ROUGE , LA 70801	43-3043065	201(C)(3)	119,500.	0.			GENERAL SUFFUKT			
NEW SCHOOLS FOR NEW ORLEANS INC.										
1555 POYDRAS STREET							LOUISIANA EDUCATION:			
NEW ORLEANS , LA 70112	02-0773717	501(C)(3)	1,283,334.	0.			2019-2020 INITIATIV			
, m /ollz	02 0773717	331(0)(3)	1,203,334.	٠.			ZOIS ZOZO INITIATIV			

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NUNU ARTS AND CULTURE COLLECTIVE							
INC POST OFFICE							
BOX 556							
- ARNAUDVILLE , LA 70512	20-8975352	501(C)(3)	50,000.	0.			BUILDING FUND
NWEA							
121 NORTHWEST EVERETT STREET							LOUISIANA EDUCATION:
	93-0686108	501/01/31	458,334.	0.			2019-2020 INITIATIV
PORTLAND , OR 97209	93-0000100	501(0)(3)	450,554.	٠.			Z019-Z020 INITIATIV
O'BRIEN HOUSE INC.							
446 NORTH 12TH STREET							
	72-0702820	501/01/31	12,697.	0.			GENERAL SUPPORT
BATON ROUGE , LA 70802	72 0702020	501(0)(3)	12,057.	· ·			GENERAL BUTTORT
OCHSNER CLINIC FOUNDATION							
1514 JEFFERSON HIGHWAY							
	72-0502505	501(C)(3)	567,000.	0.			GENERAL SUPPORT
NEW ORLEANS , LA 70121	72 0302303	501(0)(3)	307,000.	· ·			GENERAL BUTTORT
OF MOVING COLORS PRODUCTIONS							
POST OFFICE BOX 14700	72 1120001	E01/G)/2)	15 000	,			GENERAL GURRORE
BATON ROUGE , LA 70898	72-1130981	501(C)(3)	15,000.	0.			GENERAL SUPPORT
00000 100000000000000							
OPERA LOUISIANE INC.							
POST OFFICE BOX 4908	00 0550064	504 (5) (0)	.=				
BATON ROUGE , LA 70821	20-8572361	501(C)(3)	27,500.	0.			GENERAL SUPPORT
OPERATION BLESSING INTERNATIONAL							
977 CENTERVILLE TURNPIKE							
VIRGINIA BEACH , VA 23463	54-1382657	501(C)(3)	7,500.	0.			HURRICANE LAURA RELIEF
OUR LADY OF MERCY CATHOLIC CHURCH							
445 MARQUETTE AVENUE							
BATON ROUGE , LA 70806	72-0519880	501(C)(3)	305,500.	0.			GENERAL SUPPORT
OUR LADY OF MERCY CATHOLIC SCHOOL							
400 MARQUETTE AVENUE							
BATON ROUGE , LA 70806	72-0941031	501(C)(3)	10,500.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	Z 0000051 ray
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUR LADY OF MT. CARMEL CHURCH							
POST OFFICE BOX 1249							
ST. FRANCISVILLE , LA							
70775-1249	72-0750982	501(C)(3)	148,889.	0.			GENERAL SUPPORT
OUR LADY OF THE LAKE FOUNDATION POST OFFICE BOX 84357							
BATON ROUGE , LA 70884	72-1014324	501(C)(3)	231,815.	0.			GENERAL SUPPORT
OUR VOICE NUESTRA VOZ POST OFFICE BOX 58740 NEW ORLEANS , LA 70158	47-4564599	501(C)(3)	91,667.	0.			LOUISIANA EDUCATION: 2019-2020 INITIATIV
PAHARA INSTITUTE							
							LOUISIANA EDUCATION:
340 SOUTH LEMON AVENUE	45 5141605	E01/G\/2\	220 167	0.			
WALNUT , CA 91789 PARTICULAR COUNCIL OF ST. VINCENT	45-5141625	501(C)(3)	229,167.	٠.			2019-2020 INITIATIV
DE PAUL OF BATON - POST OFFICE BOX							
127							
	72-0646911	501/0\/3\	99,297.	0.			GENERAL SUPPORT
- BATON ROUGE , LA PARTNERS FOR PROGRESS	72-0040911	501(C)(3)	33,237.	٠.			GENERAL SUPPORT
INC./PARTNERS SOUTHEAST -							
4731 NORTH BOULEVARD							PURCHASE BED FRAMES,
- BATON ROUGE , LA 70806	31-1740153	501 (C) (3)	15,000.	0.			MATTRESSES, LINENS,
	31 1710133	301(0)(3)	13,000.				HITTINGSES, BINERS,
PASTORAL CENTER							
POST OFFICE BOX 129							
PAULINA , LA 70763	72-0478574	501(C)(3)	55,245.	0.			DISTRIBUTIONS
•			,				
PAUL QUINN COLLEGE							
3837 SIMPSON STUART ROAD							LOUISIANA EDUCATION:
DALLAS , TX 75241	74-1238438	501(C)(3)	35,000.	0.			2019-2020 INITIATIV
PENNINGTON BIOMEDICAL RESEARCH			,				
FOUNDATION - 6400 PERKINS							
ROAD							
- BATON ROUGE , LA 70808	58-1767810	501(C)(3)	156,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other A	ASSISTANCE TO DOI		and Domestic do	verninents (OCIN		T	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD OF THE GULF							
COAST INC 4600 GULF							
FREEWAY							GENERAL OPERATIONS IN
- HOUSTON , TX 77023	74-1100163	501(C)(3)	14,000.	0.			LOUISIANA
POLICY INSTITUTE FOR THE CHILDREN							
OF LOUISIANA INC - POST OFFICE BOX							
13552							
- NEW ORLEANS , LA 70185	46-4487461	501(C)(3)	25,000.	0.			GENERAL SUPPORT
POLITICRAFT INC.							
16026 HIGHLAND BLUFF COURT							
BATON ROUGE , LA 70810	47-2666456	501(C)(3)	6,000.	0.			GENERAL SUPPORT
PRESIDENT AND FELLOWS OF HARVARD			1,				
COLLEGE - POST OFFICE							
BOX 412275							
- BOSTON , MA 02241	04-2103580	501(C)(3)	31,000.	0.			GENERAL SUPPORT
,			1 ,	- •			
PROPEL AMERICA							
POST OFFICE BOX 990443							LOUISIANA EDUCATION:
BOSTON , MA 02199	83-1867782	501(C)(3)	527,579.	0.			2019-2020 INITIATIV
PUBLIC AFFAIRS RESEARCH COUNCIL OF			, , , , , ,				
LOUISIANA INC POST OFFICE BOX							
14776							
- BATON ROUGE , LA	72-0436118	501(C)(3)	8,000.	0.			GENERAL SUPPORT
REBUILDING TOGETHER BATON ROUGE			1,111				
INC POST OFFICE							
BOX 1109							
- BATON ROUGE , LA	20-1459780	501(C)(3)	61,839.	0.			GENERAL SUPPORT
,		, , . ,	1=,155				
RED SHOES INC.							
2303 GOVERNMENT STREET							
BATON ROUGE , LA 70806	72-1495796	501(C)(3)	27,500.	0.			GENERAL SUPPORT
, 211 , 0000	.2 2133,30		27,300.	• •			
RELIANT MISSION INC.							
11002 LAKE HART DRIVE							
ORLANDO FL 32832	52-1707002	501(C)(3)	6,500.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Othe	r Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESEARCH PARK CORPORATION							
7117 FLORIDA BOULEVARD							
BATON ROUGE , LA 70806	58-2087281	501(C)(3)	10,000.	0.			GENERAL SUPPORT
RICE UNIVERSITY							
OFFICE OF DEVELOPMENT - MS 81							
HOUSTON , TX 77251	74-1109620	501(C)(3)	15,000.	0.			GENERAL SUPPORT
ROMAN CATHOLIC DIOCESE OF BATON							
ROUGE - BISHOP'S A - POST OFFICE							
BOX 2028							
- BATON ROUGE , LA 70821	72-0550127	501(C)(3)	464,903.	0.			GENERAL SUPPORT
ROOTS OF MUSIC INC. 2624 BURGUNDY STREET							
NEW ORLEANS , LA 70117	26-1160255	501(C)(3)	15,000.	0.			GENERAL SUPPORT
,			1	-			
ROTARY DISTRICT 6200 FOUNDATION							
2266 SOUTH COLLEGE ROAD							
LAFAYETTE , LA 70508	20-3409654	501(C)(3)	25,075.	0.			   HURRICANE LAURA RELIEF
SACRED HEART OF JESUS CATHOLIC			,				
CHURCH - 2250 MAIN							
STREET							
- BATON ROUGE , LA 70802	72-0408918	501(C)(3)	17,000.	0.			GENERAL SUPPORT
·			,				
SAVE CENLA							
POST OFFICE BOX 381							
DUPONT , LA 71329	81-4863849	501(C)(3)	7,500.	0.			GENERAL SUPPORT
SECOND HARVEST FOOD BANK OF							
GREATER NEW ORLEANS AN - 700							
EDWARDS AVENUE							
NEW ORLEANS , LA 70123	72-0956468	501(C)(3)	16,000.	0.			GENERAL SUPPORT
SEXUAL TRAUMA AWARENESS AND							
RESPONSE CENTER - 5615							
CORPORATE BOULEVARD							
- BATON ROUGE , LA 70808	45-3088168	501(C)(3)	50,800.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other						T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHAW CENTER FOR THE ARTS							
100 LAFAYETTE STREET							
BATON ROUGE , LA							
70801-1201	42-1554743	501(C)(3)	308,566.	0.			OPERATING SUPPORT
SHRINERS HOSPITAL FOR CHILDREN							
2900 NORTH ROCKY POINT DRIVE							SUPPORT THE SHRINERS
TAMPA , FL 33607	36-2193608	501(C)(3)	13,680.	0.			HOSPITAL FOR CHILDR
SOLOMON EPISCOPAL CONFERENCE	30 2133000	301(0)(3)	13,000.	· ·			HODITIME TOK CHIEDK
CENTER - 54296							
HIGHWAY 445							
- LORANGER , LA 70446	72-1226985	E01/G\/3\	6,000.	0.			GENERAL SUPPORT
- LORANGER , LA /0440	72-1220303	501(0)(3)	0,000.	٠.			GENERAL SUFFORT
SON OF A SAINT							
2803 ST. PHILIP STREET	46 5554550	E01/G)/2)	15 000	0			GENERAL GURRORE
NEW ORLEANS , LA 70119 SOUTHEASTERN DEVELOPMENT	46-5554558	501(C)(3)	15,000.	0.			GENERAL SUPPORT
FOUNDATION INC - SLU							
BOX 10703	TO 6000001	504 (5) (0)	05.000				DEPARTMENT OF INDUSTRIAN
- HAMMOND , LA 70402	72-6028821	501(C)(3)	25,000.	0.			ENGINEERING TEC
SOUTHERN REP							
2541 BAYOU ROAD							
NEW ORLEANS , LA 70119	72-1088017	501(C)(3)	10,000.	0.			GENERAL SUPPORT
SOUTHERN UNIVERSITY SYSTEM							
FOUNDATION - POST OFFICE BOX 9562							
	22 7052011	E01/G\/3\	12 000	^			CENEDAL GIDDODM
- BATON ROUGE , LA 70813	23-7052911	DOT(C)(3)	13,000.	0.			GENERAL SUPPORT
ST. ALBAN'S CHAPEL							
5261 HIGHLAND ROAD							
	72-0642279	501/C\/3\	6,000.	0.			GENERAL SUPPORT
BATON ROUGE , LA 70808	/2-00422/9	DOT(C)(3)	6,000.	٠.			GENERAL SUPPURT
ST. ALOYSIUS CATHOLIC CHURCH							
2025 STUART AVENUE							
BATON ROUGE LA 70808	72-0491439	501/C)/3)	74,200.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- tagor
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. CATHERINE OF SIENA CATHOLIC							
CHURCH - 105 BONNABEL							
BOULEVARD							
- METAIRIE , LA 70005	72-0517800	501(C)(3)	7,500.	0.			GENERAL SUPPORT
ST. CHARLES AVENUE PRESBYTERIAN							
CHURCH - 1545 STATE							
STREET							
- NEW ORLEANS , LA 70118	72-0423638	501(C)(3)	12,000.	0.			GENERAL SUPPORT
ST. GABRIEL CATHOLIC CHURCH 3625 HIGHWAY 75							MAINTENANCE AND REPAIR OF
ST. GABRIEL , LA 70776	72-0535370	501(C)(3)	30,000.	0.			THE OLD SAINT
ST. GEORGE CATHOLIC CHURCH							
7808 SAINT GEORGE DRIVE							
BATON ROUGE , LA							
70809-4699	72-0535370	501(C)(3)	10,500.	0.			GENERAL SUPPORT
ST. GERARD MAJELLA CHURCH							
3808 ST. GERARD AVENUE							
BATON ROUGE , LA							
70805-2834	72-6001706	501(C)(3)	82,000.	0.			GENERAL SUPPORT
ST. JAMES EPISCOPAL CHURCH POST OFFICE BOX 126							
BATON ROUGE , LA 70821	72-0445323	501(C)(3)	7,500.	0.			GENERAL SUPPORT
ST. JAMES EPISCOPAL DAY SCHOOL 445 CONVENTION STREET							
BATON ROUGE , LA 70802	72-0542038	501(C)(3)	30,000.	0.			GENERAL SUPPORT
ST. JOHN THE EVANGELIST CATHOLIC							
CHURCH - 57805 MAIN							
STREET							
PLAQUEMINE , LA 70764	72-0431223	501(C)(3)	17,658.	0.			DISTRIBUTION
ST. JOSEPH CATHEDRAL 412 NORTH STREET							
BATON ROUGE , LA 70802	72-0505561	501(C)(3)	40,654.	0.			GENERAL SUPPORT
·	•					•	0 - 1 1 - 1 / 5 200)

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- Tug
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. JOSEPH CATHOLIC CHURCH							
15710 LOUISIANA HIGHWAY 16							
FRENCH SETTLEMENT , LA 70733	72-0795158	501 (C) (3)	10,049.	0.			DISTRIBUTIONS
ST. JOSEPH THE WORKER CHURCH	72 0733130	501(0)(3)	10,045.	· ·			DIBINIBOTIONS
POST OFFICE BOX 190							
PIERRE PART , LA							
70339-0190	72-0551978	501(C)(3)	24,087.	0.			DISTRIBUTIONS
70339-0190	72-0331370	501(0)(3)	24,007.	0.			DISTRIBUTIONS
ST. JOSEPH'S ACADEMY							
3015 BROUSSARD STREET							
	72-6001242	501/0\/3\	31 600	0.			GENERAL SUPPORT
BATON ROUGE , LA 70808	72-6001242	501(C)(3)	31,600.	٠.			GENERAL SUPPORT
ST. JUDE CATHOLIC CHURCH							
9150 HIGHLAND ROAD							
	72-0888559	E01/G\/3\	10 000	0.			GENERAL SUPPORT
BATON ROUGE , LA 70810 ST. JUDE CHILDREN'S RESEARCH	72-0888333	501(C)(3)	18,000.	٠.			GENERAL SUPPORT
HOSPITAL INC 501 ST.							
JUDE PLACE							
	62-0646012	E01/G\/3\	7 600	0.			GENERAL SUPPORT
- MEMPHIS , TN 38105 ST. JUDE THE APOSTLE CATHOLIC	02-0646012	501(0)(3)	7,600.	0.			GENERAL SUPPORT
ADVANCEMENT	72 0072025	E01/G\/2\	F 000				GENERAL GURRORE
BATON ROUGE , LA 70810	72-0973825	501(0)(3)	5,898.	0.			GENERAL SUPPORT
CM ITIITAN ACADEMY							
ST. LILLIAN ACADEMY							
POST OFFICE BOX 45377	27-3094681	E01/G)/2)	0.500	_			GENERAL GURRORE
BATON ROUGE , LA 70895	27-3094001	501(0)(3)	8,500.	0.			GENERAL SUPPORT
cm live's episcopal duiper							
ST. LUKE'S EPISCOPAL CHURCH							
8833 GOODWOOD BOULEVARD	72 0650150	E01/Q\/2\	05 000	_			CENTED AT GUIDDODE
BATON ROUGE , LA 70806	72-0650150	DUT(C)(3)	95,203.	0.			GENERAL SUPPORT
ST. PHILIP PARISH							
1175 HIGHWAY 18							
VACHERIE , LA				_			
70090-5357	72-0491085	501(C)(3)	7,535.	0.			DISTRIBUTIONS

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. SHARBEL MAKHLOUF FOUNDATION							
INC POST OFFICE							
BOX 1741							
BATON ROUGE , LA 70821	47-4272762	501(C)(3)	2,500.	0.			GENERAL SUPPORT
ST. THERESA OF AVILA MIDDLE SCHOOL							
212 EAST NEW RIVER STREET							
GONZALES , LA							
70737-2499	72-0535758	501(C)(3)	25,072.	0.			DISTRIBUTIONS
ST. THOMAS AQUINAS REGIONAL							
CATHOLIC HIGH SCHOOL - 14520							
VOSS DRIVE							
- HAMMOND , LA 70401	72-1015651	501(C)(3)	57,139.	0.			DISTRIBUTIONS
TEACH FOR AMERICA INC SOUTH							
LOUISIANA - POST OFFICE							
BOX 65148							
- BATON ROUGE , LA 70896	13-3541913	501(C)(3)	397,500.	0.			GENERAL SUPPORT
THE ADMINISTRATORS OF THE TULANE							
EDUCATIONAL FUND - POST OFFICE							
BOX 61075							
- NEW ORLEANS , LA 70161	72-0423889	501(C)(3)	171,350.	0.			GENERAL SUPPORT
THE ASCENSION FUND INC.							
POST OFFICE BOX 1420							DISTRIBUTIONS AVAILABLE
GONZALES , LA 70707	72-1186479	501(C)(3)	56,060.	0.			FOR GRANTMAKING
,		( . , ( . ,	,,,,,,,				
THE AWTY INTERNATIONAL SCHOOL							
7455 AWTY SCHOOL LANE							
HOUSTON , TX 77055	23-7258712	501(C)(3)	15,000.	0.			GENERAL SUPPORT
•			,				
THE BASCOM CORPORATION							
323 FRANKLIN ROAD							
HIGHLANDS , NC 28741	56-2093546	501(C)(3)	7,000.	0.			GENERAL SUPPORT
THE COMMUNITY FOUNDATION FOR		·	, ,				
GREATER ATLANTA INC 191							
PEACHTREE STREET NORTHEAST							WENDELL AND MARY REILLY
- ATLANTA , GA 30303	58-1344646	501(C)(3)	38,998.	0.			DONOR ADVISED FU
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Organization or government fit applicable cash grant non-cash assistance assistance assistance assistance assistance assistance assistance assistance assistance for the community foundation of the community foundation for grants have been foundation for grants have community for the community foundation for grants have been foundation for the community foundation for the community foundation for grants have been foundation for grants have been foundation for the community foundation for the community foundation for the community foundation for grants have been foundation for grants and foundation for grants have been foundation for grants and foundation for grants have been foundation for grants for the community for grants have been foundation for grants for grants have been foundation for grants fo								
MESTERN MORTE CAROLINA - 4 VANDERBILT PARK DRIVE  - ASHEVILLE  - ASHEV	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant		(book, FMV,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FRIENDS OF THE RURAL LIFE  MOX 14852  BATON ROUGE  LA 70898  72-1385907  501(C)(3)  12,550.  0.  SENERAL SUPPORT  THE GREATER NEW ORLEANS FOUNDATION FOST OFFICE BOX 57749  THE HARGROVE FOUNDATION 20 SOUTH ROYAL STREET  MOBILE  AL 36602  45-2712738  501(C)(3)  97,473.  0.  SENERAL SUPPORT  THE HARGROVE FOUNDATION 20 SOUTH ROYAL STREET  MOBILE  AL 36602  45-2712738  501(C)(3)  10,000.  0.  THE MENTAL HEALTH ASSOCIATION FOR GREATER BATON RO - 544 COLONIAL  DELIVE  BATON ROUGE  AL 70806  SENERAL SUPPORT  THE REFCORS AND VISITORS OF THE  UNIVERSITY OF VIRC - OFFICE OF  SPONSORD PROGRAMS  CHARLOTTESVILLE  VA  54-6001796  501(C)(3)  198,000.  0.  METROR SUPPORT THE READY STA  NETWORK  THE SALVATION ARMY - BATON ROUGE FOST OFFICE BOX 15467  BATON ROUGE  ALA 70895-5467  THE UNIVERSITY OF TEXAS AT AUSTIN FOST OFFICE BOX 7216  AUSTIN  74-600203  501(C)(3)  70,000.  0.  SUPPORT THE CHARLE SUPPORT  DESIGN TEACHING METHO SYLLABI FOR ELEME  THE WALLS PROJECT  458 AMERICA STREET	THE COMMUNITY FOUNDATION OF							
- ASHEVILLE	WESTERN NORTH CAROLINA - 4							
THE FIRINDS OF THE RURAL LIFE MUSEUM INC POST OFFICE BOX 14852 - BATON ROUGE	VANDERBILT PARK DRIVE							
MUSEUM INC POST OFFICE BOX 14852 - BATON ROUGE	- ASHEVILLE , NC 28803	56-1223384	501(C)(3)	18,000.	0.			HIGHLANDS COMMUNITY FUND
BOX 14852 - BATON ROUGE	THE FRIENDS OF THE RURAL LIFE							
- BATON ROUGE	MUSEUM INC POST OFFICE							
THE GREATER NEW ORLEANS FOUNDATION POST OFFICE BOX 57749 NEW ORLEANS	BOX 14852							
POST OFFICE BOX 57749 NEW ORLEANS	- BATON ROUGE , LA 70898	72-1385907	501(C)(3)	12,550.	0.			GENERAL SUPPORT
THE HARGROVE FOUNDATION 20 SOUTH ROYAL STREET  MOBILE								
20 SOUTH ROYAL STREET  MOBILE , AL 36602 45-2712738 501(C)(3) 10,000. 0. GENERAL SUPPORT  THE MENTAL HEALTH ASSOCIATION FOR GREATER BATON RO - 544 COLONIAL DRIVE  BATON ROUGE , LA 70806 72-0688911 501(C)(3) 41,698. 0. GENERAL SUPPORT  THE RECTORS AND VISITORS OF THE UNIVERSITY OF VIRG - OFFICE OF SPONSORED PROGRAMS  - CHARLOTTESVILLE , VA 54-6001796 501(C)(3) 198,000. 0. NETWORK  THE SALVATION ARMY - BATON ROUGE POST OFFICE BOX 15467  BATON ROUGE , LA 70895-5467 58-0660607 501(C)(3) 29,788. 0. GENERAL SUPPORT  THE UNIVERSITY OF TEXAS AT AUSTIN POST OFFICE BOX 7216  AUSTIN , TX DESIGN TEACHING METHOR ROUGE 78713-7216 74-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME	NEW ORLEANS , LA 70157	72-0408921	501(C)(3)	97,473.	0.			GENERAL SUPPORT
THE MENTAL HEALTH ASSOCIATION FOR GREATER BATON RO - 544 COLONIAL DRIVE  - BATON ROUGE	20 SOUTH ROYAL STREET	45-2712738	501(C)(3)	10 000	0			GENERAL SUDDORT
GREATER BATON RO - 544 COLONIAL DRIVE - BATON ROUGE , LA 70806 72-0688911 501(C)(3) 41,698. 0.  SENERAL SUPPORT  THE RECTORS AND VISITORS OF THE UNIVERSITY OF VIRG - OFFICE OF SPONSORED PROGRAMS - CHARLOTTESVILLE , VA 54-6001796 501(C)(3) 198,000. 0.  NETWORK  SUPPORT THE READY STA  CHARLOTTESVILLE , VA 54-6001796 501(C)(3) 198,000. 0.  NETWORK  SUPPORT THE READY STA  O.  SENERAL SUPPORT  THE SALVATION ARMY - BATON ROUGE POST OFFICE BOX 15467  BATON ROUGE , LA 70895-5467 58-0660607 501(C)(3) 29,788. 0.  SENERAL SUPPORT  THE UNIVERSITY OF TEXAS AT AUSTIN POST OFFICE BOX 7216 AUSTIN , TX 74-6000203 501(C)(3) 70,000. 0.  SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET		43 2712730	501(0)(5)	10,000.	0.			DENERGE BOTTOKT
DRIVE - BATON ROUGE , LA 70806 72-0688911 501(C)(3) 41,698. 0. SENERAL SUPPORT THE RECTORS AND VISITORS OF THE UNIVERSITY OF VIRG - OFFICE OF SPONSORED PROGRAMS SUPPORT THE READY STA - CHARLOTTESVILLE , VA 54-6001796 501(C)(3) 198,000. 0. NETWORK  THE SALVATION ARMY - BATON ROUGE POST OFFICE BOX 15467 BATON ROUGE , LA 70895-5467 58-0660607 501(C)(3) 29,788. 0. SENERAL SUPPORT THE UNIVERSITY OF TEXAS AT AUSTIN POST OFFICE BOX 7216 AUSTIN , TX 74-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET								
- BATON ROUGE								
THE RECTORS AND VISITORS OF THE UNIVERSITY OF VIRG - OFFICE OF SPONSORED PROGRAMS - CHARLOTTESVILLE , VA 54-6001796 501(C)(3) 198,000. 0. NETWORK  THE SALVATION ARMY - BATON ROUGE POST OFFICE BOX 15467 BATON ROUGE , LA 70895-5467 58-0660607 501(C)(3) 29,788. 0. GENERAL SUPPORT THE UNIVERSITY OF TEXAS AT AUSTIN POST OFFICE BOX 7216 AUSTIN , TX 74-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET		72-0688911	501(C)(3)	41 698	0			GENERAL SUPPORT
UNIVERSITY OF VIRG - OFFICE OF  SPONSORED PROGRAMS - CHARLOTTESVILLE , VA 54-6001796 501(C)(3) 198,000. 0. NETWORK  THE SALVATION ARMY - BATON ROUGE POST OFFICE BOX 15467 BATON ROUGE , LA 70895-5467 58-0660607 501(C)(3) 29,788. 0. GENERAL SUPPORT  THE UNIVERSITY OF TEXAS AT AUSTIN POST OFFICE BOX 7216 AUSTIN , TX  TA-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET		12 111111		12,000				
SPONSORED PROGRAMS - CHARLOTTESVILLE , VA 54-6001796 501(C)(3) 198,000. 0. NETWORK  THE SALVATION ARMY - BATON ROUGE POST OFFICE BOX 15467 BATON ROUGE , LA  70895-5467 58-0660607 501(C)(3) 29,788. 0. GENERAL SUPPORT  THE UNIVERSITY OF TEXAS AT AUSTIN POST OFFICE BOX 7216 AUSTIN , TX  74-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET	UNIVERSITY OF VIRG - OFFICE OF							
THE SALVATION ARMY - BATON ROUGE  POST OFFICE BOX 15467  BATON ROUGE , LA  70895-5467	SPONSORED PROGRAMS							SUPPORT THE READY STARTS
THE SALVATION ARMY - BATON ROUGE  POST OFFICE BOX 15467  BATON ROUGE , LA  70895-5467	- CHARLOTTESVILLE VA	54-6001796	501(C)(3)	198,000.	0.			NETWORK
BATON ROUGE , LA  70895-5467	· · · · · · · · · · · · · · · · · · ·			,				
70895-5467 58-0660607 501(C)(3) 29,788. 0. GENERAL SUPPORT  THE UNIVERSITY OF TEXAS AT AUSTIN  POST OFFICE BOX 7216  AUSTIN , TX  74-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME  THE WALLS PROJECT  458 AMERICA STREET	POST OFFICE BOX 15467							
70895-5467 58-0660607 501(C)(3) 29,788. 0. GENERAL SUPPORT  THE UNIVERSITY OF TEXAS AT AUSTIN  POST OFFICE BOX 7216  AUSTIN , TX  74-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME  THE WALLS PROJECT  458 AMERICA STREET	BATON ROUGE LA							
THE UNIVERSITY OF TEXAS AT AUSTIN POST OFFICE BOX 7216 AUSTIN , TX 74-6000203 501(C)(3) 70,000. 0. DESIGN TEACHING METHO SYLLABI FOR ELEME THE WALLS PROJECT 458 AMERICA STREET		58-0660607	501(C)(3)	29,788.	0.			GENERAL SUPPORT
AUSTIN , TX 74-6000203 501(C)(3) 70,000. 0. DESIGN TEACHING METHO SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET	THE UNIVERSITY OF TEXAS AT AUSTIN			1				
AUSTIN , TX 74-6000203 501(C)(3) 70,000. 0. DESIGN TEACHING METHO SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET	POST OFFICE BOX 7216							
78713-7216 74-6000203 501(C)(3) 70,000. 0. SYLLABI FOR ELEME  THE WALLS PROJECT 458 AMERICA STREET	AUSTIN TX							DESIGN TEACHING METHOD
458 AMERICA STREET	•	74-6000203	501(C)(3)	70,000.	0.			
	BATON ROUGE LA 70802	45_5485171	501/C)/3)	50,800.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- cccc rago
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE WRITING REVOLUTION INC.							
22 CORTLANDT STREET							LOUISIANA EDUCATION:
NEW YORK , NY 10007	46-4970867	501 (C) (3)	25,000.	0.			2019-2020 INITIATIV
, NI 10007	40 4570007	501(0)(3)	25,000.	<u> </u>			ZOIS ZOZO INITIATIV
THREE O'CLOCK PROJECT							
804 MAIN STREET							
BATON ROUGE , LA 70802	81-2133947	501(C)(3)	101,000.	0.			GENERAL SUPPORT
,							
THRIVE FOUNDATION							
2585 BRIGHTSIDE DRIVE							
BATON ROUGE , LA 70820	46-4134463	501(C)(3)	162,000.	0.			GENERAL SUPPORT
·							
TIGER ATHLETIC FOUNDATION							
POST OFFICE BOX 711							
BATON ROUGE , LA 70821	72-1004960	501(C)(3)	27,500.	0.			GENERAL SUPPORT
TREY MCINTYRE PROJECT LTD							
56 SECOND AVENUE							
BROOKLYN , NY							
11215-4599	65-1239526	501(C)(3)	25,000.	0.			GENERAL SUPPORT
TRINITY EPISCOPAL CHURCH - BATON							
ROUGE - 3552 MORNING							
GLORY							
- BATON ROUGE , LA 70808	72-0460812	501(C)(3)	8,934.	0.			GENERAL SUPPORT
TRINITY EPISCOPAL CHURCH - NEW							
ORLEANS - 1329 JACKSON							
AVENUE							
- NEW ORLEANS , LA	72-0467513	501(C)(3)	48,000.	0.			GENERAL SUPPORT
UNITED WAY OF BEAUMONT AND NORTH							
JEFFERSON COUNTY - 700 NORTH							
STREET							
BEAUMONT , TX 77701	74-1200117	501(C)(3)	10,000.	0.			CORPORATE GIFTS
UNITED WAY OF GREATER HOUSTON							
50 WAUGH DRIVE							
HOUSTON , TX 77007	74-1167964	501(C)(3)	20,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF LAMAR COUNTY							
POST OFFICE BOX 1							
PARIS , TX 75461	75-0886453	501(C)(3)	15,000.	0.			CORPORATE GIFTS
,			23,333				
UNITED WAY OF MORGAN COUNTY							
POST OFFICE BOX 1058							
DECATUR , AL 35602	63-0358762	501(C)(3)	7,500.	0.			CORPORATE GIFTS
·							
UNITED WAY OF SOUTHEAST LOUISIANA							
2515 CANAL STREET							
NEW ORLEANS , LA 70119	72-0471369	501(C)(3)	7,500.	0.			CORPORATE GIFTS
UNITED WAY OF SOUTHWEST LOUISIANA							
INC 815 RYAN STREET							
- LAKE CHARLES , LA 70601	72-0456901	501(C)(3)	20,000.	0.			GENERAL SUPPORT
UNITED WAY OF THE COASTAL BEND							
INC 4659							
EVERHART ROAD							
- CORPUS CHRISTI , TX 78411	74-1207552	501(C)(3)	7,500.	0.			CORPORATE GIFTS
UNIVERSITY DISTRICT SERVICE LEAGUE							
5017 ROOSEVELT WAY NORTHEAST							
SEATTLE , WA 98105	91-1224834	501(C)(3)	46,148.	0.			GENERAL SUPPORT
UNIVERSITY OF THE SOUTH							
735 UNIVERSITY AVENUE							
SEWANEE , TN 37383	62-0475697	501(C)(3)	25,000.	0.			GENERAL SUPPORT
UNIVERSITY PRESBYTERIAN CHURCH							
3240 DALRYMPLE DRIVE							
BATON ROUGE , LA 70802	72-6001426	501(C)(3)	107,700.	0.			GENERAL SUPPORT
URBAN LEAGUE OF LOUISIANA							
4640 SOUTH CARROLLTON AVENUE		F01 (7) (0)		_			
NEW ORLEANS , LA 70119	72-0423627	501(C)(3)	52,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US BIENNIAL INC.							
PROSPECT NEW ORLEANS							
NEW ORLEANS , LA 70158	20-8374608	501(C)(3)	50,000.	0.			GENERAL SUPPORT
WALEDO ENEDOV BOUNDAMION							
VALERO ENERGY FOUNDATION							
POST OFFICE BOX 690430	54 0004514	F01/71/21	50.000				
SAN ANTONIO , TX 78269	74-2904514	501(C)(3)	50,000.	0.			2020 BENEFIT FOR CHILDREN
VIEUX CARRE COMMISSION FOUNDATION							
POST OFFICE BOX 57444							
NEW ORLEANS , LA				_			
70157-7444	90-0424605	501(C)(3)	10,000.	0.			GENERAL SUPPORT
VOLUNTEERS IN PUBLIC SCHOOLS INC. WILMA C. MONTGOMERY CENTER BATON ROUGE , LA 70805	72-1002253	501 (C) (3)	55,650.	0.			GENERAL SUPPORT
VOLUNTEERS OF AMERICA INC.	72-1002255	301(C)(3)	33,030.	0.			GENERAL SUFFORT
3949 NORTH BOULEVARD							
BATON ROUGE , LA	72 1020052	F01/G)/2)	11 000				GENERAL GURRORE
70806-3827	72-1020853	501(C)(3)	11,000.	0.			GENERAL SUPPORT
WALK-ON'S GAME ON FOUNDATION INC. 3960 BURBANK DRIVE	46-0725510	501 (G) (2)	25.000				SUPPORT PROVIDING MEALS
BATON ROUGE , LA 70808 WEST BATON ROUGE FOUNDATION FOR	40-0725510	301(C)(3)	25,000.	0.			TO HOSPITALITY W
ACADEMIC EXCELLENC - POST OFFICE							
BOX 41							DISTRIBUTIONS AVAILABLE
	72-1482532	E01/G\/2\	21,707.	0.			FOR GRANTMAKING
- PORT ALLEN , LA 70767	72-1462552	301(C)(3)	21,707.	0.			FOR GRANIMAKING
WEST FLORIDA SCHOOLS TOTAL							
2400 LONGLEAF DRIVE							
PENSACOLA , FL 32526	59-6000597	170(C)(1)	6,200.	0.			GENERAL SUPPORT
WINSTON-SALEM FOUNDATION							
751 WEST FOURTH STREET							
WINSTON-SALEM , NC							
27101-2702	56-6037615	501(C)(3)	38,998.	0.			SUPPORT FOR THE ARC FUND

(a) Name and address of organization or government		(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMAN'S CLUB FOUNDATION	ON INC.							
333 LEE DRIVE								
BATON ROUGE	, LA 70808	26-1738026	501(C)(3)	20,500.	0.			DISTRIBUTIONS
WOMEN DONORS NETWORK								
POST OFFICE BOX 2930								
SAN FRANCISCO	, CA 94111	05-0542397	501(C)(3)	18,000.	0.			FOR GENERAL SUPPORT
WORLD CONNECT INC.								
632 BROADWAY								SUPPORT PANDEMIC RELIE
	, NY 10012	56-2525151	501(C)(3)	50,000.	0.			EFFORTS
WRKF PUBLIC RADIO INC.			( . , ( . ,	, , , , , , ,				
3050 VALLEY CREEK DRIV								
BATON ROUGE								
70808-3170	, 111	72-0776781	501 (C) (3)	26,055.	0.			GENERAL SUPPORT
70000 3170		72 0770701	301(0)(3)	20,033.	0.			GENERAL SOFFORT
YALE UNIVERSITY								
OFFICE OF DEVELOPMENT								
	Om 06E31	06 0646073	E01/a)/3)	7 000	0			GENERAL GURRORE
NEW HAVEN	, CT 06521	06-0646973	501(C)(3)	7,000.	0.			GENERAL SUPPORT
YMCA OF THE CAPITAL AF	o ₽ 3							
350 SOUTH FOSTER DRIVE								
		72-0408994	E01/G\/2\	1 010 404	0.			GENERAL SUPPORT
BATON ROUGE	, LA /0000	72-0408994	501(C)(3)	1,018,494.	0.			GENERAL SUPPORT
YWCA OF GREATER BATON	POLICE							
POST OFFICE BOX 66435	ROUGE							
	T 3 7000C	72 0650003	E01/G)/3\	FF F00	•			CENEDAL GUDDODE
BATON ROUGE	, LA 70896	72-0650993	DU1(C)(3)	55,500.	0.			GENERAL SUPPORT
NODWIGHODE COMMITTEE	TOTAL TARGETOR							
NORTHSHORE COMMUNITY I								
807 N. COLUMBIA STREET			501 (5) (0)		_			
COVINGTON	, LA 70433	61-1517784	501(C)(3)	175,000.	0.			GENERAL SUPPORT

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
HARDSHIP ASSISTANCE	6	11,777.	0.		
FIRST RESPONDERS	2	75,000.	0.		
MPLOYEES 1ST ASSISTANCE	938	2,469,182.	0.		
ATIENT ASSISTANCE	475	486,115.	0.		
SCHOLARSHIPS	100	172,750.	0.		

Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SCHEDULE I, PART I, LINE 2

WITHIN ONE YEAR, AN INTERIM REPORT IS REQUIRED.

THE GRANT AGREEMENT AND/OR GRANT AWARD LETTER ESTABLISHES REPORTING

GUIDELINES FOR THE GRANT RECIPIENT. UPON COMPLETION OF THE GRANT

PROJECT, THE RECIPIENT MUST SUBMIT A FISCAL ACCOUNTING ALONG WITH A

NARRATIVE REPORT ON THE USE OF THE GRANT AND THE IMPACT THAT THE GRANT

MAY HAVE HAD ON THE COMMUNITY THAT THE RECIPIENT SERVES AS OUTLINED IN

THE GRANT AWARD. THE ACCOUNTING AND REPORT ARE DUE WITHIN 60 DAYS OF

THE COMPLETION OF THE GRANT. IF THE GRANT PROJECT IS NOT COMPLETED

## **SCHEDULE J** (Form 990)

Department of the Treasury

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

Open to Public

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

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

BATON ROUGE AREA FOUNDATION

Employer identification number 72-6030391

OMB No. 1545-0047

Inspection

			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X	
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u>X</u>
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		<u>X</u>
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u>X</u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deneiits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) JOHN G. DAVIES	(i)	405,394.	0.	487,759.	35,625.	22,982.	951,760.	350,698.
	ii)	100,000.	0.	0.	0.	0.	100,000.	0.
(2) JOHN M. SPAIN	(i)	328,687.	0.	91,787.	35,625.	13,712.	469,811.	0.
EXECUTIVE VICE PRESIDENT	ii)	0.	0.	0.	0.	0.	0.	0.
(3) DEBORAH PICKELL	(i)	202,364.	0.	24,705.	46,812.	11,648.	285,529.	0.
DIRECTOR OF FINANCE	ii)	0.	0.	0.	0.	0.	0.	0.
(4) EDMUND J. GIERING, IV	(i)	175,402.	0.	5,929.	24,063.	26,992.	232,386.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(5) MUKUL VERMA	(i)	132,500.	0.	612.	16,563.	9,894.	159,569.	0.
DIRECTOR OF COMMUNICATIONS	ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
(	ii)							
1	(i)							
(	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
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	(i) _							
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	(i) _							
	ii)							
	(i) _							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A

HEALTH CLUB DUES AND SOCIAL CLUB DUES FOR JOHN SPAIN, EDMUND GIERING,

AND DEBORAH PICKELL WERE PAID BY THE ORGANIZATION AND INCLUDED ON FORM

W-2 AS COMPENSATION.

PART I, LINE 4B

JOHN DAVIES PARTICIPATES IN TWO IRC SECTION 457(F) DEFERRED

COMPENSATION PLANS AS A RESULT OF HIS EMPLOYMENT WITH BATON ROUGE AREA

FOUNDATION AND A RELATED ORGANIZATION. THE PLANS ARE DESIGNED TO

PROVIDE A RETIREMENT SUPPLEMENT FOR EXECUTIVE PARTICIPANTS. UNDER ONE

OF THE PLANS, JOHN DAVIES EARNS BETWEEN 10% AND 25% OF GROSS SALARY PER

YEAR. THE APPLIED PERCENTAGE DEPENDS UPON THE FAIR MARKET VALUE OF

BATON ROUGE AREA FOUNDATION'S NET ASSETS. THE BALANCE ACCUMULATED IN

THE PLAN IS SUBJECT TO A SUBSTANTIAL RISK OF FORFEITURE. JOHN DAVIES

RECEIVED A \$408,698 DISTRIBUTION FROM ONE OF THESE PLANS DURING THE TAX

YEAR.

JOHN DAVIES ALSO PARTICIPATES IN A RELATED ORGANIZATION'S IRC SECTION

457(F) NON-QUALIFIED DEFERRED COMPENSATION PLAN. ALL AMOUNTS RELATED

Schedule J (Form 990) 2020

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
TO THE IRC SECTION 457(F) PLAN ARE SUBJECT TO A SUBSTANTIAL RISK OF
FORFEITURE.
JOHN SPAIN AND DEBORAH PICKELL PARTICIPATE IN AN IRC SECTION 457F)
DEFERRED COMPENSATION PLAN AS A RESULT OF HIS/HER EMPLOYMENT WITH BATON
ROUGE AREA FOUNDATION. THE PLAN IS DESIGNED TO PROVIDE A RETIREMENT
SUPPLEMENT FOR EXECUTIVE PARTICIPANTS. THEY EARN 20% GROSS SALARY PER
YEAR. THE BALANCE ACCUMULATED IN THE PLAN IS SUBJECT TO A SUBSTANTIAL
RISK OF FORFEITURE. NO DISTRIBUTIONS WERE RECEIVED FROM THE PLAN IN THE
CURRENT YEAR.

#### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

## **Transactions With Interested Persons**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open To Public Inspection

Name of the	e organization	
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BATON ROUGE AREA FOUNDATION

Employer identification number 72-6030391

Part I Excess Bene	efit Transaction	ons (section 50	01(c)(3	), secti	on 501(c)(4), and see	ction 501(c)(29) orga	nizatio	ns on	ly).				
					ırt IV, line 25a or 25b								
1	(b) F	) Relationship between disqualified			ified ,	4.55					(d) Corrected?		
(a) Name of disqualified p	person	person and or	ganiza	ation	(0	c) Description of trar	nsactio	n		Y	es	No	
2 Enter the amount of tax	incurred by the or	ganization man	agers	or disq	ualified persons dur	ing the year under							
section 4958								▶ \$					
3 Enter the amount of tax,	if any, on line 2, a	above, reimburs	ed by	the org	ganization			▶ \$					
	.,												
Part II Loans to and	d/or From Inte	erested Pers	sons.										
·	•				Part V, line 38a or F	orm 990, Part IV, lir	ne 26; c	or if the	e orga	nizatio	n		
	ount on Form 990					Т	_		(In) An	proved			
(a) Name of	(b) Relationship	(c) Purpose		an to or	(e) Original	(f) Balance due	alance due (g) In (h) by default?		by bo	y board of Large		ritten	
interested person	with organization	of loan	<u> </u>	zation?	principal amount		dera	luit?	comm	ittee?	agreei		
			То	From			Yes	No	Yes	No	Yes	No	
	1												
	1												

# Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2020

Total

(a) Name of interested person	(b) Relations person a	(b) Relationship between interested person and the organization				(d) Description of transaction	(e) Sha organiz rever	ation's
							Yes	No
LAUREN C. JUMONVILLE	FAMILY	MEMBER	OF	DI	124,512.	EMPLOYEE OF		Х
Part V Supplemental Information.  Provide additional information for res	sponses to quest	tions on Sche	dule L	(see ii	nstructions).			
SCH L, PART IV, BUSINESS	TRANSACT	IONS IN	NOL	VIN	G INTERESTE	ED PERSONS:		
(A) NAME OF PERSON: LAURE								
(B) RELATIONSHIP BETWEEN		ED PERS	ON	AND	ORGANIZATI	ION:		
FAMILY MEMBER OF DIRECTOR								
(D) DESCRIPTION OF TRANSA	CTION: E	MPLOYEE	OF	BR	AF			

### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Employer identification number BATON ROUGE AREA FOUNDATION 72-6030391

	BATON ROUGE	AREA F	OUNDATION			72-603	039 <u>T</u>	
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) ethod of determ sh contribution	_	:s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
3	Intellectual property							
9	Securities - Publicly traded	X	165	3,683,603.	FMV			
)	Securities - Closely held stock							
ı	Securities - Partnership, LLC, or							
	trust interests	X	5	423,260.	FMV			
2	Securities - Miscellaneous		-	- ,				_
3	Qualified conservation contribution -							
	Historic structures							
Ļ	Qualified conservation contribution - Other							_
5	Real estate - Residential							_
;	Real estate - Commercial							_
,	Real estate - Other							_
3	Collectibles							_
,	Food inventory							_
)	Drugs and medical supplies							_
ı								_
2	Taxidermy							_
3	Historical artifacts							_
	Scientific specimens							_
	Archeological artifacts							_
•	Other ()							_
•	Other							
	Other ( )							
<u> </u>	Other (							_
)	Number of Forms 8283 received by the organia	-	•				1	
	for which the organization completed Form 82	83, Part V, L	onee Acknowleag	ement <b>29</b>			T.,	Τ.
							Yes	낻
a	During the year, did the organization receive by					t		
	must hold for at least three years from the date		l contribution, and	which isn't required to be us	sed for			Н
	exempt purposes for the entire holding period	?				30:	3	
b	If "Yes," describe the arrangement in Part II.							
	Does the organization have a gift acceptance				ions?	31	X	$\vdash$
?a	Does the organization hire or use third parties contributions?		•			32	a	
b	If "Yes," describe in Part II.							
3	If the organization didn't report an amount in c	olumn (c) fo	a type of property	for which column (a) is chec	cked,			
	describe in Part II.		•					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2020

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## 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 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

BATON ROUGE AREA FOUNDATION

**Employer identification number** 72-6030391

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: RESPONSES TO EMERGING OPPORTUNITIES AND CHALLENGES; PARTNER WITH ENTITIES FROM ALL SEGMENTS OF OUR SERVICE AREA, AS WELL AS WITH OTHER IN ORDER TO LEVERAGE OUR COLLECTIVE RESOURCES COMMUNITY FOUNDATIONS, AND CREATE THE CAPACITY TO BE A STIMULUS OF POSITIVE REGIONAL CHANGE; AND EVALUATE OUR WORK AND SHARE THE RESULTS WITH OUR STAKEHOLDERS.

FORM 990, PART VI, SECTION A, LINE 2:

LAUREN C. JUMONVILLE IS A FAMILY MEMBER OF A BRAF DIRECTOR

NICK SPEYRER AND JEFF ZEHNDER HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 6:

THE FOUNDATION HAS ONE CLASS OF MEMBERS. ANYONE WHO GIVES A MINIMUM DONATION OF \$100 TO BRAF CAN BE A MEMBER.

FORM 990, PART VI, SECTION A, LINE 7A:

BRAF HAS ONE CLASS OF MEMBERS. AT THE ANNUAL MEETING, EACH MEMBER PRESENT IS ALLOWED TO VOTE DURING THE ELECTION OF THE BOARD OF DIRECTORS FOR THE NEXT YEAR.

FORM 990, PART VI, SECTION B, LINE 11B:

AFTER COMPLETION OF IRS FORM 990, DRAFT COPIES ARE PROVIDED TO THE ENTIRE BOARD OF DIRECTORS AND THE TREASURER OF THE FOUNDATION. THE TREASURER REVIEWS THE DRAFT FORM 990 WITH THE ENTIRE BOARD. ANY NECESSARY CHANGES ARE MADE ON THE FORM. ONCE ALL NECESSARY CHANGES ARE MADE AND THE

TREASURER IS IN AGREEMENT WITH THE ENTIRE BOARD AS TO THE VERACITY OF THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

032211 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization
BATON ROUGE AREA FOUNDATION

Employer identification number 72-6030391

INFORMATION PRESENTED IN THE FORM, IT WILL BE RECOMMENDED FOR APPROVAL.

UPON APPROVAL BY THE BOARD OF DIRECTORS, THE FORM WILL BE SIGNED BY THE

PRESIDENT AND CEO (OR OTHER APPROPRIATE REPRESENTATIVE OF THE

FOUNDATION), DATED AND SUBMITTED TO THE IRS BY THE FILING DEADLINE.

FORM 990, PART VI, SECTION B, LINE 12C:

DIRECTORS ARE REQUIRED TO COMPLETE A DISCLOSURE STATEMENT ANNUALLY. THE

DISCLOSURE OBLIGATION IS CONTINUING AND DIRECTORS ARE REQUIRED TO UPDATE

THEIR RESPECTIVE DISCLOSURE IF A CONFLICT OR THE APPEARANCE OF A CONFLICT

ARISES PRIOR TO THE NEXT REPORTING PERIOD. DISCLOSURES (AND SUBSEQUENT

DISCLOSURES) ARE INITIALLY REVIEWED BY BRAF'S GENERAL COUNSEL; IF

POTENTIAL CONFLICTS ARE PRESENT, HE OR SHE SHALL LEAVE THE BOARD OR

COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS

DISCUSSED AND VOTED UPON.

FORM 990, PART VI, SECTION B, LINE 15:

CEO - THE FOUNDATION'S BOARD CHAIR PREPARES AND DISTRIBUTES A CEO SURVEY

TO ALL OF THE CURRENT BOARD MEMBERS. THE CHAIR COLLECTS THE COMPLETED

SURVEYS AND PREPARES AN ANONYMOUS SUMMARY OF THE RESULTS. THE

INDEPENDENT COMPENSATION COMMITTEE REVIEWS THE RESULTS AND USES THEIR

KNOWLEDGE OF COMPARABLE DATA FROM COMMUNITY FOUNDATION PEERS AND

STANDARDS FROM SIMILAR POSITIONS WITHIN THE BATON ROUGE COMMUNITY TO

DETERMINE THE CEO SALARY FOR THE NEXT YEAR. THE COMPENSATION COMMITTEE

MAKES A RECOMMENDATION TO THE BOARD FOR THE CEO'S SALARY. THE BOARD

APPROVES THE CEO'S SALARY.

KEY EMPLOYEES - THE CEO SETS THE SALARIES OF THE OFFICERS OF THE

Name of the organization

**Employer identification number** 

BATON ROUGE AREA FOUNDATION 72-6030391 FOUNDATION. HE USES COMPARABLE DATA FROM SIMILARLY SITUATED COMMUNITY FOUNDATIONS WITHIN THE UNITED STATES, THE SALARY BENEFIT REPORT PREPARED ANNUALLY BY THE COUNCIL ON FOUNDATIONS, AND THE SALARY RESULTS FROM A SURVEY OF LARGE COMMUNITY FOUNDATIONS TO DETERMINE THE OFFICER'S SALARY FOR THE NEXT YEAR. THE INDEPENDENT COMPENSATION COMMITTEE THEN APPROVES THE SALARIES FOR KEY EMPLOYEES. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AR, CA, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, AZ FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS AND THE FINANCIAL STATEMENTS ARE POSTED ON THE FOUNDATION'S WEBSITE. IF SOMEONE DOES NOT HAVE ACCESS TO THE INTERNET, WE WOULD PROVIDE A COPY TO THEM. THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: REVERSAL OF GRANT EXPENSES 64,139. FORM 990, REPAIR REGULATION ELECTIONS SECTION 1.263(A)-1(F) - DE MINIMIS SAFE HARBOR ELECTION BATON ROUGE AREA FOUNDATION HEREBY MAKES THE DE MINIMIS SAFE HARBOR ELECTION UNDER SECTION 1.263(A)-1(F) OF THE TREASURY REGULATIONS, EFFECTIVE ONLY FOR THE TAX YEAR ENDING DECEMBER 31, 2020. TAXPAYER HAS AN APPLICABLE FINANCIAL STATEMENT FOR THE YEAR OF THE ELECTION. THIS ELECTION PERMITS THE TAXPAYER TO DEDUCT FOR TAX PURPOSES ANY ITEM DEDUCTED UNDER ITS BOOK POLICY THAT DOES NOT EXCEED \$5,000 PER Schedule O (Form 990 or 990-EZ) 2020

Name of the organization  BATON ROUGE AREA FOUNDATION	72-6030391
INVOICE(OR PER ITEM, AS SUBSTANTIATED BY THE INVOICE) OR I	TEMS HAVING
AN ECONOMIC USEFUL LIFE OF TWELVE MONTHS OR LESS AS DESCRI	BED IN
SECTION 1.263(A)-1(F)(1)(I).	
SECTION 1.263(A)-3(N) ELECTION - BOOK CONFORMITY ELECTION	
BATON ROUGE AREA FOUNDATION IS MAKING THE ELECTION UNDER T	REAS. REG.
1.263(A)-3(N) TO CAPITALIZE THOSE REPAIR AND MAINTENANCE C	OSTS THAT IT
TREATS AS CAPITAL IMPROVEMENTS ON ITS BOOKS AND RECORDS FO	R THE TAX
YEAR ENDED DECEMBER 31, 2020.	

#### SCHEDULE R (Form 990)

Part I

## **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

ALVIN & LOUISE ALBRITTON MEMORIAL FUND - 04-3687759, 100 NORTH STREET, SUITE 900,

ALVIN & LOUISE ALBRITTON MEMORIAL FUNDII -

SUITE 900

BATON ROUGE, LA 70802

BATON ROUGE, LA 70802

46-1500869, 100 NORTH STREET,

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

2020

OMB No. 1545-0047

Open to Public Inspection

BATON ROUGE AREA FOUNDATION

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

PROPERTY RENT

PROPERTY RENT

Employer identification number 72-6030391

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
LASALLE-GALVES, LLC - 71-0890765					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	RENTAL	LOUISIANA	74,527.	68,102.	BRAF
DOUGLAS MANSHIP SR. THEATER COMPLEX, LLC -					
33-1026428, 100 NORTH STREET, SUITE 900,					
BATON ROUGE I.A 70802	THEATER INV	T.OIITSTANA	-521 656	11 457 072	BBAF

LOUISIANA

LOUISIANA

264,576

51,268,

17,585,813, BRAF

3,513,034, BRAF

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
COMMUNITY FOUNDATION OF SOUTHWEST LA -							
72-1508036, PO BOX 3125, LAKE CHARLES, LA							
70602	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	Х	
COMMUNITY FOUNDATION REALTY, INC							
20-4265927, 100 NORTH STREET, SUITE 900,							
BATON ROUGE, LA 70802	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	Х	
E. J. MARJORY OURSO FAMILY FOUNDATION -							
72-1303806, PO BOX 690, DONALDSONVILLE, LA							
70346	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	Х	
GULF COAST RESTORATION & PROTECTION -							
20-4146236, 100 NORTH STREET, SUITE 900,							
BATON ROUGE, LA 70802	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	Х	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2020

Part I Continuation of Identification of Disregarded Entities

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
BRAF LEBLANC LLC - 45-3769752					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY RENT	LOUISIANA	61.	4,500.	BRAF
STOREHOUSE 28, LLC - 81-4372700					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY RENT	LOUISIANA	0.	0.	BRAF
BRAF CORNWALLIS, LLC - 82-3255417					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY OWN	LOUISIANA	0.	2,500,000.	BRAF
BRAF HUNT, LLC - 82-2629140					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY OWN	LOUISIANA	40,738.	50,000.	BRAF
725 MAIN LLC - 84-3690826					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY OWN	LOUISIANA	0.	1,175,000.	BRAF
CORNWALLIS NC CPDC, LLC - 20-3403943					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY OWN	LOUISIANA	0.	0.	BRAF CORNWAL
BRAF REEVES, LLC - 85-3223054					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY OWN	LOUISIANA	0.	0.	BRAF
BRAF STEVENS, LLC - 85-4296423					
100 NORTH STREET, SUITE 900					
BATON ROUGE, LA 70802	PROPERTY OWN	LOUISIANA	0.	267,500.	BRAF

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr	rolled
				501(c)(3))		Yes	No
HELEN S. BARNES TRUST - 72-6092736							
PO BOX 3038							
MILWAUKEE, WI 53201	SUPPORT ORG	LOUISIANA	501(C)(3)	PF	BRAF	X	
MILFORD WAMPOLD SUPPORT FOUNDATION -							
72-1406374, 4171 ESSEN LANE, BATON ROUGE, LA							
70809	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	X	
NEWTON B. THOMAS SUPPORT FOUNDATION -							
30-0169264, 8183 W. EL CAJON, BATON ROUGE,							
LA 70815	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	X	
NORTHSHORE COMMUNITY FOUNDATION - 61-1517784							
807 N. COLUMBIA STREET	7						
COVINGTON, LA 70433	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	Х	
THE CREDIT BUREAU OF BR FOUNDATION -				·			
20-0665987, PO BOX 82724, BATON ROUGE, LA	1						
70884	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	Х	
THE JOHN W. BARTON FAMILY FOUNDATION -				·			
72-1494869, PO BOX 1806, BATON ROUGE, LA	1						
70821	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	х	
WILBUR MARVIN FOUNDATION - 58-2019715				,			
450 MAIN STREET	1						
BATON ROUGE, LA 70801	SUPPORT ORG	LOUISIANA	501(C)(3)	11, TYPE 1	BRAF	х	
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Page 2

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(l	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		20 of Schedule		managing partner?	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
CPDC PROPERTIES, LP -			CD DEALEY								
72-1553510, 450 MAIN STREET,	REAL ESTATE		CP REALTY TRUST					X	N/A	x	
BATON ROUGE, LA 70801	REAL ESTATE	LA	TRUST					^_	IN/A	<del>  ^</del>	
5401 NORTH, LLC - 20-8307307	†										
450 MAIN STREET											
BATON ROUGE, LA 70801	REAL ESTATE	LA	WMF					X	N/A	x	
5401 NORTH INVESTMENTS III, LLC, 450 MAIN STREET, BATON ROUGE, LA 70801	REAL ESTATE	LA	WMF					x	N/A	x	
5401 CFN I, LLC - 83-1285927											
450 MAIN STREET	1		5401 NORTH								
BATON ROUGE, LA 70801	REAL ESTATE	LA	INVE					X	N/A	X	

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	contr	b)(13) rolled tity?
		country)						Yes	No
CAPITOL HOUSE HOTEL, LLC - 32-0105872									
450 MAIN STREET									İ
BATON ROUGE, LA 70801	REAL ESTATE	LA	WMF	C CORP					X
COMMERCIAL PROPERTIES REALTY TRUST -									
86-1086905, 450 MAIN STREET, BATON ROUGE, LA									
70801	REAL ESTATE	MD	WMF	C CORP					X
COMMERCIAL PROPERTIES MGMT CORP - 72-0594389									
450 MAIN STREET									
BATON ROUGE, LA 70801	REAL ESTATE MGMT	LA	WMF	C CORP					X
COMMERCIAL PROPERTIES DEVELOPMENT CORP -									
72-0594391, 450 MAIN STREET, BATON ROUGE, LA			COM PROP MGT						
70801	REAL ESTATE	LA	co	C CORP					X
BON CARRE CPDC II, INC - 20-8661741									
450 MAIN STREET			CP REALTY						
BATON ROUGE, LA 70801	HOLDING CORP	LA	TRUST	C CORP					X

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

<u> </u>			T	· 			1				Ι
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated,	Share of total income	Share of end-of-year	1 ' '	portion-	Code V-UBI amount in box	General or managing	Percentage ownership
of related organization		(state or foreign	Critity	excluded from tax under	income	assets	ate allo	1	20 of Schedule	partner?	OWNERSHIP
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
CPRT AMERICANA, LLC	1										
450 MAIN STREET	†										
BATON ROUGE, LA 70801	REAL ESTATE	LA	CPRT	N/A				x	N/A	X	
								<u> </u>	21/22		
5401 NORTH INVESTMENTS I	1										
450 MAIN STREET	1										
BATON ROUGE, LA 70801	REAL ESTATE	LA	CPRT	N/A				x	N/A	x	
									- •		
TRANSBIO VENTURES, LP	1										
820 GARRETT DRIVE	1										
BOSSIER CITY, LA 71111	INVESTMENT	DE	BRAF	N/A	193,189.	3,264,968.		x	N/A	x	60.00%
CANCER FOCUS FUND	1										
2450 HOLCOMBE BLVD	]										
HOUSTON, TX 77021	INVESTMENT	TX	BRAF	N/A	2,962.	547,970.		X	N/A	x	29.00%
BCBC LAND, LLC											
450 MAIN STREET	_		CPDC								
BATON ROUGE, LA 70801	REAL ESTATE	LA	PROPERTIES	N/A				X	N/A	X	
	1										
BCBC SHOPPES, LLC	1										
450 MAIN STREET	4		CPDC					L	,_		
BATON ROUGE, LA 70801	REAL ESTATE	LA	PROPERTIES	N/A				X	N/A	X	
GDDE 007 7 77 04 0060065	4										
CPRT QOF I, LLC - 84-2069965	-		OD DEALWY								
450 MAIN STREET	DEAT EGMANE	T 7	CP REALTY TRUST	NT / 3				·	NT / 7	x	
BATON ROUGE, LA 70801	REAL ESTATE	LA	TRUST	N/A			-	X	N/A	<del>  ^</del>	
	+										
450 MAIN STREET	+		CP REALTY								
BATON ROUGE, LA 70801	REAL ESTATE	LA	TRUST	N/A				x	N/A	l x	
BITON ROOGE, HA 70001	KUM ESTATE	עדד	11.001	17.23				λ,	N/A	A	
CPRT QOZB II, LLC -	1										
85-3162313, 450 MAIN STREET.	1		CP REALTY								
BATON ROUGE, LA 70801	REAL ESTATE	LA	TRUST	N/A				x	N/A	x	
				L					-1/ /1	<u></u> _	

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity			Share of		portion-	Code V-UBI	Genera	or Percentage
of related organization		(state or	entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	ate allo	cations?	amount in box	manag partn	Percentage ownership
		foreign country)		sections 512-514)		assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes	No
KANNAPOLIS CROSSING, LP -											
84-3924118, 450 MAIN STREET,			CP REALTY								
BATON ROUGE, LA 70801	REAL ESTATE	LA	TRUST	N/A				X	N/A		<u> </u>
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Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a)  Name, address, and EIN  of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total income	(g) Share of end-of-year	(h) Percentage ownership	512(l	(i) etion (b)(13) rolled tity?
		country)		or trust)		assets		Yes	
CHARITABLE REMAINDER TRUSTS (8)									
100 NORTH STREET, SUITE 900									
BATON ROUGE, LA 70802	INVESTMENT	LA	BRAF	TRUST					X
CHARITABLE REMAINDER TRUST (1)									
100 NORTH STREET, SUITE 900									
BATON ROUGE, LA 70802	INVESTMENT	NC	BRAF	TRUST					Х
CHARITABLE REMAINDER TRUST (3)									
100 NORTH STREET, SUITE 900									
BATON ROUGE, LA 70802	INVESTMENT		BRAF	TRUST					Х
GRAY FOX MINERAL CORPORATION - 72-0779122									
100 NORTH STREET, SUITE 900									
BATON ROUGE, LA 70802	INVESTMENT	LA	BRAF	S CORP	5,114.	23,714.	100%	х	
FRONT STREET CONDOMINIUM ASSOC, INC.									
450 MAIN STREET			CP REALTY						
BATON ROUGE, LA 70801	REAL ESTATE	LA	TRUST	C CORP					Х
5401 NORTH COMMERCIAL OWNERS ASSOCIATION -									
38-4094200, 3605 GLENWOOD AVE, STE 500,			CP REALTY						
RALEIGH, NC 27612	COMMERCIAL ASSN	NC	TRUST	C CORP					Х
		1					<u> </u>		
-									

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
С	Gift, grant, or capital contribution from related organization(s)	1c	Х	
	Loans or loan guarantees to or for related organization(s)	1d		X
е	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f	Х	
g	Sale of assets to related organization(s)	1g		X
	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	X	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Х	
	Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	
	n Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
	Sharing of paid employees with related organization(s)	10		X
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q	Х	
r	Other transfer of cash or property to related organization(s)	1r	Х	
s	Other transfer of cash or property from related organization(s)	1s	Х	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NORTHSHORE COMMUNITY FOUNDATION	В	175,000.	FMV
(2) NEWTON B THOMAS SUPPORT FOUNDATION	С	400,000.	FMV
(3) HELEN S. BARNES TRUST	С	264,506.	FMV
(4) WILBUR MARVIN FOUNDATION	K	368,154.	FMV
(5) CREDIT BUREAU OF BATON ROUGE FOUNDATION	L	112,893.	FMV
(6) NEWTON B. THOMAS SUPPORT FOUNDATION	L	66,526.	FMV

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a)  Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) NORTHSHORE COMMUNITY FOUNDATION	L	85,227.	FMV
COMMUNITY FOUNDATION OF SOUTHWEST (8) LOUISIANA	L	159,204.	FMV
(9) COMMERCIAL PROPERTIES REALTY TRUST	F	444,500.	FMV
_ (10)			
(11)			
_ (12)			
(13)			
(14)			
(15)			
(16)			
(18)			
(19)			
_(20)			
_(21)			
(22)			
(24)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(t	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners sec	Share of	Share of	Dispr	opor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	Percentag
of entity		(state or foreign	related, unrelated,	partners sec 501(c)(3) orgs.?	total	end-of-year	alloca	tions?	amount in box 20	managir	ownership
		country)	sections 512-514)	Yes No		assets	Yes	No	(Form 1065)	Voc N	7
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