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A For the 2013 calendar year, or tax year beginning 01-01-2013

DLN: 93493188007674

Form **990**

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 private foundations)

, 2013, and ending 12-31-2013

2013

OMB No 1545-0047

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form ▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

	eck if applicab	e C Name of organization GREATER BOSSIER ECONOMIC DEVELOPMENT FOUNDATION		D Employer	identification number
_	dress change me change	Doing Business As		20-1024	559
	tial return	Number and street (see D.O. have formal as not delivered to street address V.D. and (see			
	rmınated	Number and street (or P O box if mail is not delivered to street address) Room/suit 710 BENTON ROAD NO A	.e	E Telephone	
┌ Am	nended return	City or town, state or province, country, and ZIP or foreign postal code		(318)74	2-6043
┌ App	plication pendi	BOSSIER CITY, LA 71111		G Gross recei	pts \$ 521,907
		F Name and address of principal officer		s a group ret	
		MIKE BOGGS 710 BENTON ROAD NO A	subo	dinates?	┌ Yes ┌ No
		BOSSIER CITY,LA 71111		II subordinat	es 「Yes「No
 т Та	ıx-exempt stat	us	inclu If "N		ıst (see ınstructions)
		WWW GBEDF ORG	_	p exemption	
			1		
		on	L Year of fo	mation 1979	M State of legal domicile LA
Activities & Governance	THE CONGOVE CADE CADE ECON NEW EBOSS ALSO LEGIS 2 Check 3 Numb 4 Numb 5 Total	describe the organization's mission or most significant activities in the property of the property of the governing body (Part VI, line 1b) anumber of individuals employed in calendar year 2013 (Part V, line 2a)	OND OUR PASUCH ORGAE NORTHWES NO SSIER RUCTURE DIONAL QUADEVELOPME	ARTNERSHII NIZATIONS ST LOUISIA TO BE COMF EVELOPMEI LITY OF LIF NT, FINANC	P WITH LOCAL AS THE NA PARTNERSHIP FOR PETITIVE IN SECURING NT, ASSISTANCE TO E ISSUES THE GBEDF IAL ASSISTANCE AND
	1	unrelated business revenue from Part VIII, column (C), line 12		7	7a 0 7b 0
	• 6	twhyteen and manta (Bart WIII less th)	Prio	r Year 474,812	Current Year
ē		tributions and grants (Part VIII, line 1h)		4/4,812	
Revenue		estment income (Part VIII, column (A), lines 3, 4, and 7d)		69,852	552
ď	11 Oth	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,000	2,000
		al revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		546,664	
	1	nts and similar amounts paid (Part IX, column (A), lines 1–3)		310,001	. 521 907
				847,450	
	14 Ben	efits paid to or for members (Part IX, column (A), line 4)		847,450	137,100
ø	15 Sala	ries, other compensation, employee benefits (Part IX, column (A), lines		С	137,100
9880	15 Sala 5-1	ries, other compensation, employee benefits (Part IX, column (A), lines 0)		219,105	137,100
xh enses	15 Sala 5-1 16a Pro	ries, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e)		С	137,100
Expenses	15 Sala 5-1 16a Pro b Tota	ries, other compensation, employee benefits (Part IX, column (A), lines 0)		219,105	137,100 0 0 225,309 0
Expenses	15 Sala 5-1 16a Pro b Tota 17 Oth	ries, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e)		219,105 C	137,100 0 0 5 225,309 0 0
	 15 Sala 5-1 16a Pro b Tota 17 Oth 18 Tota 	rises, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e) fundraising expenses (Part IX, column (D), line 25) respenses (Part IX, column (A), lines 11a-11d, 11f-24e)		219,105 C 107,963 1,174,518 -627,854	137,100 0 0 225,309 0 0 107,094 469,503
	 15 Sala 5-1 16a Pro b Tota 17 Oth 18 Tota 	rises, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e) I fundraising expenses (Part IX, column (D), line 25) re expenses (Part IX, column (A), lines 11a-11d, 11f-24e) al expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	Beginnin	219,105 C 107,963 1,174,518 -627,854 g of Current	137,100 0 0 225,309 0 0 107,094 3 469,503
	15 Sala 5-1 16a Pro b Tota 17 Oth 18 Tot. 19 Rev	eries, other compensation, employee benefits (Part IX, column (A), lines 0) Tessional fundraising fees (Part IX, column (A), line 11e)	Beginnin	219,105 C 107,963 1,174,518 -627,854	137,100 0 0 225,309 0 0 107,094 3 469,503 52,404 End of Year
	15 Sala 5-1 16a Pro b Tota 17 Oth 18 Tot 19 Rev 20 Tot	rises, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e) I fundraising expenses (Part IX, column (D), line 25) re expenses (Part IX, column (A), lines 11a-11d, 11f-24e) al expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	Beginning Y	219,105 0 107,963 1,174,518 -627,854 g of Current	137,100 0 0 5 225,309 0 0 107,094 469,503 52,404 End of Year 6 642,556
Net Assets or Fend Balances	15 Sala 5-1 16a Pro b Tota 17 Oth 18 Tot. 19 Rev 20 Tot 21 Tot 22 Net	iries, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e) I fundraising expenses (Part IX, column (D), line 25) er expenses (Part IX, column (A), lines 11a-11d, 11f-24e) al expenses Add lines 13-17 (must equal Part IX, column (A), line 25) enue less expenses Subtract line 18 from line 12	Beginning Y	219,105 0 107,963 1,174,518 -627,854 g of Current ear 652,195	137,100 0 0 225,309 0 0 8 107,094 8 469,503 52,404 End of Year 6 42,556 1,799
Met Assets or Under Batances Sign	15 Sala 5-1 16a Pro b Tota 17 Oth 18 Tot. 19 Rev 20 Tot 21 Tot 22 Net rt II Signary arer has any	iries, other compensation, employee benefits (Part IX, column (A), lines 0) Gessional fundraising fees (Part IX, column (A), line 11e)	Beginning Y	219,105 219,105 0 107,963 1,174,518 -627,854 3 of Current ear 652,195 1,594 650,601	137,100 0 0 225,309 0 0 3 107,094 469,503 52,404 End of Year 6 642,556 1,799 640,757
Met Assets or University of Databases or Univers	15 Salis 5-1 16a Pro b Tota 17 Oth 18 Tot. 19 Rev 20 Tot 21 Tot 22 Net 111 Sign penalties nowledge are per are has any	iries, other compensation, employee benefits (Part IX, column (A), lines 0) dessional fundraising fees (Part IX, column (A), line 11e)	Beginning Y	219,105 107,963 1,174,518 -627,854 3 of Current ear 652,195 1,594 650,601 es and staten based on all	137,100 0 0 225,309 0 0 3 107,094 469,503 52,404 End of Year 6 642,556 1,799 640,757
Met Assets or University of Databases or Univers	15 Salis 5-1 16a Pro b Tota 17 Oth 18 Tot. 19 Rev 20 Tot 21 Tot 22 Net 111 Sign penalties nowledge are per are has any	inners, other compensation, employee benefits (Part IX, column (A), lines 0) dessional fundraising fees (Part IX, column (A), line 11e)	Beginning Y	219,105 107,963 1,174,518 -627,854 3 of Current ear 652,195 1,594 650,601 es and staten based on all	137,100 0 0 225,309 0 0 107,094 8 469,503 52,404 End of Year 6 642,556 1,799 640,757 ments, and to the best of information of which
Sign Here	15 Sala 5-1 16a Prob b Tota 17 Oth 18 Tot. 19 Rev 20 Tot. 21 Tot. 22 Net. Tt III Signarer has any e Market has any	rices, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e)	Beginning Y Ving schedule an officer) is 20 Do the Cheself	219,105 107,963 1,174,518 -627,854 3 of Current ear 652,195 1,594 650,601 es and staten based on all	137,100 0 0 0 225,309 0 0 107,094 8 469,503 52,404 End of Year 6 642,556 1,799 640,757
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Paid Balances Pre	15 Sala 5-1 16a Pro b Tota 17 Oth 18 Tot. 19 Rev 20 Tot 21 Tot 22 Net 111 Signary arer has any	rices, other compensation, employee benefits (Part IX, column (A), lines 0) ressional fundraising fees (Part IX, column (A), line 11e)	Beginning Y Ving schedule an officer) is 20 Define The Self Firm	219,105 107,963 1,174,518 -627,854 3 of Current ear 652,195 1,594 650,601 es and staten based on all	137,100 0 0 0 225,309 0 0 107,094 8 469,503 52,404 End of Year 6 642,556 1,799 640,757

✓ Yes ☐ No

Par	t III	Statement of Program S Check if Schedule O contains a			tIII	স
1	Briefl	y describe the organization's mi	ssion			
SEE	кто рі	ON OF THE GBEDF IS TO POS LACE EMPHASIS ON INFRAST /ELOPMENT AND REGIONAL (RUCTURE DEVELO	PMENT, ASSISTAN		
2	the pr	e organization undertake any si ior Form 990 or 990-EZ?				
_		s," describe these new services				
3	servic	e organization cease conducting				
	If "Y e	s," describe these changes on S	Schedule O			
4	expen	tibe the organization's program s ses Section 501(c)(3) and 501 tal expenses, and revenue, if an	(c)(4) organizations	are required to repo		
4a	(Code	e) (Expenses \$	40,000	including grants of \$	40,000) (Revenue \$)
		ORT OF BARKSDALE FORWARD BARKS UBLIC ABOUT THE SOCIAL, CULTURAL,				NIR FORCE BASE BY EDUCATING
41:	(Cada	\ /F		including grants of \$) (Davanua d	,
4b	(Code	e) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
	(Code	e) (Expenses \$	429,503	ıncludıng grants of \$	97,100) (Revenue \$	2,000)
		R PROGRAM SERVICES INCLUDE SUPPO DATION, CYBER CAMP AT LA TECH, I-6				
4d		er program services (Describe in enses \$ 429,503	Schedule O) including grants of	f\$ 9	7,100) (Revenue \$	2,000)
4e	Tota	l program service expenses 🕨	469,503			

Part IV	Chec	klist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	,			
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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		No
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? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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		1	
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 3			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
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 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
h	,			110
	If "Yes," enter the name of the foreign country ►			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
-	,,,,,,	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a	esponse or note to ar	v line in this Part VI .							

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Codi	a)
50	Tellon B. Folicies (This Section B requests information about policies not required by the Internal K	CVCIIC	70 000	<u>., </u>
36	Tellon B. I oncies (This Section & requests information about policies not required by the Internal K	CVCII	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization in the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No No

- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►THE ORGANIZATION 710 BENTON ROAD NO A BOSSIER CITY, LA 71111 (318) 742-6043

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) MIKE BOGGS	1 00	х		х				0	0	0
CHAIRMAN (2) TOMMY BOGGS	1 00						_			
		×						0	0	0
DIRECTOR (3) JOHN BONOMO	1 00									
	1 00	х		х				0	0	0
VICE CHAIRMAN (4) CHARLES COYLE	1 00									
	1 00	х						0	0	0
DIRECTOR (5) RAND FALBAUM	1.00									
	1 00	x						0	0	0
DIRECTOR (6) TOM CLASS							-			
(6) TOM GLASS	1 00	x						0	0	0
DIRECTOR										
(7) CARLTON GOLDEN	1 00	x						0	0	0
DIRECTOR							ļ			
(8) GARY HUBBARD	1 00	×						0	0	0
DIRECTOR										
(9) JOHN HUBBARD	1 00	l x						0	0	0
DIRECTOR										
(10) PERCY HUBBARD	1 00	×						0	0	0
DIRECTOR								, and the second	Ţ	
(11) JIM JOHNSON	1 00	x						0	0	0
DIRECTOR								Ŭ	· ·	
(12) BILL MCFADDEN	1 00	x						0	0	0
DIRECTOR		^						Ŭ	0	0
(13) JOHN MICHAEL MOORE	1 00	V						0	0	0
IMMED PAST CHAIRMAN		Х			<u> </u>			0	0	0
(14) LANCE MOSLEY	1 00	V						0	0	
DIRECTOR		Х					L			0
(15) DOUG ROGERS	1 00			,,						
TREASURER		X		Х				0	0	0
(16) DON UPDEGRAFF	1 00	Ţ,,						_		_
DIRECTOR		X						0	0	0
(17) JEFF WIESE	1 00									
DIRECTOR		X						0	0	0
								ı		Form 990 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	note boo	check , unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from relate organization	on d is	(F Estim amount o compen from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099 MISC)	I		zation lated ations
(18)	IM WILHITE	1 00	×						0		0		C
DIREC		1.00				-					_		
	MAYOR LORENZ WALKER	1 00	x						0		o		C
	FICIO BILL ALITMUS	1 00									\dashv		
	FICIO		x						0		0		C
	ASON SMITH	1 00									\dashv		
DIREC	CTOR		X						0		0		C
(22) I	DAVID R ROCKETT JR	40 00	х			X			115,132		0		C
EXEC	JTIVE DIRECTOR		^						115,132		<u> </u>		
											_		
											\dashv		
											\dashv		
						_					\dashv		
1b	Sub-Total			•			.						
C	Total from continuation sheets to Pa			•	•		•				_		_
d	Total (add lines 1b and 1c)				•		•		115,132		0		0
2	Total number of individuals (including \$100,000 of reportable compensation				ed a	bove	e) who	rec	eived more than				
												Yes	No
3	Did the organization list any former of on line 1a? <i>If "Yes," complete Schedule</i>						yee, o	r hig	nest compensate	d employee	_		. .
4	For any individual listed on line 1a, is					_	 	 \+h-	r componentian for	m the	3		No
7	organization and related organizations									om the			
	ındıvıdual				•	•	•			[4		No
5	Did any person listed on line 1a received		•						-	idividual for			
	services rendered to the organization	? If "Yes," comple	te Sche	edule	J for	suc	n pers	on		[5		No
Se	ction B. Independent Contrac	tors											
1	Complete this table for your five higher compensation from the organization	est compensated										tax vear	
		(A)								(B)	Ī	(C)
	Name and	business address							Description	on of services	\dashv	Comper	isation
											\exists		
											\dashv		
2	Total number of independent contractors \$100,000 of compensation from the or		not lim	ited	to th	iose	listed	ab	ove) who received	more than	T		

Part V	<u> </u>	Statement of Revenue Check if Schedule O contains a resp	once or note to any lir	no in this Bort VIII			_
	1a	Federated campaigns 1		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts							
ons, Gifts, Grants Similar Amounts	Ь	Membership dues 1	b 49,075				
, G	С	Fundraising events 1	с				
Gifts, nilar An	d	Related organizations 1	d				
nii.	e	Government grants (contributions) 1	e 385,571				
ons Si	f	All other contributions, gifts, grants, and	f 84,709				
tributic Other	'	similar amounts not included above					
G를	g	Noncash contributions included in lines 1a-1f \$					
Contributions, and Other Sim	h	Total. Add lines 1a-1f		519,355			
C			Buainasa Cada				
Пе	2a		Business Code				
ever	b						
2 <u>4</u>							
Š	C d						
Se							-
Program Serwce Revenue	e	All other programs as a second					
ĮDo,	f	All other program service revenue					<u> </u>
<u>~</u>	g	Total. Add lines 2a-2f					
	3	Investment income (including divide and other similar amounts)		552			552
	4	Income from investment of tax-exempt bon	F F				
	5	Royalties	· · · · · · · · · · · · · · · · · · ·				
		(ı) Real	(II) Personal				
	6a	Gross rents					
	ь	Less rental expenses					
	c	Rental income					
	d	or (loss) Net rental income or (loss)	<u> </u>				
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory Less cost or					
	Ь	other basis and					
	l c	sales expenses Gain or (loss)					
	d	Net gain or (loss)					
ıne	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18	a				
the	ь	Less direct expenses	b				
0	c	Net income or (loss) from fundraising					
	9a	Gross income from gaming activities See Part IV, line 19	a				
	ь	Less direct expenses	ь				
		Net income or (loss) from gaming ac Gross sales of inventory, less returns and allowances .	tivities				
	ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of in	· ·				
	-	Miscellaneous Revenue	Business Code 900099	2 000	3 000		
	11a	MISCELLANEOUS	900099	2,000	2,000		
	Ь						ļ
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d		2,000			
	12	Total revenue. See Instructions .		521,907	2,000	ſ	552

Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4)) organizations must complete all	columns All other organizations mu	st complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX								
	ot include amounts reported on lines 6b, o, 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 United States See Part IV, line 21	137,100	·		· · · · · · · · · · · · · · · · · · ·			
2	Grants and other assistance to individuals in the United States See Part IV, line 22							
3	Grants and other assistance to governments, organizations, and individuals outside the United States 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	179,633						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,895						
9	Other employee benefits	27,579			_			
10	Payroll taxes	13,202						
11	Fees for services (non-employees)							
а	Management							
b	Legal	600			_			
c	Accounting	10,402						
d	Lobbying							
e	Professional fundraising services See Part IV, line 17							
f	Investment management fees							
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)							
12	Advertising and promotion	16,983						
13	Office expenses	38,377						
14	Information technology							
15	Royalties							
16	Occupancy	14,940						
17	Travel							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings							
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	5,496						
23	Insurance							
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)							
а	SPECIAL PROJECTS	10,423						
b	LEGISLATIVE MONITORING	6,000						
c	NEWSLETTER AND PROMOTIO	3,430						
d	OTHER	443						
e	All other expenses							
25	Total functional expenses. Add lines 1 through 24e	469,503						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)							

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	541,508		609,654
	2	Savings and temporary cash investments	·	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, lemployees, and highest compensated employees. Complete Part II of Schedule L	key	5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under sec $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employ and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficial organizations (see instructions) Complete Part II of Schedule L	ers ers	6	
	7	Notes and loans receivable, net		7	
₹ .	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete	9,833	9	
	Ь		3,757 10,687	10c	6,076
	11	Investments—publicly traded securities		11	5,0.0
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	100,000		26,826
	16	Total assets. Add lines 1 through 15 (must equal line 34)	652,195		642,556
	17	Accounts payable and accrued expenses	1,594		1,799
	18	Grants payable	1,00	18	1,100
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		21	
Liabilit		persons Complete Part II of Schedule L	i i	22	
Ï	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		2.5	
	25	D	4.504	25	4 700
	26	Total liabilities. Add lines 17 through 25	1,594	26	1,799
n D		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
<u> </u>	27	Unrestricted net assets	650,601	27	640,757
<u>ស</u> សូ	28	Temporarily restricted net assets	333,531	28	0.10,1.01
<u> </u>	29	Permanently restricted net assets		29	
Assets of Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
) /	30	Capital stock or trust principal, or current funds		30	
Į,	31	Paid-in or capital surplus, or land, building or equipment fund		31	
á	32	Retained earnings, endowment, accumulated income, or other funds		32	
_ ĕ	33	Total net assets or fund balances	650,601	33	640,757
2	34	Total liabilities and net assets/fund balances	652,195	34	642,556

Par	t XI	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
			<u> </u>	•		,
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		į	521,907
2	Total	expenses (must equal Part IX, column (A), line 25)	2		4	169,503
3	Revei	nue less expenses Subtract line 2 from line 1	3			52,404
4	Neta	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		(550,601
5	Netu	nrealized gains (losses) on investments	5			
6	Dona	ted services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9	Other	changes in net assets or fund balances (explain in Schedule O)	9			-62,248
10		ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, nn (B))	10		e	540,757
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				. 区
					Yes	No
1	Ifthe	unting method used to prepare the Form 990				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
		s,' check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both	wed on			
	Γs	eparate basis				
b	Were	the organization's financial statements audited by an independent accountant?		2b	Yes	
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	rate			
		eparate basis				
C		es," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
		organization changed either its oversight process or selection process during the tax year, explain i dule O	n			
	Single	result of a federal award, was the organization required to undergo an audit or audits as set forth in th e Audit Act and OMB Circular A-133?	е	3a		No
b		es," did the organization undergo the required audit or audits? If the organization did not undergo the red audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at $\underline{www.irs.gov/form990}$.

Open to Public

emal Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .		Inspection		
Name of the organi	ization NOMIC DEVELOPMENT FOUNDATION		Emp	ployer identification number		
DIVENTER DOSSIER ECC	MONTE DEVELOPMENT FOUNDATION		20-1024559			
	izations Maintaining Donor Adv		unds	or Accounts. Complete if the		
organiz	zation answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds		(b) Funds and other accounts		
Total number a	t end of year	(a) Donor advised funds		(b) Fullus and other accounts		
	tributions to (during year)					
33 3	nts from (during year)					
	e at end of year					
	zation inform all donors and donor adviso rganization's property, subject to the or		nor adv	rised Yes No		
used only for c	zation inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?					
	rvation Easements. Complete if	the organization answered "Yes"	to Forr	m 990, Part IV, line 7.		
Preservation Protection Preservation Complete lines	conservation easements held by the orgon of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a	or education) Preservation of a Preservation of a	certifie	ed historic structure		
easement on t	he last day of the tax year			Held at the End of the Year		
Total number o	of conservation easements		2a	neid at the End of the Year		
	restricted by conservation easements		2b			
	servation easements on a certified histo	oric structure included in (a)	2c			
Number of con	servation easements included in (c) acq ure listed in the National Register		2d			
	servation easements modified, transferr	ed, released, extinguished, or terminat	ed by t	he organization during		
Number of stat	es where property subject to conservati	on easement is located 🛌				
	nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, har	ndling o	f violations, and Yes No		
Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements	during the year		
	enses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year		
Does each con and section 17	servation easement reported on line 2(o(0(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı) Yes No		
balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the in's accounting for conservation easeme	e footnote to the organization's financia				
	izations Maintaining Collection etc. If the organization answered "Y		or Ot	her Similar Assets.		
works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furtherance of public		
works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to thes	ts held for public exhibition, education				
(i) Revenues i	ncluded in Form 990, Part VIII, line 1			- \$		
(ii) Assets Inc	luded in Form 990, Part X			▶ \$		
If the organiza	tion received or held works of art, histor nts required to be reported under SFAS			· -		
D	.d.d					
Revenues incli	ıded ın Form 990, Part VIII, lıne 1			►\$		

e Other	Part	TITLE Organizations Maintaining Co	llections of Art,	, HIS	tori	cal Ti	<u>reasur</u>	<u>es, or 01</u>	ther	Similar As	sets	(con	<u>tınued)</u>
b Scholerly research a Other Preservation for future generations	3		on, and other record	ds, ch	neck	any of	the follo	wing that a	re a :	significant use	of its	;	
to Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XIII in the present of the organization and part, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table 1	а	Public exhibition		d	Γ	Loan	or excha	ange progra	ams				
Private a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical treasures or other similar Surpose Surpo	b	Scholarly research		e	Γ	Othe	r						
Part XIII	С	Preservation for future generations											
sests to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 18 Is the organization an agent, frustee, custodial or other intermediary for contributions or other assets not included on Form 990, Part X? 19 If "Yes," explain the arrangement in Part XIII and complete the following table 20 Beginning balance 31 Is a diditions during the year 42 Distributions during the year 43 Is a diditions during the year 44 Additions during the year 45 Ending balance 46 If "Yes," explain the arrangement in Part XIII Check here the explanation has been provided in Part XIII. 47 Ending balance 48 If "Yes," explain the arrangement in Part XIII Check here the explanation has been provided in Part XIII. 49 If "Yes," explain the arrangement in Part XIII Check here the explanation has been provided in Part XIII. 40 Is a Beginning of year balance. 40 Is a Beginning of year balance. 41 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 40 Contributions. 41 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 41 Beginning of year balance. 42 Octinibutions. 43 Contributions. 44 Endowment Funds or scholarships. 45 Contributions. 46 Contributions. 47 Endowment Funds or scholarships. 48 Contributions. 49 Contributions. 40 Contributions. 40 Contributions. 40 Contributions. 40 Contributions. 40 Contributions. 41 Contributions. 41 Administrative expenses. 42 Provide the estimated percentage of the current year and balance (line 1g, column (a)) held as a Board designated or quasis-endowment Funds not in the possession of the organization that are held and administered for the organization by (in related organizations). 43 Contributions. 44 In the estimated percentage of the current year and balance (line 1g, column (a)) held as a Board designated or quasis-endowment Funds. 45 Permanent endowment Funds not in	4		llections and explai	n hov	v the	y furthe	er the or	ganızatıon'	s exe	empt purpose	ın		
Tart TV, line 9, or reported an amount on Form '990, Part X, line 21.		assets to be sold to raise funds rather than t	o be maintained as i	part c	of the	organ	ızatıon's	collection	?			s l	No_
This	Par							answered	1 "Y∈	es" to Form 9	} 90,		
Additions during the year International path	1a		ıan or other ınterme	dıary	for c	ontribi	utions or	other ass	ets n	ot	┌ Ye	s	- No
C Additions during the year	b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving t	able		_					
Add								_	_	Ar	nount		
te finding balance 2a Did the organization include an amount on Form 990, Part X, line 21? 2b Did the organization include an amount on Form 990, Part X, line 21? 2c Did the organization include an amount on Form 990, Part X, line 21? 2c Endowment Funds, Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 2c Beginning of year balance GalCurrent year (b)Pror year b (c)Two years back (d)Three	С							—					
1 If	d								1d				
Did the organization include an amount on Form 990, Part X, line 21? Yes No	е	• ,						-	-+				
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	f	Ending balance							1f				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a)Current year (b)Pinor year b (c)Two years back (d)Three years back (e)Four years back	2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?							☐ Ye	s	No No
Calcument Calc	b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been pr	ovided in P	art X	III			
Beginning of year balance	Pa	rt V Endowment Funds. Complete											
b Contributions		Danish a faragala la cara	(a)Current year	(b))Prior	year	b (c) Tw	o years back	(d)⊺	hree years back	(e) Fo	ur yea	rs back
d Grants or scholarships													
d Grants or scholarships	_												
e Other expenditures for facilities and programs	C	Net investment earnings, gains, and losses											
and programs	d	Grants or scholarships											
g End of year balance	e	•											
per End of year balance	æ	· •											
a Board designated or quasi-endowment ► b Permanent endowment ► The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (1) unrelated organizations	'												
Board designated or quasi-endowment ► b Permanent endowment ► c Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations		·		- (1		1	(-)	.14					
b Permanent endowment ► c Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations listed as required on Schedule R? (iii) related organizations listed as required on Schedule R? (iii) related organizations listed as required on Schedule R? (iii) related organizations and the organization answered 'Yes' to Form 990, Part IV, line 14 Describe in Part XIII the intended uses of the organization's endowment funds 15 Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16 Land	2		ent year end balanc	e (IIn	e 1g	, colum	nn (a)) ne	eid as					
Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	a	•											
The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iv) restrict 0 3a(ii), are the related organizations listed as required on Schedule R? (iv) the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation (d) Book value depreciation (e) Equipment (f) Accumulated depreciation (h) Book value depreciation (h	Ь	Permanent endowment ►											
Ye No	С	• •	ıld equal 100%										
(i) unrelated organizations	3a		ssion of the organiza	tion	that	are hel	d and ad	mınıstered	fort	he	_		
(ii) related organizations if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value		-								3-4	-	es	No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value of the basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value of the basis (investment) (d) Book value of					•				•		-		
Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value of the basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value of the basis (investment) (d) Book value of the basis (other) (d) Book value of the basis (other) (e) Cost or other basis (other) (f) Cost or other basis (other) (f) Cost or other basis (other) (f) Accumulated depreciation (f) Book value of the basis (other) (f) Accumulated depreciation (f) Book value of the basis (other) (f) Accumulated depreciation (f) Book value of the basis (other) (f) Accumulated depreciation (f) Book value of the basis (other) (f) Accumulated depreciation (f) Book value of the basis (other) (f) Accumulated depreciation (f) Book value of the basis (other) (f) Accumulated depreciation (f) Book value of the basis (other) (f) Accumulated depreciation (g) Accumulated depreciation (g) Book value of the basis (other) (g) Accumulated depreciation (g) Book value of the basis (other) (g) Accumulated depreciation (g) Accumulated depreciation (g) Book value of the basis (other) (g) Accumulated depreciation (g) Accumulated depreciation (g) Book value of the basis (other) (g) Accumulated depreciation (g) Accumulated depreciation (g) Book value of the basis (other) (g) Accumulated depreciation (g) Accumulated depreciati	b	` ,							٠				
11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land	4	Describe in Part XIII the intended uses of th	e organization's end	dowm	ent f	unds							
1a Land Land b Buildings Seasehold improvements c Leasehold improvements 46,694 d Equipment 13,139 13,139 1a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation depreciation 1 1a) Book value basis (investment) 1 1a) Cost or other basis (investment) 1 1a) Cost or other basis (investment) 1 1a) Cost or other basis (other) 1 1a) Accumulated depreciation 1 1a) Book value </td <td>Par</td> <td></td> <td></td> <td>he o</td> <td>rgar</td> <td>ızatıo</td> <td>n answ</td> <td>ered 'Yes'</td> <td>' to F</td> <td>orm 990, Pa</td> <td>irt IV</td> <td>', line</td> <td>2</td>	Par			he o	rgar	ızatıo	n answ	ered 'Yes'	' to F	orm 990, Pa	irt IV	', line	2
b Buildings												d) Boo	ok value
c Leasehold improvements		Land		1	+						+		
c Leasehold improvements											\dashv		
d Equipment 46,694 40,618 6,076 e Other 13,139 13,139 0		•									\top		
e Other		•						46	5,694	40,	618		6,076
								13	3,139	13,	139		0
1944 Mas In an and In a few and few mass equal form 550, fair N, column (D), mic 10(c).)			qual Form 990, Part X	, colu	mn (B), line	10(c).)				\top		6,076

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue the organization answered 'Yes' to Form 990, Part IV, line 12a.	per R	eturn Complete If
1	Total revenue, gains, and other support per audited financial statements	1	521,907
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	521,907
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	ļ	
C	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	521,907
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	469,503
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	469,503
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	469,503
	Supplemental Information		
Part '	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2 V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to nation		de any additional
	Return Reference Explanation		
COL	THE FOUNDATION IS EXEMPT FROM INCOME TAXES AS AN ORGAN SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE THE FOUN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOU 509(A) ACCORDINGLY, THERE IS NO PROVISION FOR INCOME TA STATEMENTS, HOWEVER, THE FOUNDATION IS REQUIRED TO I POSITIONS IT HAS TAKEN WITH RESPECT TO ITS EXEMPT STATUS WHETHER IN FACT IT CONTINUES TO QUALIFY AS A TAX EXEMPT CONSIDER WHETHER IT HAS NEXUS IN JURISDICTIONS IN WHICH WHETHER A TAX RETURN IS REQUIRED IN THOSE JURISDICTIONS EXEMPT ENTITY, THE FOUNDATION MUST ASESS WHETHER IT HAS ASSOCIATED WITH UNRELATED BUSINESS INCOME SUBJECT TO I FOUNDATION DOES NOT EXPECT ANY OF THESE TAX POSITIONS SIGNIFICANTLY OVER THE NEXT TWELVE MONTHS ANY PENALTIE FILING OR OTHER REQUIREMENTS WOULD BE RECOGNIZED AS PE FOUNDATION'S ACCOUNTING RECORDS THE FOUNDATION IS RE FEDERAL FORM 990 FOR INFORMATIONAL PURPOSES ITS FEDERAL FORM THE TAX YEARS 2010 AND BEYOND REMAIN SUBJECT TO EXAINTERNAL REVENUE SERVICE	DATIC NDATI XES II E AN A REVIE S AND ENTIT IT HA IN AI NCOM TO CH S REL NALTI QUIRE L INC	ON HAS BEEN ON UNDER SECTION N THESE FINANCIAL NNUAL W VARIOUS TAX DETERMINING TY IT MUST ALSO OS INCOME AND DDITION, AS A TAX TAX POSITIONS HE TAX THE HANGE ATED TO LATE ES EXPENSE IN THE ED TO FILE U S OME TAX RETURNS

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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Schedule I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

Attach to Form 990

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

DLN: 93493188007674

Open to Public

Employer identification number

GREATER BOSSIER ECONOMI	C DEVELOPMENT F	FOUNDATION				20-1024559	
Part I General Inform	ation on Grants	and Assistance				I	
 Does the organization main the selection criteria used Describe in Part IV the org Part II Grants and Other 	to award the grants ganızatıon's procedu	orassistance?	of grant funds in the	United States			
		recipient that receive					
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BARKSDALE AIR FORCE BASE AIR SHOW BARKSDALE AFB BAFB,LA 711102151			25,000				SPONSORSHIP OF THE AIR FORCE AIR SHOW THE EVENT ATTRACTS THOUSANDS OF PEOPLE TO THE COMMUNITY
(2) BARKSDALE FORWARD PO BOX 625 SHREVEPORT, LA 711620625	72-1268137	501(C)(3)	40,000				GENERAL SUPPORT FOR THE ORGANIZATION
(3) INDEPENDENCE BOWL FOUNDATION PO BOX 1723 SHREVEPORT, LA 71166	72-0927228	501(C)(3)	25,000				GENERAL SUPPORT FOR THE ORGANIZATION
(4) LSUS-CBER 1 UNIVERSITY PLACE SHREVEPORT,LA 71115	72-0702001	501(C)(3)	15,000				GENERAL SUPPORT FOR THE ORGANIZATION
(5) I-69 MID-CONTINENT COALITION P O BOX 257 STONEVILLE, MS 38776	35-1883186	501(C)(4)	5,000				GENERAL SUPPORT FOR THE ORGANIZATION
(6) SHREVEPORT BOSSIER FILM OFFICE 505 TRAVIS ST STE 200 SHREVEPORT, LA 71101			5,000				GENERAL SUPPORT FOR THE ORGANIZATION
(7) REGIONAL AIR SERVICE ASSN 2025 M STREET NW WASHINGTON, DC 20036	52-1039526	501(C)(3)	10,000				GENERAL SUPPORT FOR THE ORGANIZATION
(8) LOUISIANA ECONOMIC DEVELOPMENT 1051 NORTH THIRD STREET BATON ROUGE, LA 70802	72-1439428	501(C)(3)	10,000				GENERAL SUPPORT FOR THE ORGANIZATION
2 Enter total number of secti	on 501(c)(3) and go	overnment organizations l	isted in the line 1 tabl	e		📂	

Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.										
(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance					

			-			
Part IV	Supplemental Informa	tion. Provide the info	ormation required in Pa	rt I, line 2, Part III, c	olumn (b), and any other a	ddıtıonal ınformatıon.

Return Reference Explanation

Schedule I (Form 990) 2013

Software ID:

Software Version:

EIN: 20-1024559

Name: GREATER BOSSIER ECONOMIC DEVELOPMENT FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARKSDALE AIR FORCE BASE AIR SHOW BARKSDALE AFB BAFB,LA 711102151			25,000				SPONSORSHIP OF THE AIR FORCE AIR SHOW THE EVENT ATTRACTS THOUSANDS OF PEOPLE TO THE COMMUNITY
BARKSDALE FORWARD PO BOX 625 SHREVEPORT, LA 711620625	72-1268137	501(C)(3)	40,000				GENERAL SUPPORT FOR THE ORGANIZATION
INDEPENDENCE BOWL FOUNDATION PO BOX 1723 SHREVEPORT,LA 71166	72-0927228	501(C)(3)	25,000				GENERAL SUPPORT FOR THE ORGANIZATION
LSUS-CBER 1 UNIVERSITY PLACE SHREVEPORT,LA 71115	72-0702001	501(C)(3)	15,000				GENERAL SUPPORT FOR THE ORGANIZATION
I-69 MID-CONTINENT COALITION P O BOX 257 STONEVILLE,MS 38776	35-1883186	501(C)(4)	5,000				GENERAL SUPPORT FOR THE ORGANIZATION
SHREVEPORT BOSSIER FILM OFFICE 505 TRAVIS ST STE 200 SHREVEPORT,LA 71101			5,000				GENERAL SUPPORT FOR THE ORGANIZATION
REGIONAL AIR SERVICE ASSN 2025 M STREET NW WASHINGTON,DC 20036	52-1039526	501(C)(3)	10,000				GENERAL SUPPORT FOR THE ORGANIZATION
LOUISIANA ECONOMIC DEVELOPMENT 1051 NORTH THIRD STREET BATON ROUGE, LA 70802	72-1439428	501(C)(3)	10,000				GENERAL SUPPORT FOR THE ORGANIZATION

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As Filed Data -

DLN: 93493188007674

OMB No 1545-0047

2013

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization GREATER BOSSIER ECONOMIC DEVELOPMENT FOUNDATION

Employer identification number

20-1024559

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THERE IS A FAMILY RELATIONSHIP BETWEEN SOME OF THE MEMBERS OF THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS MEMBERS ARE BUSINESS LEADERS AND OTHER INDIVIDUALS FROM THE COMMUNITY
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE 990 IS PROVIDED TO THE BOARD MEMBERS PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OVERSEES THE POLICIES AND REVIEWS TRANSACTIONS OF THE FOUNDATION
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD IS MADE AWARE OF SALARY COMPARABILITY DATA FROM OTHER FOUNDATIONS SALARIES OF ALL EMPLOYEES ARE DISCUSSED AND APPROVED BY THE BOARD OF DIRECTORS THE BOARD APPROVES THE BUDGET FOR THE FOUNDATION
FORM 990, PART VI, SECTION C, LINE 19	THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART XI, LINE 9	PRIOR PERIOD ADJUSTMENT -62,248
FORM 990, PART XI, LINE 2C	THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THE ORGANIZATION HAS NOT CHANGED THE PROCESS FROM THE PRIOR YEAR
FORM 990, PART XI, LINE 9	IN 2012, THE ORGANIZATION ELECTED TO MODIFY THE ACCOUNTING TREATMENT OF CERTAIN DISTRIBUTIONS RECEIVED FROM THE RED RIVER BIDCO, INC INVESTMENT NON-DIVIDEND DISTRIBUTIONS RECEIVED IN 2012 WERE FORMERLY TREATED AS INVESTMENT INCOME ON THE INCOME STATEMENT, AND ARE NOW PRESENTED AS A REDUCTION IN THE INVESTMENT ON THE BALANCE SHEET IN 2012, THIS RESULTED IN A DECREASE OF \$62,248 IN INVESTMENT INCOME AND THE ORGANIZATION'S INVESTMENT IN RED RIVER BIDCO, INC, COMPARED TO THAT AS PREVIOUSLY REPORTED NET ASSETS AS OF DECEMBER 31, 2012 AMOUNT TO \$588,353 AS COMPARED TO \$650,601, AS PREVIOUSLY REPORTED