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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047	
2nna	
Open to Public	

ΑI	For th	e 2009 calendar year, or tax year beginning and ending	3	
В	Check if applicab	C Name of organization	D Employer identifi	cation number
	Addre	ss label or to Car Cura DIRED COE MILE I D A TAIC		
	Name chang	type	58-2	248900
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/	, i -	
	Termi	Instruc- Z / OU N : ARMOULT ROAD	504-	<u>454-2277</u>
	Amen	City or town, state or country, and ZIP + 4	G Gross receipts \$	408,449.
	Application pendi	METATRIE, DA 70002	H(a) Is this a group re	
	portor	F Name and address of principal officer JIM FUNK	for affiliates?	X Yes No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
		empt status X 501(c) ( 6  ) ◀ (insert no ) 4947(a)(1) or 527		list (see instructions)
		e: WWW.LRA.ORG  organization: X Corporation Trust Association Other		n number ▶ 2645
	orm o	organization: X Corporation	Year of formation: 1946 N	A State of legal domicile; LA
£ 55	T	Briefly describe the organization's mission or most significant activities HOSPITAI	TWV TMDIICWDV	መ <b>ይ ያ ሆ</b> ድ
ce	1	ASSOCIATION	III INDUSIKI	IKADE
Governance	2	Check this box I if the organization discontinued its operations or disposed of	more than 25% of its net as	sets
ver	_	Number of voting members of the governing body (Part VI, line 1a)	3	152
	ı	Number of independent voting members of the governing body (Part VI, line 1b)	4	152
Activities &		Total number of employees (Part V, line 2a)	5	0
/itie		Total number of volunteers (estimate if necessary)	6	0
ţ		Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
⋖		Net unrelated business taxable income from Form 990-T, line 34	7b	0.
			Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		
Revenue	9	Program service revenue (Part VIII, line 2g)	128,132.	139,595.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	430.	255.
ш,	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	58,960.	145,536.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	187,522.	285,386.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		149,000.
		Benefits paid to or for members (Part IX, column (A), line 4)		
es	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 500		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		9949] 764-95-9636; 2 <sup>32</sup> 67359393363832366339639888
X	i	Total fundraising expenses (Part IX, column (D), line 25)		1.6.6.1.6.4
_	ı	Total fundraising expenses (Part IX, column (D), line 25)  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)  Total expenses Add lines 13.17 (must equal Part IX, column (A), line 26)	157,873.	166,164.
	l	Total expenses Add lines 15-17 (must equal Fart IA, Column (A), inte 25)	101 121,012.	315,164.
38		Revenue less expenses Subtract line 18 from line 12	<del></del>	<29,778.
ance	200	Total assets (Dart V. line 16)	Beginning of Current Year 184,713.	End of Year 154,935.
Asse	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	104,713.	134,333.
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20	184,713.	154,935.
		Signature Block	101,713.	101,000
Zer.	about of	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statem and complete. Declaration of preparer (other has any knowless on all information of which preparer has any knowless.	ents, and to the best of my knowledg	ge and belief, it is true, correct,
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowl		
Sign	1	Som Most	8/16/1	D
Here		Signature of officer	Date	
		JIM FUNK, President (CEO		
		Type or print name and title		
Paid		Preparer's signature AUG 1 1 2010	Check if Prepare (see ins	r's identifying number tructions)
	arer's	12 2010	employed 🕨 🛄	
Use		Firm's name (or BOURGÉOIS BENNETT, D.L.C. yours if	EIN ▶	
	,	self-employed), address, and 111 VETERANS BLVD. 17TH FLOOR		
		ZIP+4 METAIRIE, LOUISIANA 70005	Phone no. ▶ 5	04.831.4949
May	the IF	S discuss this return with the preparer shown above? (see instructions)		X Yes No
93200	01 02-0	1-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form <b>990</b> (2009)

	•		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? If "Yes," complete Schedule C, Part II	4_	<u> </u>	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		İ	
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	ļ	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	ŀ		
	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			1
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10_	ļ	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	11	undergooden	X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	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			
•	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			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		X
10A	Schedule D, Parts XI, XII, and XIII  Was the experience polyidad in consolidated undependent sudited financial statements for the tay year?  Ven Ne	12		_ ^
IZA	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	133.28533365	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	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		Х
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		<u> </u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	990 (2	2009)

Form 990 (2009) LOCAL CHAPTERS OF THE L.R.A., INC.

Part IV Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1 .		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27	design ad	X
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, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form 9	<b>990</b> (2	2009)

Form 990 (2009)

LOCAL CHAPTERS OF THE L.R.A., INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

1a Eleter the number reported in Box 3 of Form 1006, Annual Summany and Transmittal of U.S. Information Returns. Entire Or In rot applicable 0. 1		•			Yes	No
b Enter the number of Forms W2G included in line 1a Enter 0-if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize withing the prize of mining and the prize of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize on the prize of the mining of the prize of the pri	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
Ded the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) writings to prize winners?  2a Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements.  1b If at least one is reported on ine 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  3b Dd the organization have innested to Sunesses gross income of \$1,000 or more during the year covered by this return?  3b If "Yes," has it filed a Form 990-T for this year? If "No." provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a significant or other authority over, a financial account in a foreign country   ►  5ce the instructions for exceptions and filing requirements for form TD F90.22 1, Report of Foreign Bank and Financial Accounts  5d Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell and provided the programization in the Form 8886-T, Disclosure by Tax Exempt Entity Regarding Prohibited  1as Shelter Transaction?  5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization receive a payment in excess of \$75 made partly as a combibition and partly for goods and services provided to the payor?  7b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7c Organizations that may receive deductible contributions under section \$90(8)(3) supporting organizations. Did the understance of qualified i		U.S. Information Returns. Enter -0- if not applicable	1a			
agrambing) winnings to prize winners?  2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, lided for the calendar year ending with or within the year covered by this return.  b If at least one is reported on line 2a, did the organization file all required feeral employment tax returns?  Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file this return (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If 1'Yes, 1's at filed a form 900 T for this year? If 1'Mo, "provide an explanation in Schedule 0  b If 1'Yes, 1's at filed a form 900 T for this year?  5a Was the organization in a foreign country (such as a bank account, securities account, or other harmonial account)?  b If 1'Yes, 1's return the many of the foreign country   Period of the properties of the firm of the firm of the state of the firm of	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	_0		
2a Enter the number of temployees reported on Form W.3, Transmittal of Wago and Tax Statements, 10 field for the calendar year ending with or within the year covered by this return.  1b If at least one is reported on fine 2a, did the organization file all required federal employment tax returns?  1c Note, If the sum of lines 1s and 2s is greater than 250, you may be required to e-file this return (see instructions).  1c Defendance of the sum of lines 1s and 2s is greater than 250, you may be required to e-file this return (see instructions).  1c Defendance of the sum of the foreign country is part of the sum of the foreign country.  1c If "Yes," has if filed a Form 990.1 for this year? If "No," provide an explanation in Schedule O.  1c If "Yes," enter the name of the foreign country.  1c If "Yes," enter the name of	C		reportable gaming			
bif at least one is reported on line 2a, did the organization fiel all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  4a At any time during the calendar year, did the organization have an otherwise an explanation in Schedule O.  4b 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, or other financial account)?  5cent if "Yes," enter the name of the foreign country IIII was a bank account, or other financial account;  5cent if "Yes," to line 5a or 5b, did the organization that at was or is a party to a prohibited tax shelter transaction?  6cent if "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6cent if "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6cent if "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6cent if "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6cent if "Yes," indicate the number of Ending Regarding Prohibited Tax Shelter Transaction?  6cent if "Yes," indicate the payor?  6cent if the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the Form 8822?  6cent if "Yes," indicate the number of Forms 8282 filed during the year  6cent if "Yes," indicate the number of Forms 8282 filed during the year  6cent if the organization, during the year, receive any funds, directly or indirectly, to pay p			1 1	1c	237825382588	18511959.89
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2 as greater than 250, you may be required to e-file this return (see instructions)  3 Dd the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3 If Yes, 1 has if filed a Form 990 T for this year? If Yos, 1 provide an explanation in Schedule O  4 At any time during the calendary year, did the organization have an interest in, or a signature or other authorty over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5 If Yes, 1 enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts  5 Was the organization a party to a prohibited tax shelter transaction?  6 If Yes, 1 to line 5 are 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  6 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?  6 If Yes, 1 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6 If Yes, 1 did the organization notify the donor of the value of the goods or services provided?  7 Organizations that may receive deductible contributions under section 170(c).  8 If Yes, 1 did the organization notify the donor of the value of the goods or services provided?  9 If Yes, 1 did the organization notify the donor of the value of the goods or services provided?  1 If Yes, 1 did the organization notify the donor of the value of the goods or services provided?  9 If Yes, 1 did the organization notify the donor of the value of the goods or services provided?  1 If Yes, 2 did the organization notify the donor of the value of the goods or services p	2a					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 4 At Alainy 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, or other financial account?) 5 If 'Yes,' enter the name of the foreign country. ► 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization file Form 8886 T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that was receive deductible? 6 Does the organization that was receive deductible contributions under section 170(c). a Dot the organization mickule with every solicitation an express statement that such contributions or gifts were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 Do define organization than any receive deductible contributions under section 170(c). a Did the organization during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Do If the organization, during the year, receive any funds, directly or indirectly,		, , , , , , , , , , , , , , , , , , , ,		74444444		
3a  X	b				\$148372568	\$180.600.0888
b If "Yes," has it filed a Form 990 T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, dult 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)?  b If "Yes," enter the name of the foreign country   See the instructions for exceptions and filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Dd any taxable party notify the organization that it was or sa party to a prohibited tax shelter transaction?  5c If "Yes," to line 5a or 5b, did the organization that it was or sa party to a prohibited tax shelter transaction?  6a Deste organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Det the organization star may receive deductible contributions under section 170(c).  6c Det the organization star may receive deductible contributions under section 170(c).  7c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  16 If "Yes," indicate the number of Forms 8282 filed during the year  6 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  77 Filed Transactions maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the s	_					
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 bark account, securities account, or other financial account)?  See the instructions for exceptions and filing requirements for Form TD F 90:22 1, Report of Foreign Bank and Financial Accounts  3a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6c 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?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible on the organization include with every solicitation an express statement that such contributions or grifs were not tax deductible?  6c Does the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  6d Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  6d If "Yes," indicate the number of Forms 8282 filed during the year  6d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6d If "Yes," indicate the number of Forms 8282 filed during the year  6d Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d For all contributions of qualified intellectual property, did the organization file a Form 1098C as required?  7f For all contributions of qualified intellectual property, did the organization file a Form 1098C as required?  7f For all contributions of any bases and p		·	ea by this return?			
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e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  8 Section 501(c)(7) organizations. Enter  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11a  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		to file Form 8282?	1 1	7c	Jesuseurrie	254538484645
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  7h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	ę		personal			
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	b	Gross income from other sources (Do not net amounts due or paid to other sources against				
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	23 SEC 31 1917 - 1	
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

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 in Schedule O See instructions.

Sec	tion A. Governing Body and Management				
		1 1		Yes	No
1a	Enter the number of voting members of the governing body	1a	152		
þ	Enter the number of voting members that are independent	1b	152		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other			
	officer, director, trustee, or key employee?		2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision	j		
	of officers, directors or trustees, or key employees to a management company or other person?		3	ļ	X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	s?	5		X
6	Does the organization have members or stockholders?		6	<del> </del>	X
/a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers of the		-	37
	governing body?	•	7a	-	X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other per-		_7b	1333333	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year			
_	by the following The governing body?				
a			8a	X	
9	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	abad at the	<u>8</u> b	X	<u> </u>
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ched at the	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	worus Code l	1 9		
	tion B. I onotes (mis section b) equests information about policies not required by the internal ne	venue code )		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a	165	No X
	If "Yes," does the organization have written policies and procedures governing the activities of such or	chanters affiliates	104		23
_	and branches to ensure their operations are consistent with those of the organization?	mapters, armates,	10b		İ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fill	ing the form?	11		Х
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	g tille lettin			
	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	1244425448
	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ld give rise			
	to conflicts?	J	12b	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," describe			
	ın Schedule O how this is done		12c	х	1
13	Does the organization have a written whistleblower policy?		13	Х	
14	Does the organization have a written document retention and destruction policy?		14	X	
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		X
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)				
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ent with a			
	taxable entity duning the year?		16a	************	X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate the organization of the organization of the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted a written policy or procedure requiring the organization adopted as written policy or procedure requiring the organization adopted as written policy or procedure requiring the organization adopted as written adopted adopted as written adopted as written adopted adopted adopted adopted adopted adopted adopte		ı		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the orga	nızatıon's			
	exempt status with respect to such arrangements?		16b		
	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed NONE	(50.47.)(0)	<del></del>		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(5U1(c)(3)s only) ava	lilable for		
	public inspection. Indicate how you make these available. Check all that apply				
0	Own website Another's website Upon request	nflint of interest in t			
9	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, constatements available to the public	milict of interest poli	icy, and fina	ncial	
ю.	statements available to the public	d records of the are	anivetie		
90	State the name, physical address, and telephone number of the person who possesses the books and WENDY ROGERS $-504-454-2277$	a records or the org	anization 🕨		
	2700 N. ARNOULT ROAD, METAIRIE, LA 70002			<del>.</del>	
	2.00 H. IHHOOH NOID, HEIGHNIE, HA /000Z				

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- 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. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

X Check this box if the organization did (A)	(B)	ly cc	111 Ct		C)	, un c	JUIC	(D)	(E)	(F)
Name and Title	Average	}		Pos				Reportable	Reportable	Estimated
	hours	(c	heck	call:	that	app	ly)	compensation from	compensation	amount of other
	per week	ector						the	from related organizations	compensation
		or di	eg e			sated		organization	(W-2/1099-MISC)	from the
		truste	al trus		yee	mpen		(W-2/1099-MISC)		organization
		ndividual trustee or director	nstitutional trustee	55	key employee	Highest compensated employee	뺼			and related organizations
		횰	ınstı	Officer	Key	皇皇	Former			organizations
DOUG BARRAS										
BOARD MEMBER	0.50	X						0.	0.	0.
NASH BARRECA, JR.			1							
BOARD MEMBER	0.50	X				_		0.	0.	0.
GERARD BAUDOIN									_	_
BOARD MEMBER	0.50	Х	-		<u> </u>	<u> </u>	ļ	0.	0.	0.
GERALD P. BREAUX	0.50							_		•
BOARD MEMBER	0.50	X	ļ			-		0.	0.	0.
CARROLL DOMENGEAUX	0.50	37							0	•
BOARD MEMBER PHIL FAUL	0.50	Х						0.	0.	0.
BOARD MEMBER	0.50	x						0.	0.	0.
ROD LATIOLAIS	0.50	Λ				_		0.	0.	<u> </u>
BOARD MEMBER	0.50	х						0.	0.	0.
LEONARD LOUVIERRE	0.30	-						•		
BOARD MEMBER	0.50	х						0.	0.	0.
ANDY MCFARLAND	- 0130									
BOARD MEMBER	0.50	x						0.	0.	0.
DAVID MOORE										
BOARD MEMBER	0.50	X						0.	0.	0.
JOHN O'REILLY			, i							
BOARD MEMBER	0.50	X						0.	0.	0.
MIKE PIERROTTI										
BOARD MEMBER	0.50	X						0.	0.	0.
DWIGHT PRUDHOMME									_	_
BOARD MEMBER	0.50	X						0.	0.	0.
WAYNE SHULAW										
BOARD MEMBER	0.50	Х						0.	0.	0.
CHRIS SOGGA	0.50			ı						•
BOARD MEMBER	0.50	Х			-		_	0.	0.	0.
KATHY STOKLEY	0 50	J.						_	_	^
BOARD MEMBER MIKE WALKER	0.50	Δ		$\dashv$				0.	0.	0.
BOARD MEMBER	0.50	, l						0.	- 0.	0
	0.50	Δ						<u> </u>		0.

Y										<u> </u>
Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
· (A)	(B)			(	C)			(D)	(E)	(F)
Name and title	Average	ł	Position					Reportable	Reportable	Estimated
	hours	(c	hecl	k all	that	app	oly)	compensation	compensation	amount of
	per	į						from	from related	other
	week	all all			ŀ	E E		the organization	organizations (W-2/1099-MISC)	compensation from the
		stee	ruste		ا	pensa		(W-2/1099-MISC)	(** £ 1033 WII00)	organization
		ual tru	onal		ploye	E 03		,		and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
		=	-	-	×	_ as	<u> </u>			
PAUL ARRIGO	0.50									
BOARD MEMBER	0.50	X					<u> </u>	0.	0.	0.
BRUCE ATTINGER	0.50						Ìi			_
BOARD MEMBER	0.50	X						0.	0.	0.
ANDY BLOUIN	0 50		ļ			1			_	
BOARD MEMBER	0.50	X						0.	0.	0.
MICHAEL BOUDREAUX	0 50								0	•
BOARD MEMBER	0.50	Х	ļ	<u>.</u>	ļ			0.	0.	0.
GREG BOYD	0 50								0	•
BOARD MEMBER	0.50	X			_	-		0.	0.	0.
JEFF CONAWAY	0 50		1		İ				0	0
BOARD MEMBER	0.50	X			-			0.	0.	0.
JEANETTE EISWORTH	0 50	۱,,						ا م	•	0
BOARD MEMBER	0.50	X						0.	0.	0.
MICKEY FREIBERG	0 50	<b>.</b>					i	0	0	0
BOARD MEMBER	0.50	X						0.	0.	0.
MICHAEL FRUGE	0 50	37						0	0	0
BOARD MEMBER	0.50	Х						0.	0.	0.
LES GUERIN	0 50	x						0	0	0
BOARD MEMBER	0.50	Ā						0.		0.
1b Total			1 4 .			<b>&gt;</b>				0.
2 Total number of individuals (including but no	ot limited to th	iose	liste	ed at	oove	e) wr	o re	ceived more than \$100	,000 in reportable	0
compensation from the organization									<del></del>	Yes No
3 Did the organization list any former officer,	director or triv	ctoc	kc:		nlo:	100	or b	ighast componented on	anlovos on I	
3 Did the organization list any <b>former</b> officer, of line 1a? If "Yes," complete Schedule J for su		siee	, key	, em	ihio)	/ee,	OF III	ignesi compensated en	ipioyee on	1 1
		lo co	me	2000	tion	222	l ath	or companyation from	ho organization	3 X
4 For any individual listed on line 1a, is the sui	iii oi reportabi	e cc	, npt	51 15d	LION	and	Oth	ei compensation from t	ine organization	

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	res	NO
3		X
4		X
5		Х

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization NONE

(A) Name and business address	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than
 \$100,000 in compensation from the organization

				KS OF THE	<u>: L.R.A., 1</u>	INC.	58-2248	1900 Page 9
	irt VI	Statement of Reve	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	ti c c e	Fundraising events Related organizations	ts, and ve <b>1f</b>					
Program Service   Co	2 a b c		<del></del> -	Business Code 900099	140,146.	140,146.		
P.	f g	All other program service reve Total. Add lines 2a-2f	enue	900099	<551. 139,595.	> <551.		
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties	x-exempt bond p	proceeds	255.	\$575881.58(38)***13.31(76) <b>3386.68(86)</b> \$5555	POCALISED TSS 0000000000000000000000000000000000	255.
	6 a b c	Less. rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
Other Revenue	8 a	Net gain or (loss) Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less direct expenses	of	268599. 123063.				
Oth	с 9 а b		lraising events tivities. See a b	<b>&gt;</b>	145,536.	145,536.		
	10 a b	Gross sales of inventory, less and allowances Less cost of goods sold Net income or (loss) from sales Miscellaneous Revenue	returns a b s of inventory	Business Code				
	11 a b c				unannum ma Registericines cubi - tud i fili di di di di di di di di di di di di di	200 - 200 -	nor-madertaled a per-upgg and a state and a per-	orum-dalateritetrus na 44423°CD31°14233
	12	Total revenue See instructions.		<b>&gt;</b>	285.386.	285.131.	0.	255.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must com				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	149,000.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U ${\sf S}$				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)	ļ			
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			<del></del>	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting			<u> </u>	
d	, 3				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy		<u> </u>		
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	118,285.			
19 20	Conferences, conventions, and meetings Interest	110,200.			
20 21	Payments to affiliates				
21 22	Depreciation, depletion, and amortization				<u> </u>
23	Insurance	<u></u>			
24	Other expenses. Itemize expenses not covered				
	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)				
а	POL CON	28,069.			
b	ADMINISTRATIVE COSTS	19,706.			
С	MEMBER FEES	80.			
d	BANK CHARGES	24.			
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	315,164.			
26	Joint costs Check here 🕨 🔲 ıf following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined			1	
	educational campaign and fundraiging colicitation				

Part X Balance Sheet (A) Beginning of year End of year 184,713. 154,935. 1 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other 10a basis Complete Part VI of Schedule D 10b b Less accumulated depreciation 10c Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 184,713. 154,935. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 -iabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 25 25 0 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here 🕨 🗓 and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 184,713. 154,935. Unrestricted net assets 27 27 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 184,713. 154,935. 33 33 Total net assets or fund balances

> 154,935. Form **990** (2009)

184,713.

34

Total liabilities and net assets/fund balances

Pa	TEXI Financial Statements and Reporting			
,			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
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	in a data conflor	7.000000000
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			1
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990 (	2009)

### 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

OMB No 1545-0047 **2009** 

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

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2009

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

- 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

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

### If the organization answered "Yes," to 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
- 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," to Form 990, Part IV, line 5 (Proxy Tax), then

Name of organization		· · · · · · · · · · · · · · · · · · ·	Empl	oyer identification number
LOCAL (	CHAPTERS OF THE	L.R.A., INC.		58-2248900
Part I-A Complete if the or	ganization is exempt un	der section 501(c) o	r is a section 527 o	rganization.
1 Provide a description of the organ	ization's direct and indirect polit	tical campaign activities in	Part IV	
2 Political expenditures			▶ \$	28,069.
3 Volunteer hours				
Part I B Complete if the or	ganization is exempt un	der section 501(c)(3	3).	
1 Enter the amount of any excise tax	x incurred by the organization u	nder section 4955	▶ \$	
2 Enter the amount of any excise tax			<b>▶</b> \$	
3 If the organization incurred a secti	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				
Part Complete if the or	ganization is exempt un	der section 501(c), o	except section 501(	c)(3).
1 Enter the amount directly expende	ed by the filing organization for s	section 527 exempt function	on activities > \$	
2 Enter the amount of the filing orga	nization's funds contributed to	other organizations for sec	tion 527	
exempt function activities			▶ \$	28,069.
3 Total exempt function expenditure	es Add lines 1 and 2 Enter here	and on Form 1120-POL,		00 060
line 17b			▶\$	28,069.
4 Did the filing organization file Forn				X Yes No
5 Enter the names, addresses and e				
For each organization listed, enter				
that were promptly and directly de (PAC) If additional space is neede			arate segregated fund or a	i political action committee
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(,	, ,	, ,	filing organization's	contributions received and
			funds If none, enter -0-	promptly and directly delivered to a separate
		:		political organization
				If none, enter -0-
	METAIRIE, LA			
HOSTPAC	70002	72-0979476	28,069.	0.
			<u> </u>	

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

LHA

Schedule C (Form 990 or 990	)-EZ) 2009 <b>LOCA</b> ]	L CHAI	TERS OF THE	L.R.A., IN	NC. 58-2	248900 Page 2
Part II-A Complete	if the organization	n is exe	mpt under section	on 501(c)(3) and fi	led Form 5768	
(election u	nder section 501	(h)).				
A Check ▶ ☐ If the filling	ng organization belong	gs to an aff	iliated group			
B Check ▶ ☐ If the filir	ng organization check	ed box A a	nd "limited control" pr	ovisions apply		
(The ter	Limits on Lobb		nditures unts paid or incurred.	1	(a) Filing organization's	(b) Affiliated group totals
		-	anto para or mountou.	<i></i>	totals	
1a Total lobbying expendit	ures to influence publ	ic opinion (	(grass roots lobbying)			
b Total lobbying expendit	ures to influence a leg	islative bo	dy (dırect lobbyıng)			
c Total lobbying expendit	ures (add lines 1a and	l 1b)				
d Other exempt purpose	expenditures					
e Total exempt purpose e	•					
f Lobbying nontaxable ar	mount Enter the amou	unt from th	e following table in bot	h columns	827022 (4178844788388888847338479884	15a44337374774743454525555453755737373737373
If the amount on line 1e, o	column (a) or (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not	over \$1,000,000		00 plus 15% of the exc			
Over \$1,000,000 but no			00 plus 10% of the exc			
Over \$1,500,000 but no	ot over \$17,000,000	\$225,00	00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000		\$1,000,	000			
					18 18 144 204 8 774 208 8 774 208 8 7	
g Grassroots nontaxable	·	-				
h Subtract line 1g from lin						
Subtract line 1f from line						
j If there is an amount oth		r line 1h or	line 1i, did the organiz	ation file Form 4720	Г	¬.,
reporting section 4911 t						Yes No
(Con			eraging Period Under		nlata all of the five	
(301	-		ection 501(h) election e instructions for line			
			nditures During 4-Yea			
		Jilig Expe	lances Barring 4 Tel	Averaging renea	T	
Calendar year (or fiscal year beginnin	g in) (a) 2	006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable an	nount					
b Lobbying ceiling amoun						
(150% of line 2a, colum	n(e))					
c Total lobbying expendition	ures					
				•		
d Grassroots nontaxable a	CCCC_TCCCCC_CCCC	arg graft farmingers.		Homelkinischaustanisch	ACCURACIONAL DESCRIPCIONES	
e Grassroots ceiling amou	\$65656664 <b>966486</b> 48815					
(150% of line 2d, colum	n (e))					
£ Ouganisate leber						
f Grassroots lobbying exp	perialtures					

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 LOCAL CHAPTERS OF THE L.R.A., INC. 58-2248900 Page 3

[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)).

		(6	a)	(i	o)
		Yes	No	Amo	ount
1 1	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 Volunteers?				
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?				
!	Other activities? If "Yes," describe in Part IV	100000000000000000000000000000000000000	V#45.245.3858388588585		
j	Total Add lines 1c through 1i			19882 <b>88</b> 88888 <b>888</b>	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				<u>.</u>
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			***************************************	
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501/o)	(E) or oo	otion	
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(c)	on sor(c)	(5), or se	CHOH	
	501(c)(6).			V	Na
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?  [III] B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on E01/o\	(E) or so	otion	
Islau)	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."		-		
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and $\mathfrak g$	oolitical			
	expenditure next year?		4		
	Taxable amount of lobbying and political expenditures (see instructions)		5		
Ŗaŗ	Supplemental Information				
Comp	olete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, ar	nd Part II-B,	line 1ı. Alsc	, complete	this part
for an	y additional information				
PAF	T I-A, LINE 1:		<del></del>		
THE	LOCAL CHAPTERS OF THE LOUISIANA RESTAURANT ASSOCI	ATION	MAKE		
PAY	MENTS TO HOSTPAC FOR POLITICAL AND LOBBYING EXPENS	ES ON	BEHAL	F OF	
LOU	UISIANA RESTAURANTS.				

# SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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.

2009 Open to Rublic Inspection

OMB No 1545-0047

Name of the organization

varne of the organization  LOCAL (	CHAPTERS OF THE L.	R.A.	, I	INC.	58-2248	1900
	Complete if the organization answ					
1 Indicate whether the organization rai a	sed funds through any of the following set of the Solicitates of Solicitates or oral agreement with any individual Part VII) or entity in connection with plividuals or entities (fundraisers) purs	ation of ation of I fundra Il (includorofess	non-g gover alsing ding o	overnment grants rnment grants events fficers, directors, true fundraising services?	stees or Yes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or cor contrib	ustody	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
otal						
3 List all states in which the organization	n is registered or licensed to solicit t	funds (	or has	been notified it is ex	empt from registrati	on or licensing
		-				
			-			

Schedule G (Form 990 or 990 EZ) 2009 LOCAL CHAPTERS OF THE L.R.A., INC. 58-2248900 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events TASTE OF GOLF (add col (a) through TOURNAMENT MARDI GRAS col (c)) (total number) (event type) (event type) 56,292. 92,632. <u>268,5</u>99. 119,675 Gross receipts 2 Less: Charitable contributions 56,292. 92,632. 119,675. 268,599. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages 7 Entertainment 35,555. 54,066. 33,442 123,063. Other direct expenses 123,063) 10 Direct expense summary Add lines 4 through 9 in column (d) 145,536. 11 Net income summary Combine line 3, column (d), and line 10 Pärt III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes % Yes % Yes 6 Volunteer labor No No Nο Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states? 9a b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain.

11

administer charitable gaming?

Does the organization operate gaming activities with nonmembers?

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

<u>Sc</u>	nedule G (Form 990 or 990-EZ) 2009 LOCAL CHAPTERS OF THE L.R.A., INC. 58-2	224890	0 Pa	age <b>3</b>
			Yes	No
13	Indicate the percentage of gaming activity operated in			
ē	The organization's facility	%		
Ŀ	An outside facility 13b	%		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name	-		
	Address	-		
			99.119993	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	888848294	
	16 IIV/ II			
Ľ	of "Yes," enter the amount of gaming revenue received by the organization \$\infty\$ and the amount			
_	of gaming revenue retained by the third party  \$  If "Yes," enter name and address of the third party			
C	the rest enter name and address of the third party			
	Name			
	Name P	-		
	Address >			
		—		
16	Gaming manager information			
	Name			
	Gaming manager compensation > \$			
	Description of services provided	_		
		_		
		_		
	Director/officer Employee Independent contractor			
	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	47-		
_	retain the state gaming license?  Enter the amount of distributions argumed under state less to be distributed to other example organizations or example.	17a		
Ø	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year 🕨 \$	3537377	444444444 <u></u>	Partition in the

Schedule G (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States

OMB No 1545-0047

Open to Public

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

% × Schedule I (Form 990) 2009 FUNDS SCHOLARSHIPS TO THE Employer identification number MANAGEMENT SCHOOLS IN LA 58-2248900 (h) Purpose of grant RESTAURANT AND HOTEL or assistance \_\_\_\_\_ recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any GENERAL 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant 99,000 50,000 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. INC. THE L.R.A. (c) IRC section if applicable 72-0702000 501(C)(3) 501(C)(3) Enter total number of section 501(c)(3) and government organizations 72-1318297 LOCAL CHAPTERS OF General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization 2700 N. ARNOULT ROAD - METAIRIE, EDUCATION FOUNDATION OF THE LA RESTAURANT ASSOCIATION, INC. UNIVERSITY OF NEW ORLEANS or government NEW ORLEANS LA 70148 2000 LAKESHORE DRIVE Name of the organization Parti LA 70002

Page 2 (f) Description of non-cash assistance 58-2248900 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Use Part IV and Schedule I-1 (Form 990) if additional space is needed Partivi Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance LOCAL CHAPTERS OF THE L.R.A., INC. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2009

Schedule I (Form 990) 2009

932102 02-02-10

Department of the Treasury

Internal Revenue Service

# **Continuation Sheet for Form 990**

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
 See the Instructions for Form 990.

2009
Openito Public Illinspection

OMB No 1545-0047

Name of the Organization

LOCAL CHAPTERS OF THE L.R.A., INC.

Employer Identification number 58-2248900

LOCAL CH									58-224	
Part Continuation of Officers, I	Directors, Ti	rust	tee	s, K	еу	Em	plo	yees, and Highes	t Compensated	Employees
(A)	(B)			(C	<b>;</b> )			(D)	(E)	(F)
Name and title	Average			Posi	tion	ı		Reportable	Reportable	Estimated
	hours	(c	heck	k all t	hat	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
		recto				empi		organization	(W-2/1099-MISC)	from the
		5	<sub>82</sub>			sated		(W-2/1099-MISC)		organization
		ustee	T E	]	g	ubeu				and related organizations
	ľ	a t	tional		oldu	st cor	_			organizations
		individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
MIRIAM JUBAN	<del></del> -	+=	+-		-	_	_			
BOARD MEMBER	0.50	\						0.	0.	0.
SEAN KIRBY	0.50	_^		$\vdash$				<u> </u>		
BOARD MEMBER	0.50	x				:		0.	0.	0.
HUDSON LEMOINE	0.50							0.		<u>0.</u>
	0.50	<b>.</b>						0.	0.	0
BOARD MEMBER	0.50	X		$\vdash$				0.		0.
BILLY LONG	0.50	3,7						0	0	0
BOARD MEMBER	0.50	X						0.	0.	0.
RYAN NIZZO	0.50	٠,						_	0	0
BOARD MEMBER	0.50	X		.	_			0.	0.	0.
JERRY PROVENCHER	0.50			1	ł	1				•
BOARD MEMBER	0.50	X						0.	0.	0.
WALLY SHARPE	1								_	_
BOARD MEMBER	0.50	X	_		_			0.	0.	0.
JIM URDIALES	1							_	_	_
BOARD MEMBER	0.50	X						0.	0.	0.
COURTNEY WAGUESPACK								_	_	
BOARD MEMBER	0.50	X						0.	0.	0.
KARL WATLINGTON					1					
BOARD MEMBER	0.50	X						0.	0.	0.
CHARLES ADAMS								!		
BOARD MEMBER	0.50	X						0.	0.	0.
GLEN AUTHMENT										
BOARD MEMBER	0.50	X						0.	0.	0.
KRISTEN BOJE					ļ					
BOARD MEMBER	0.50	X						0.	0.	0.
FABIAN CASTILLO										
BOARD MEMBER	0.50	X						0.	0.	0.
MICHEL H. CLAUDET										
BOARD MEMBER	0.50	Х						0.	0.	0.
GERGORY HAMER										
BOARD MEMBER	0.50	X						0.	0.	0.
JEROME LEBOEUF										
BOARD MEMBER	0.50	$\mathbf{x}$		ĺ	ĺ			0.	0.	0.
HAL MOSER	-									
BOARD MEMBER	0.50	x						0.	0.	0.
TOMMY NICHOLAS					$\dashv$					
BOARD MEMBER	0.50	X		-	-			0.	0.	0.
RICKY PONTIFF	†			$\neg$	$\dashv$					
BOARD MEMBER	0.50	$ \mathbf{x} $		1			ł	0.	0.	0.
	<del></del>									

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

Schedule J-2 (Form 990) 2009

# **Continuation Sheet for Form 990**

2009

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Open to Public

Name of the Organization

LOCAL CHAPTERS OF THE L.R.A., INC.

Co   Average   Position   Check all and apply)   Reportable compensation   Check all and apply)   Reportable   Check all and apply   Reportable   Check all and apply)   Reportable   Check all and apply)   Reportable   Check all and apply   Check al	Partil Continuation of Officers, Di									t Compensated	
Name and title		i						E	1		
NINO THIBODAUX   O. SO   O. O. O. O. O. O. O. O. O. O. O. O. O.							ı		1		
Por week   Post   Pos	rano ana mo	, -	(cl					ly)			J
NINO THIBODAUX   POARD MEMBER   O.50   X			<u> </u>	T			Г <del>і і</del>	ŕ		•	other
NINO THIBODAUX   BOARD MEMBER   D.50   X		week					)yee		the	•	
NINO THIBODAUX   BOARD MEMBER   D.50   X			rector				emply			(W-2/1099-MISC)	i
NINO THIBODAUX   BOARD MEMBER   D.50   X			or d	8			sated		(W-2/1099-MISC)		_
NINO THIBODAUX   BOARD MEMBER   D.50   X	,		nstee	trust		99	npen				
NINO THIBODAUX   BOARD MEMBER   D.50   X			dualt	thona		mploy	stcor	<u>.</u>			Organizations
BOARD MEMBER			Indivi	Instit	Office	Key e	Kighe	Form			
JOEL TREADWELL   BOARD MEMBER   O.50 x   O. O. O. O. O. O. O. O. O. O. O. O. O.	NINO THIBODAUX	<del></del>									
BOARD MEMBER	BOARD MEMBER	0.50	X						0.	0.	0.
ROB ANTOON   BOARD MEMBER   D.50   X	JOEL TREADWELL										_
BOARD MEMBER	BOARD MEMBER	0.50	X						0.	0.	0.
NICK CARROZZA   BOARD MEMBER   O.50   X   O.   O.   O.   O.   O.   RAY CHANDLER   BOARD MEMBER   O.50   X   O.   O.   O.   O.   O.   O.   O.	ROB ANTOON										
BOARD MEMBER   0.50 x   0. 0. 0. 0.	BOARD MEMBER	0.50	X						0.	0.	0.
RAY CHANDLER BOARD MEMBER O.50 X O. 0. 0. 0. DONALD COLD BOARD MEMBER O.50 X O. 0. 0. 0. LEE GWINN BOARD MEMBER O.50 X O. 0. 0. 0. STEVE HILL BOARD MEMBER O.50 X O. 0. 0. 0. CHRIS MEYER BOARD MEMBER O.50 X O. 0. 0. 0. ERIC ROSS BOARD MEMBER O.50 X O. 0. 0. 0. STEVE HILL BOARD MEMBER O.50 X O. 0. 0. 0. O. 0. SHIC ROSS O. 0. 0. 0. 0. SHIC ROSS BOARD MEMBER O.50 X O. 0. 0. 0. JOHNNY SCALISI BOARD MEMBER O.50 X O. 0. 0. 0. SHERRY SMITH BOARD MEMBER O.50 X O. 0. 0. 0. SHERRY SMITH BOARD MEMBER O.50 X O. 0. 0. 0. JIM WHITE BOARD MEMBER O.50 X O. 0. 0. 0. JIM WHITE BOARD MEMBER O.50 X O. 0. 0. 0. JACQUELINE WHITTLE BOARD MEMBER O.50 X O. 0. 0. JACQUELINE WHITTLE BOARD MEMBER O.50 X O. 0. 0. JIM BESSELMAN BOARD MEMBER O.50 X O. 0. 0. JIM BESSELMAN BOARD MEMBER O.50 X O. 0. 0. JIM BESSELMAN BOARD MEMBER O.50 X O. 0. 0. JAVID A. BLITCH BOAND MEMBER O.50 X O. 0. 0. O. DAVID A. BLITCH BOAND MEMBER O.50 X O. 0. 0. O. DAVID A. BLITCH BOAND MEMBER O.50 X O. 0. 0. O. DAVID A. BLITCH BOAND MEMBER O.50 X O. 0. 0. O. DAVID A. BLITCH BOAND MEMBER O.50 X O. 0. 0. O. 0. DAVID A. BLITCH BOAND MEMBER O.50 X O. 0. 0. O. 0. DAVID A. BLITCH BOAND MEMBER O.50 X O. 0. 0. O. 0. DAVID A. BLITCH	NICK CARROZZA										
BOARD MEMBER	BOARD MEMBER	0.50	X						0.	0.	0.
DONALD COLD   BOARD MEMBER   0.50 x   0. 0. 0. 0.	RAY CHANDLER									-	
BOARD MEMBER   0.50 x   0. 0. 0. 0.	BOARD MEMBER	0.50	Х						0.	0.	0.
LEE GWINN   BOARD MEMBER   0.50 x   0. 0. 0. 0. 0.	DONALD COLD										
BOARD MEMBER   0.50 x   0. 0. 0. 0. STEVE HILL   0.50 x   0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	BOARD MEMBER	0.50	Х						0.	0.	0.
STEVE HILL   BOARD MEMBER   O.50 x   O. O. O. O. O. O. O. O. O. O. O. O. O.	LEE GWINN										·
BOARD MEMBER	BOARD MEMBER	0.50	x						0.	0.	0.
CHRIS MEYER BOARD MEMBER 0.50 X 0.0.0.0.  ERIC ROSS BOARD MEMBER 0.50 X 0.0.0.0.0.  JOHNNY SCALISI BOARD MEMBER 0.50 X 0.0.0.0.0.  LISA SEAY BOARD MEMBER 0.50 X 0.0.0.0.  SHERRY SMITH BOARD MEMBER 0.50 X 0.0.0.0.  AMY THOMAS BOARD MEMBER 0.50 X 0.0.0.0.  JIM WHITE BOARD MEMBER 0.50 X 0.0.0.0.  JACQUELINE WHITTLE BOARD MEMBER 0.50 X 0.0.0.0.  JACQUELINE WHITTLE BOARD MEMBER 0.50 X 0.0.0.0.  GLEN ARMANTROUT BOARD MEMBER 0.50 X 0.0.0.0.  JIM BESSELMAN BOARD MEMBER 0.50 X 0.0.0.0.0.  JIM BESSELMAN BOARD MEMBER 0.50 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	STEVE HILL										
BOARD MEMBER   0.50 x   0. 0. 0.	BOARD MEMBER	0.50	X						0.	0.	0.
## BOARD MEMBER	CHRIS MEYER										
BOARD MEMBER	BOARD MEMBER	0.50	X						0.	0.	0.
DOTAINS SCALISI   BOARD MEMBER   0.50   X   0. 0. 0. 0.	ERIC ROSS										
BOARD MEMBER   0.50 x   0. 0. 0.		0.50	X						0.	0.	0.
DOARD MEMBER   DO.50   X	JOHNNY SCALISI										
BOARD MEMBER         0.50 X         0.0.0.0.0.           SHERRY SMITH         0.50 X         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.           AMY THOMAS         0.0.0.0.0.         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.           JACQUELINE WHITTLE         0.0.0.0.0.         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.           TONY ABADIE         0.0.0.0.0.         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.0.           GLEN ARMANTROUT         0.0.0.0.0.0.         0.0.0.0.0.           JIM BESSELMAN         0.0.0.0.0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.0.0.           DAVID A. BLITCH         0.50 X         0.0.0.0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.0.0.0.		0.50	Х		_				0.	0.	0.
SHERRY SMITH       0.50 X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.					1						
BOARD MEMBER       0.50 X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		0.50	X						0.	0.	0.
AMY THOMAS BOARD MEMBER  0.50 X  0.0.0.0.  JIM WHITE BOARD MEMBER  0.50 X  0.0.0.0.  JACQUELINE WHITTLE BOARD MEMBER  0.50 X  0.0.0.0.  TONY ABADIE BOARD MEMBER  0.50 X  0.0.0.0.  GLEN ARMANTROUT BOARD MEMBER  0.50 X  0.0.0.0.  JIM BESSELMAN BOARD MEMBER  0.50 X  0.0.0.0.0.  0.0.0.0.0.0.0.0.0.0.0.0.0	,					}	J		ļ		
BOARD MEMBER       0.50 X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	<del></del>	0.50	X		_				0.	0.	0.
JIM WHITE   BOARD MEMBER   0.50 X   0. 0. 0.     JACQUELINE WHITTLE                   BOARD MEMBER   0.50 X   0. 0.   0.     TONY ABADIE                 BOARD MEMBER   0.50 X   0.   0.   0.     GLEN ARMANTROUT               BOARD MEMBER   0.50 X   0.   0.   0.     JIM BESSELMAN                 BOARD MEMBER   0.50 X   0.   0.   0.     DAVID A. BLITCH             BOARD MEMBER   0.50 X   0.   0.   0.									_		
BOARD MEMBER   0.50 X   0. 0. 0.		0.50	X		_				0.	0.	0.
DACQUELINE WHITTLE   BOARD MEMBER   0.50 X   0. 0. 0. 0.						}	}			j	
BOARD MEMBER       0.50 X       0.0.0.0.         TONY ABADIE       0.0.0.0.0.         BOARD MEMBER       0.50 X       0.0.0.0.         BOARD MEMBER       0.50 X       0.0.0.0.         JIM BESSELMAN       0.0.0.0.0.         BOARD MEMBER       0.50 X       0.0.0.0.         DAVID A. BLITCH       0.50 X       0.0.0.0.         BOARD MEMBER       0.50 X       0.0.0.0.		0.50	X			_			0.	0.	0.
TONY ABADIE         BOARD MEMBER       0.50 X       0.0.0.0.         GLEN ARMANTROUT       0.0.0.0.       0.0.0.         BOARD MEMBER       0.50 X       0.0.0.         BOARD MEMBER       0.50 X       0.0.0.         DAVID A. BLITCH       0.50 X       0.0.0.         BOARD MEMBER       0.50 X       0.0.0.											
BOARD MEMBER         0.50 X         0.0.0.0.           GLEN ARMANTROUT         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.           JIM BESSELMAN         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.           DAVID A. BLITCH         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.0.		0.50	Х	_	_				0.	0.	0.
GLEN ARMANTROUT         BOARD MEMBER       0.50 X       0.0.0.         JIM BESSELMAN       0.0.0.0.         BOARD MEMBER       0.50 X       0.0.0.         DAVID A. BLITCH       0.50 X       0.0.0.         BOARD MEMBER       0.50 X       0.0.0.		_							_		
BOARD MEMBER         0.50 X         0.0.0.           JIM BESSELMAN         0.0.0.0.           BOARD MEMBER         0.50 X         0.0.0.           DAVID A. BLITCH         0.50 X         0.0.0.           BOARD MEMBER         0.50 X         0.0.0.		0.50	X			[			0.	0.	<u> </u>
JIM BESSELMAN  BOARD MEMBER 0.50 X 0. 0. 0.  DAVID A. BLITCH  BOARD MEMBER 0.50 X 0. 0. 0.				l						_	_
BOARD MEMBER         0.50 X         0.0.0.           DAVID A. BLITCH         0.50 X         0.0.0.           BOARD MEMBER         0.50 X         0.0.0.		0.50	X		4				0.	0.	0.
DAVID A. BLITCH BOARD MEMBER 0.50 X 0. 0. 0.									_	_	_
BOARD MEMBER 0.50 X 0. 0. 0.		0.50	X		$\dashv$	$\dashv$			0.	0.	0.
		0 - 0									_
								_			

Department of the Treasury Internal Revenue Service

### **Continuation Sheet for Form 990**

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047 2009 Open to Public Inspection

Name of the Organization

LOCAL CHAPTERS OF THE L.R.A., INC.

	CHAPTERS (								58-224	
Part I Continuation of Officers	<u>, Directors, Ti</u>	rust	tee:			Em	ple			
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	heck	allt	hat	app	ly)	compensation	compensation	amount of
	per					ه ا		from	from related	other
	week	Ē				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
		direc				ma p		(W-2/1099-MISC)	(** 27 1033 141100)	organization
		ee or	stee			nsate		(** 2. *********************************		and related
		l trust	altr		oyee	ошре				organizations
		ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
		E	ISE	₹	, Ke	Hg	귤			<u> </u>
RALPH BRENNAN									•	
BOARD MEMBER	0.50	X			_			0.	0.	0.
KATY CASBARIAN	0.50			i		i			0	•
BOARD MEMBER	0.50	Х						0.	0.	0.
TOMMY CVITANOVICH	0.50								•	0
BOARD MEMBER	0.50	X						0.	0.	0.
MARK DEFELICE	0.50								•	
BOARD MEMBER	0.50	X						0.	0.	0.
JOEL DONDIS	0.50								0	0
BOARD MEMBER	0.50	X						0.	0.	0.
JOHN EASTMAN	0.50								•	
BOARD MEMBER	0.50	Х			$\dashv$			0.	0.	0.
ROBERT GIANCONTIERI	0.50				ł				0	•
BOARD MEMBER	0.50	Х		+				0.	0.	0.
YVETTE GREEN	0.50								0	0
BOARD MEMBER	0.50	Х		$\dashv$				0.	0.	0.
ANDY HALPERN	0.50	,,						_	0	0
BOARD MEMBER	0.50	Х						0.	0.	0.
NICK HAZARD	0.50	ν,						0.	0.	0
BOARD MEMBER	0.50	Х					_	0.		0.
JOHN HILDERBRAND	0.50	<b>.</b>						0.	0.	0
BOARD MEMBER	0.50	Х			-			0.		0.
WALTER JOHNSON	0.50	<b>.</b> ,		Ì				0.	0.	0
BOARD MEMBER BRYAN KLOTZ	0.50	X		$\dashv$		$\dashv$		0.	0.	0.
BOARD MEMBER	0.50	. I						0.	0.	0.
HELEN LEBOURGEOIS	0.50	Δ	-	-				0.		
BOARD MEMBER	0.50							0.	0.	0.
DUKE LOCICERO	0.50	^		$\dashv$	$\dashv$			0.		
BOARD MEMBER	0.50	v		l				0.	0.	0.
SCOTT LYNCH	0.50	Δ	$\dashv$					0.		
BOARD MEMBER	0.50	v			ľ			0.	0.	0.
MICHAEL MAENZA	0.50	22		$\dashv$				0.		<u> </u>
BOARD MEMBER	0.50	x						0.	0.	0.
SEAN MALONE	0.50									
BOARD MEMBER	0.50	x		- 1				0.	0.	0.
OCTAVIO MANTILLA	0.50			$\dashv$		$\dashv$		J .		
BOARD MEMBER	0.50	x			ļ	İ		0.	0.	0.
MIKE MILLER				-+	-					<u> </u>
BOARD MEMBER	0.50	x			ļ			0.	0.	0.
	. 0.50		1					<u>J.</u>		

# **Continuation Sheet for Form 990**

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Open to Public

Name of the Organization

LOCAL CHAPTERS OF THE L.R.A., INC.

Rantil Continuation of Officers, Di									t Compensated I	
		ust					۱۳۱۱		(E)	(F)
(A)	(B)			(C Posi				( <b>D)</b> Reportable	(E) Reportable	(F) Estimated
Name and title	Average hours	l (ct		allt			hΛ	compensation	compensation	amount of
	per	(0)	IECK	all	liat	арр	יעיי	from	from related	other
	week					95		the	organizations	compensation
		ector	i			oldm		organization	(W-2/1099-MISC)	from the
		or dire	au			ated e		(W-2/1099-MISC)		organization
		stee	truste		به	pens				and related
		nal tru	onal		ploye	L CO III				organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN PETTUS	<del></del>									
BOARD MEMBER	0.50	Х						0.	0.	0.
GREG REGGIO										
BOARD MEMBER	0.50	х						0.	0.	0.
MELVIN RODRIGUE										
BOARD MEMBER	0.50	х						0.	0.	0.
PAUL ROTNER							Γ			
BOARD MEMBER	0.50	x						0.	0.	0.
JED STEDMAN										
BOARD MEMBER	0.50	х						0.	0.	0.
RANDY STEIN										
BOARD MEMBER	0.50	х						0.	0.	0.
SAL SUNSERI	<u> </u>	-								
BOARD MEMBER	0.50	$ \mathbf{x} $						0.	0.	0.
DOUG VILLAVASO	<u> </u>									.,
BOARD MEMBER	0.50	$ \mathbf{x} $						0.	0.	0.
MELISSA VIX										
BOARD MEMBER	0.50	$ \mathbf{x} $						0.	0.	0.
STEPHEN WOODRUFF										
BOARD MEMBER	0.50	x						0.	0.	0.
MEL ZIEGLER										
BOARD MEMBER	0.50	x						0.	0.	0.
BRYAN BABB										
BOARD MEMBER	0.50	x						0.	0.	0.
ALAN COOPER										
BOARD MEMBER	0.50	X						0.	0.	0.
JIM DOULL										
BOARD MEMBER	0.50	x						0.	0.	0.
GAIL ELKIN										
BOARD MEMBER	0.50	х						0.	0.	0.
THOMAS R. HARDY										
BOARD MEMBER	0.50	x						0.	0.	0.
DAVID HEARN										
BOARD MEMBER	0.50	х						0.	0.	0.
TERRI KENT										
BOARD MEMBER	0.50	x						0.	0.	0.
DURWOOD KUHN										
BOARD MEMBER	0.50	x			İ			0.	0.	0.
CHARLES MCGAHA			1							
BOARD MEMBER	0.50	x		- [				0.	0.	0.
I HA For Privacy Act and Paperwork Reduction			tha	lact		tion	c fo			(Form 990) 2009

### **Continuation Sheet for Form 990**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

> Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ➤ See the Instructions for Form 990.

Open to Public Inspection

Name of the Organization

LOCAL CHAPTERS OF THE L.R.A., INC.

Partil Continuation of Officers, D									t Compensated	Employees
(A)	(B)	Ī		((	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all	that	app	ly)	compensation	compensation	amount of
	per					_ as		from	from related	other
	week	直		İ		ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
		direc				d em		(W-2/1099-MISC)	(** 27 1000 111100)	organization
		tee or	trustee			ensat				and related
		al trus	nal tr		loyee	g moo				organizations
		individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former			
DAN O'TOOLE		-	-		-	<u> </u>	<del>-</del>			
BOARD MEMBER	0.50	X						0.	0.	0.
BILLY PIEROT										
BOARD MEMBER	0.50	X			1			0.	0.	0.
GENE PONTI										
BOARD MEMBER	0.50	X						0.	0.	0.
PASTY H. RIALS										
BOARD MEMBER	0.50	X						0.	0.	0.
JOHN RILEY										
BOARD MEMBER	0.50	X					L.	0.	0.	0.
DONNA STEPHENSON									:	
BOARD MEMBER	0.50	X						0.	0.	0.
DON WEEMS									_	
BOARD MEMBER	0.50	X						0.	0.	0.
ROBERT WILSON									_	_
BOARD MEMBER	0.50	X					ļ	0.	0.	0.
JILL AUCOIN										
BOARD MEMBER	0.50	X						0,	0.	0.
DAWN M. DAVIS	0.50									
BOARD MEMBER	0.50	X						0.	0.	0.
NICHOLAS DELUZAIN	0.50								0	0
BOARD MEMBER	0.50	X						0.	0.	0.
SHIRLEY DELUZAIN	0.50	7.								0
BOARD MEMBER	0.50	X	-					0.	0.	0.
BRIAN GIRARDOT	0.50	v						0	0.	0
BOARD MEMBER	0.50	X			-			0.	0.	0.
BUTCH MARTIN BOARD MEMBER	0.50	v						0.	0.	0.
LENNY MINUTILLO	0.30	Λ		$\dashv$	-			- 0.	<u> </u>	
BOARD MEMBER	0.50	х						0.	0.	0.
DEB MOREL	0.50	Λ						0.	0.	
BOARD MEMBER	0.50	x						0.	0.	0.
JAKE PALMER	- 333			_						
BOARD MEMBER	0.50	x		ı				0.	0.	0.
ELLEN BALLARD										
BOARD MEMBER	0.50	х						0.	0.	0.
BARNEY BATES									- •	
BOARD MEMBER	0.50	x						0.	0.	0.
GARY CARR										
BOARD MEMBER	0.50	X						0.	_0.	0.
HA For Privacy Act and Paperwork Reduction	m Act Notice		<b>t</b> bo	lnat			- 4-	000	Cabadula I O	(Form 990) 2009

### **Continuation Sheet for Form 990**

OMB No 1545-0047
2009

Department of the Treasury Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

See the Instructions for Form 990.

Open to Public

Name of the Organization

LOCAL CHAPTERS OF THE L.R.A., INC.

LOCAL CH									58-224	
Part Continuation of Officers, D	irectors, T	rusi	tees			Em	ple		t Compensated	Employees
(A)	(B)			((	C)			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(c	heck	k all t	that	app	oly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
		ege				e b		organization	(W-2/1099-MISC)	from the
		- p	, n	i		ated		(W-2/1099-MISC)		organization
		l see	trust		e e	bens				and related
		ual tr	onal		ploye	tcom				organizations
		Individual trustee or director	nstrtutional trustee	Officer	Key employee	Highest compensated employee	Former			
		트	=	ō	ž	至	2			
CHUCK GAUTNEY	0.50								•	•
BOARD MEMBER	0.50	X	ļ					0.	0.	0.
GRETCHEN HAMILTON	0.50	l								•
BOARD MEMBER	0.50	X					ļ	0.	0.	0.
PETE JOHN								] _ ]	_	_
BOARD MEMBER	0.50	Х						0.	0.	0.
JERRY KOLNIAK										
BOARD MEMBER	0.50	Х						0.	0.	0.
DEBBIE KREPAK										
BOARD MEMBER	0.50	X						0.	0.	0.
VINCE LANOUE								:		
BOARD MEMBER	0.50	X						0.	0.	0.
KAY NADER										
BOARD MEMBER	0.50	X						0.	0.	0.
LENNY RAYMOND					ĺ					
BOARD MEMBER	0.50	X						0.	0.	0.
BOBBY SHIELDS										
BOARD MEMBER	0.50	Х						0.	0.	0.
JIM WILSON										
BOARD MEMBER	0.50	x						0.	0.	0.
COREY BORDELON										
BOARD MEMBER	0.50	$ _{\mathbf{X}} $						0.	0.	0.
ARNELL CURRIE									•	
BOARD MEMBER	0.50	x						0.	0.	0.
CHAUNCEY DAVIS	0.50							0.	0.	
BOARD MEMBER	0.50	x						0.	0.	0.
JIM GUILBEAUX	0.50				İ					
BOARD MEMBER	0.50	x						0.	0.	0.
BYRON HARDY	0.50	21						- 0.	- 0.	<u>0.</u>
BOARD MEMBER	0.50	v		İ	ĺ	- 1		0.	0.	0.
JOE HEACOOK, JR.	0.50	Λ			+			- 0.	U.	<u>U•</u>
BOARD MEMBER	0.50	v			- 1			0.	0.	0.
MINDY HETZEL	0.50	Λ	$\dashv$		$\dashv$		_			<u> </u>
BOARD MEMBER	0.50	$ \mathbf{v} $						0.	0.	0
WILLIAM E. KEELEY, JR.	0.50	Λ	$\dashv$	$\dashv$	+	_		0.	· · ·	0.
BOARD MEMBER	0.50	J.							7	•
	0.30	_		$\dashv$	$\dashv$	$\dashv$	-	0.	0.	0.
ROB KING	ΛΕΛ	<b>.</b>	-					_	,	^
BOARD MEMBER	0.50				-			0.	0.	0.
SHANNA LANDRY BOARD MEMBER	0 50	~					[	_	<u>,</u>	0
DOUVD MEMDEK	0.50	Δ						0.	0.	0.

### **SCHEDULE J-2**

(Form 990)

# **Continuation Sheet for Form 990**

OMB No 1545-0047
2009

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Open to Public

Name of the Organization

LOCAL CHAPTERS OF THE L.R.A., INC.

Designation of Officers D	ive etere. Tr			<u> </u>	21.	E-~	n L	·, INC.	t Componented	
Partil Continuation of Officers, D		้นรเ	ees			EII	ipic			
(A)	(B)	(C) Position					( <b>D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated	
Name and title	Average hours	(check all that apply)					LΑ	compensation	compensation	amount of
	per	(Check all that apply)				app	(VI)	from	from related	other
	week					98		the	organizations	compensation
		çç				l ge		organization	(W-2/1099-MISC)	from the
		ar dire				ted e		(W-2/1099-MISC)		organization
		stee o	ruste			pensa				and related
		lal tru	onal t		ploye	E 03				organizations
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
		=	=	ö	¥	=	- E			
YVETTE M. LEBLANC	0.50	v						0.	0.	0.
BOARD MEMBER	0.50	^						0.	0.	- 0.
JIMMY LOUIVERE BOARD MEMBER	0.50	v						0.	0.	0.
MIKE SANDERS	0.50	^			$\vdash$		-	0.	0.	•
BOARD MEMBER	0.50	y						0.	0.	0.
TRUDY TIETJE	0.50	1			$\vdash$		$\vdash$	0.	0.	•
BOARD MEMBER	0.50	x						0.	0.	0.
BOBBY WALKER	0.30								<del>-</del>	
BOARD MEMBER	0.50	x						0.	0.	0.
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# **Supplemental Information to Form 990**

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No. 1545-0047

2009

Open to Rublic Inspections

Name of the organization

LOCAL CHAPTERS OF THE L.R.A., INC.

FORM 990, PART VI, SECTION B, LINE 11: AFTER COMPLETION OF THE 990, A COPY
IS SENT TO THE CHIEF EXECUTIVE OFFICER OF LRA, JIM FUNK, AND IT IS REVIEWED
BY JIM FUNK, TOM WEATHERLY, VICE-PRESIDENT, AND WENDY ROGERS, CONTROLLER,
PRIOR TO SUBMISSION.
FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD AND STAFF SELF MONITOR
AND REPORT TO THE CEO.
FORM 990, PART VI, SECTION C, LINE 19: INFORMATION ABOUT THE GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE
AVAILABLE TO THE PUBLIC UPON REQUEST.
TIVITADDE TO THE TODDE OF OR REGODET.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

▶ See separate instructions.

2009

Openito Public

OMB No 1545-0047

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ Attach to Form 990.

Identification of Disregarded Entitles (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

LOCAL CHAPTERS OF THE L.R.A., INC.

Employer identification number 58-2248900

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year ) End-of-year assets <u>e</u> Total income ਰ Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part Part

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

Schedule R (Form 990) 2009

Direct controlling

entity

status (if section 501(c)(3))

501(C)(3)

LOUISIANA

AANAGEMENT SCHOOLS IN LA

RESTAURANT AND HOTEL

72-1318297, 2700 N, ARNOULT ROAD, METAIRIE EDUCATION FOUNDATION OF THE L,R,A, INC.

HOSTPAC - 72-0979476 2700 N. ARNOULT ROAD

LA 70002

FUNDS SCHOLARSHIPS TO THE

527

COUISIANA

INTEREST ARE OF LEA AND ITS

SUPPORTS RESTAURANT

72-0362855, 2700 N. ARNOULT ROAD, METAIRIE,

70002

LOUISIANA RESTAURANT ASSOCIATION, INC.

METAIRIE, LA 70002

INDUSTRY IN LA

CANDIDATES WHOSE BEST

SUPPORT POLITICAL

501(C)(6)

OUISIANA

Public charity <u>e</u>

> **Exempt Code** section

Legal domicile (state or

Primary activity

Name, address, and EIN

of related organization

foreign country)

932161 02-04-10

58-2248900

Page 2

Schedule R (Form 990) 2009 LOCAL CHAPTERS OF THE L.R.A., INC.

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

General or managing partner? Percentage ownership Yes No Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets <u>(6</u> Type of entity (C corp, S corp, or trust) ਉ Share of total income (d)
Direct controlling
entity Predominant income (related, unrelated, excluded from tax under sections 512-514) e Legal domicile (state or foreign country) Direct controlling entity Primary activity ਰ Legal domicile (state or foreign country) Primary activity <u>a</u> Name, address, and EIN of related organization Name, address, and EIN of related organization (a) 932162 02-04-10 Part IV

# Schedule R (Form 990) 2009 LOCAL CHAPTERS OF THE L.R.A., INC.

, Part IV, line 34, 35, or 36)
'Yes" to Form 990,
organization answered "
ons (Complete if the
Related Organizatıd
Transactions With
PartV

		_
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 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?		Yes No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		
<b>b</b> Gift, grant, or capital contribution to other organization(s)		×
c Gift, grant, or capital contribution from other organization(s)		1c X
d Loans or loan guarantees to or for other organization(s)		1d X
e Loans or loan guarantees by other organization(s)		16. 20.5.158
6 Color of accate to other propertionical		>
_		
i Lease of facilities, equipment, or other assets to other organization(s)		1i X
j Lease of facilities, equipment, or other assets from other organization(s)		1000
Performance of services or membership or fundraising solicitations for oth		
Performance of services or membership or fundraising solicitations by other organization(s)		
n Sharing of paid employees		1n X
o Bembursement baid to other organization for expenses		
q Other transfer of cash or property to other organization(s)		1q X
- 1		1r X
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	saction thresholds	
(a) Name of other organization(s)	(b) Transaction type (a-r)	<b>(c)</b> Amount involved
(1) HOSTPAC	Д	28,069.
(2) EDUCATION FOUNDATION OF THE L.R.A., INC.	a	.000,66
(S)		
(4)	:	
(5)		
(9)		
932163 02-04-10	Sche	Schedule R (Form 990) 2009

58-2248900 Page 4

Schedule R (Form 990) 2009 LOCAL CHAPTERS OF THE L.R.A., INC.

| | Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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

(h)  Code V-UBI  at a mount in box 20  managing  nons, of Schedule K-1  No (Form 1065)					
Share of end-of. Dispratory year assets	3				
(d) Micile Are all partners section 50 (tc)/3 organizations/7 (tr)  (d) Are all partners section 50 (tc)/3 (tc)/4					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a)  Name, address, and EIN  Primary activity  (st					

Schedule R (Form 990) 2009

### 110m 8868

(Rev April 2009)

Internal Revenue Service

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

OMB No. 1545-1709

File a separate application for each return. If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete .... ... ... ... ... ... ... ... All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits. Type or Name of Exempt Organization Employer identification number print LOCAL CHAPTERS OF THE L.R.A., INC. 58-2248900 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 2700 N. ARNOULT ROAD return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions METAIRIE, LA 70002 Check type of return to be filed (file a separate application for each return). X Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-T (trust other than above) Form 6069 Form 990-EZ Form 1041-A Form 990-PF Form.8870 WENDY ROGERS The books are in the care of > 2700 N. ARNOULT ROAD = METAIRIE, LA 70002 Telephone No ► 504-454-2277 FAX No If the organization does not have an office or place of business in the United States, check this box ... If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 2645 If this is for the whole group, check this box X. If it is for part of the group, check this box A and attach a list with the names and EINs of all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ➤ X calendar year 2009 or tax year beginning \_\_ Final return If this tax year is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any За nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated b tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). N/A See instructions.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)