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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2014

OMB No 1545-0047

Open to Public Inspection _

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

8/01 For the 2014 calendar year, or tax year beginning 2014, and ending 2015 D Employer identification number Check if applicable Address change BREAUX BRIDGE CRAWFISH FESTIVAL 72-1248905 ASSOCIATION Telephone number Name change P.O. BOX 25 337-332-6655 Initial return BREAUX BRIDGE, LA 70517 Final return/terminated G Gross receipts \$ 547,386 Amended return F Name and address of principal officer H(a) Is this a group return for subordinates MARK BERNARD Application pending Yes H(b) Are all subordinátes included?
If 'No,' attach a list (see instructions) SAME AS C ABOVE Tax-exempt status 501(c)(3) X 501(c) (A 4947(a)(1) or 527 Website: ► WWW.BBCRAWFEST.COM H(c) Group exemption number Form of organization Other > Corporation Trust Association L Year of formation 1959 M State of legal domicile LA **√** Summary Briefly describe the organization's mission or most significant activities: COMMUNITY BENEFIT ORGANIZATION Governance if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 3 Activities & Number of independent voting members of the governing body (Part VI, line 1b) 4 25 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 400 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0. Prior Year Current Year Contributions and grants (Part VIII, line 1h) Revenue Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 2,610. 2,850. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 255,202. 192,538. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 257,812. 195,388. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 8,210 2,950. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation Vemployee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19,220. 145,638 144,425. 153,848 147,375. Revenue less expenses Subtract line 18 from line 12 103,964 48,013. **End of Year** Beginning of Current Year 20 Total assets (Part X, line 16). 716,879 764,892. 21 Total liabilities (Part X, line 26) 159,806 159,806. Net assets or fund balances Subtract line 21 from line 20. 557,073 605,086 Part II Signature Block return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and on all information of which preparer has any knowledge Under penalties of perjury, I declare that I have example to Declaration of preparer (other than officer 1-26-16 Sign Here Type or print name and title Print/Type preparer's name Preparer's signature Check RUSSELL F. RUSSELL F CHAMPAGNE, CHAMPAGNE, CPA self-employed P00300315 Paid Preparer KOLDER, CHAMPAGNE, Use Only Firm's EIN > 72-1369868 Firm's address 183 S BEADLE RD LAFAYETTE, LA 70508-4211 Phone no (337) 232-4141 May the IRS discuss this return with the preparer shown above? (see instructions) No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

TEEA0113L 05/28/14

	0 (2014) BREAUX BRIDGE CRAWFISH FESTIVAL	12-1	24891	<u> </u>		age Z
Part III						[]
	Check if Schedule O contains a response or note to any line in this Part III					
1 Brie	efly describe the organization's mission					
<u></u>	OMMUNITY BENEFIT ORGANIZATION					.
						. _
2 Did	the organization undertake any significant program services during the year which were not listed on the prior	r	_			
For	rm 990 or 990-EZ?			Yes	X	No
If '	Yes,' describe these new services on Schedule O.				_	
3 Did	d the organization cease conducting, or make significant changes in how it conducts, any program ser	vices?		Yes	X	No
If "	Yes,' describe these changes on Schedule O				_	
Sed	scribe the organization's program service accomplishments for each of its three largest program serviction 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations discretely if any, for each program service reported	ces, as n to other	neasurers, the	ed by e total e	expen xpens	ses es,
4a (Cc	ode.) (Expenses \$ 2,950. including grants of \$) (Ri	evenue	\$)
-	ONATIONS WERE MADE TO A FEW ORGANIZATIONS IN THE COMMUNITY FOR T			E OF		
	ENEFITTING THE COMMUNITY AS A WHOLE; THEREFORE, THE NUMBER OF PE					TS -
	NDETERMINABLE.	TOONS	25.77	<u></u>		
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4 b (Cc	ode) (Expenses \$ including grants of \$) (Ri	evenue	Ś			
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4 c (Cc	ode) (Expenses \$ including grants of \$) (R	evenue	Ś			
			·—			 '
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4 d Otl	her program services (Describe in Schedule O)					
	xpenses \$ including grants of \$) (Revenue \$)	
	otal program service expenses > 2,950.				-	
BAA	TEEA0102L 05/28/14			Forn	n 990	(2014)

72-1248905 Page 3 Form 990 (2014) BREAUX BRIDGE CRAWFISH FESTIVAL Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Х Schedule A. Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Х 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Х for public office? If 'Yes,' complete Schedule C, Part I 3 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 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III Х 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. X 6 Part I 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. Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х 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 Χ 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, X permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, 11 or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule X D, Part VI 11 a 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 11 b X c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Х 11 c 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 Х 11 d X e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11 e 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)? If 'Yes,' complete Schedule D, Part X Χ 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII 12a Х b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and X if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Χ 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a

- **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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
- 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
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV
- 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)
- 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
- 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
- 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H
 b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

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14b

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20 b

Par	t IV Checklist of Required Schedules (continued)			
····	•		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.	24a		Х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	bild the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? .	24d		<u> </u>
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
ı	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		Х
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 'Yes', complete Schedule L, Part II	26		х
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		х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			-
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28ь		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29		29	ļ	Х
30	contributions? If 'Yes,' complete Schedule M	30		Х
31		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		Х
	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		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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? If 'Yes,' complete Schedule R , $Part\ V$, $line\ 2$	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37	<u> </u>	х
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
BA	Δ	Forr	n 990	(2014)

Check if Schedule O contains a response or note to any line in this Part V				
			Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 47	;	٠.	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	-	-	
c Did the organization comply with backup withholding rules for reportable payments to vendors and re (gambling) winnings to prize winners?	portable gaming	1 c	Х	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 0		-	
b If at least one is reported on line 2a, did the organization file all required federal employment		2 b	٠ '۶	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins		20		
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year		3 a	}	Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	•	3 b		
· · · · · · · · · · · · · · · · · · ·		30		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account.)	r authority over, a nancial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country.	A (FDAD)	٠, ا	1	
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial				v
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax		5 a		$\frac{X}{X}$
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	er transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, are solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contribution of tax deductible?	ons or gifts were	6 ь		
7 Organizations that may receive deductible contributions under section 170(c).		, ,,	-/ / -	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and passervices provided to the payor?	artly for goods and	7 a	, - '	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required to file			
Form 8282?	,	7с		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	efit contract?	7 f		
g If the organization received a contribution of qualified intellectual property, did the organization file F as required?	Form 8899	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the sponsoring			
organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.		_	1	
a Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or set of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or set of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or set of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or set of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or set of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or set of the set of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or set of the set	son? .	9 Ь		
10 Section 501(c)(7) organizations. Enter:	1	· -		
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
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.	1			
a Gross income from members or shareholders	11 a	'		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 ь	-		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o	•	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	126			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		J		
a Is the organization licensed to issue qualified health plans in more than one state?	•	13 a	ļ	
Note. See the instructions for additional information the organization must report on Schedul	e O			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	136			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O	14 b	_	
BAA TEFA01051 05/28/14		Form	990	(2017

Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management 1 a 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 in the containing the property of the programment of	Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	low, ges i	and n	for				
Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year. 1a Enter the number of voting members of the governing body delegable broad in the real material differences in voting rights among members of the governing body, or if the governing body delegable broad in the factor of the governing body or in the governing body delegable broad in the factor of the governing body or in the governing body delegable broad in the factor of the governing body or in the factor of the governing body delegable broad in the factor of the governing body or in the factor of the governing body delegable broad in the factor of the governing body delegable broad in the factor of the governing body or in the governing body beat or in the governing body beat or governing body beat of the governing body beat beat beat beat beat beat beat beat	Schedule O. See instructions.							
18 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 lody, or file the poverning body at the end of the tax year. If there are material differences in voting rights among members of the governing the control of the poverning doctor of the poverning doctor direct, cristate, or key employee have a family relationship or a business relationship with any other officer, directors, or trustees, or key employee have a family relationship or a business relationship with any other officer, directors, or trustees, or key employees to a management company or other person? If the organization have members or stockholders? Did the organization have for the mine governing body? Did the organization have for the mine governing body? Did the organization have for the stockholders of the governing body? Did the organization have for the stockholders of the governing body? Did the organization have for the stockholders of the governing body? Did the organization have for the stockholders of the governing body? Did				التا				
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 in the law of the governing body or if the governing body delegated broad in the law of the governing body or if the governing body delegated broad in the law of the governing body or in the governing body delegated broad in the law of the governing body or in the governing body delegated broad in the law of the governing body or index the delegation of ordinars, directors, or invisees, or key employees there a funly independent or ordinars, directors, or invisees, or key employees the company or other person? 3 Did the organization for control over management offers customarily performed by or under the direct supervision of ordinars, directors, or invisees, or key employees to a management offers such such as the prior form 990 was filed? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 9 Did the organization have members or other persons who had the power to elect or appoint one or more members of the governing body? 9 Did the organization have members or stockholders? 9 Did the organization have members or stockholders? 10 Did the organization have members or stockholders. Or subject to approval by) members. SEE SCH 0 10 Did the programation ortemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 10 Did the organization have any finance or the program or the organization and the program or the	Section A. Governing Body and management		Yes	No				
b Enter the number of voting members included in line 1a, above, who are independent. 2	If there are material differences in voting rights among members	1,	•					
officer, director, frustee, or key employee? SEE SCHEDULE 0 3	b Enter the number of voting members included in line 1a, above, who are independent .		•					
of officers, directors, or trustees, or key employees to a management company or other person? A Did the organization make any significant changes to its governing documents since the prior Form 990 was field? 5 Did the organization have members or stockholders? SEE SCHEDULE 0 7 a Did the organization have members, stockholders? SEE SCHEDULE 0 7 b Did the organization have members or stockholders? SEE SCHEDULE 0 8 Are any governance decisions of the organization reserved to (or subject to approval by) members, SEE SCH 0 5 b Are any governance decisions of the organization reserved to (or subject to approval by) members, SEE SCH 0 5 b Are any governance decisions of the organization reserved to (or subject to approval by) members, SEE SCH 0 7 b M the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 b Each committee with authority to act on behalf of the governing body? 9 to there any officer, director, trustee, or key employee listed in Part VIII, Section A, who cannot be reached at the organization's maining address? If Yes, provide the names and addresses in Schedule O 10 a Did the organization have local chapters, branches, or affiliates? 10 if Yes, ide the organization have local chapters, branches, or affiliates? 10 if Yes, ide the organization have written pollose and procedures governing the activities of such chapters, affiliates, and branches to ensure that operations are consistent with the organization provided a complete cupy of this Form 990 to all members of its poverning body are filing the form? 10 b Did the organization have a written conflict of interest policy? If Yes, ye to line 13 11 a last the organization have a written conflict of interest policy? 12 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b Unit the organization have a written organization or the deliberation and decision? 13 Did	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? SEE SCHEDULE O		X					
since the prior Form 990 was field? 5. Did the organization become aware during the year of a significant diversion of the organization's assets? 6. Did the organization have members or stockholders? SEE SCHEDULE 0 7a. Did the organization have members or stockholders? SEE SCHEDULE 0 5. Are any governance decisions of the organization reserved to (or subject to approval by) members. SEE SCH 0 5. Are any governance decisions of the organization reserved to (or subject to approval by) members. SEE SCH 0 6. X 7b. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8. Did the organization become with authority to act on behalf of the governing body? 9. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule 0 5. Section B. Policies (This Section B requests imformation about policies not required by the Internal Revenue Code. 9. Yes No. 10a Did the organization have local chapters, branches, or affiliates? 10a Did the organization have local chapters, branches, or affiliates? 11b Wes 6d the organization have semple purposes? 11c Alta the organization have a written conflict of interest policy? If 'No.' go to line 13 11b Weie officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 11c Did the organization have a written own of the organization to review this Form 990 SEE SCHEDULE 0 12a Did the organization have a written own of the organization to review the Form 990 SEE SCHEDULE 0 12b Use officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 11c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O the process for determining compensation	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		Х				
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taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 12 List the states with which a copy of this Form 990 is required to be filed ► NONE 13 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 14 Describe in Schedule 0 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. SEE SCHEDULE O 25 State the name, address, and telephone number of the person who possesses the organization's books and records	·							
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Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule 0 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. SEE SCHEDULE O 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16b						
17 List the states with which a copy of this Form 990 is required to be filed ► NONE 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule 0 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. SEE SCHEDULE O 20 State the name, address, and telephone number of the person who possesses the organization's books and records			,	·				
Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Wighter (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. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records								
Own website Another's website X Upon request Other (explain in Schedule O) 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. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records	18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3):	only)	avaıl	lable				
the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records	Own website Another's website X Upon request Other (explain in Schedule 0)	able to						
	the public during the tax year. SEE SCHEDULE O	חוב ונו						

Form 990 (2014)

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

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

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

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

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

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

				(C))					
(A) Name and Title	(B) Average hours	director/trustee) c		(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other				
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MARK BERNARD	0								-	
PRESIDENT	0							0.	0.	0.
(2) CHRIS LATIOLAIS DIRECTOR	0_							0.	0.	0.
(3) GEORGE DOMINGUES	0									
DIRECTOR	0	<u> </u>						0.	0.	<u> </u>
(4) GENEE HEBERT	0				ļ					
DIRECTOR	0							0.	0.	0.
(5) ERROL LEBLANC			ļ							
DIRECTOR	0	<u> </u>						0.	0.	0.
(6) JOHN POIRIER]								
DIRECTOR	0	<u> </u>	ļ					0.	0.	0.
					ł					
PUBLICITY DIREC	0	<u> </u>				ļļ		0.	0.	0.
(8) JIMMY DURIO]								
DIRECTOR	0	ļ	ļ		ļ			0.	0.	0.
(9) TAMMY DOMINGUES										
SECRETARY	0	ļ	ļ		<u> </u>	ļ.,		0.	0.	0.
(10) PAUL LAVIOLLETTE	0	-								_
FEST COORDINAT	0	<u> </u>	ļ		 	 		0.	0.	0.
(11) EUGENE FAUCHEAUX		ļ						_	_	
DIRECTOR	0	ļ	ļ		<u> </u>		<u> </u>	0.	0.	0.
(12) PAULA FAUCHEAUX										_
DIRECTOR	0	 	 		├-	ļ	<u> </u>	0.	0.	0.
(13) CRAIG OLIVIER	0_								_	_
VICE PRESIDENT	0			_	<u> </u>	 		0.	0.	0.
(14) BLAISE BERNARD		1							_	
DIRECTOR	0	<u> </u>	22.0			<u> </u>	1	0.	0.	0.

(A)	(B) Average	(do	not o	check	sition more	e than	one	(D)	(E)	(F)
Name and title	hours per week (list any hours	offi	cer a	nd a	direct	is both or/trus	tee)	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	for related organiza - tions	individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organization and related organizations
	below dotted line)	stee	rustee		e	ensated				
(15) BLAKELEY BLANCHARD DIRECTOR	0							0.	0.	0.
(16) CINDY BOREL	0							· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>
DIRECTOR	7 0	<u> </u>						0.	0.	0.
(17) BRANDON DAVID DIRECTOR AT LG	0							0.	0.	0.
(18) LEAH DAVID	0	-		-	-	┼─		0.		<u> </u>
DIRECTOR	0							0.	0.	0.
(19) SCOTT HEBERT	0									
DIRECTOR	0	ļ	ļ		_	1		0.	0.	0.
(20) DEBBIE MORROGH DIRECTOR	$-\frac{0}{0}$							0.	0.	0.
(21) KENNETH THIBODEAUX	0_									
DIRECTOR	0				<u> </u>	-	ļ	0.	0.	0.
C22) GERALD BOREL DIRECTOR	$-\frac{0}{0}$	-						0.	0.	0.
(23) MICHELYN BERNARD	0					 -	-	0.	0.	<u> </u>
DIRECTOR	7-0-	1						0.	0.	0.
(24) DELL HEBERT DIRECTOR	0	Ī						0.	0.	0.
(25) NATALIE BLANCHARD	0			ļ						<u> </u>
DIRECTOR	0			ļ				0.	0.	0.
1 b Sub-total				•			_	0.	0.	0.
c Total from continuation sheets to Part VII, Sec d Total (add lines 1b and 1c)	tion A	٠					-	0.	0.	0.
2 Total number of individuals (including but not limite	d to those I	isted	abo	ve)	who	recei	ved		0.	0.
from the organization • 0				. 0,				more than \$100,00	or reportable comp	ochochori
										Yes No
3 Did the organization list any former officer, dire on line 1a? If 'Yes,' complete Schedule J for su	ctor, or tru ich individu	istee i <i>al</i>	, ke	y en	oiqn	yee,	or h	nighest compensa	ted employee	3 X
4 For any individual listed on line 1a, is the sum the organization and related organizations grea such individual	of reportab ter than \$1	ie co 150,0	mpe 00?	ensa If "	atior Yes	and com	oth <i>plet</i>	er compensation te Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrefor services rendered to the organization? If 'Ye	ue comper	nsatio	on fr	om	any	unre	late	ed organization or	ındıvıdual	5 X
Section B. Independent Contractors	30, 00		<u></u>	34.0	-	, 550	2.1 P			T A
Complete this table for your five highest compe compensation from the organization. Report compe										
(A) Name and business address (B) Description of services Compensation										
Compensation										
										·
	1 1	, , ,						1		
2 Total number of independent contractors (including \$100,000 of compensation from the organization)		iited t	o th	ose	uste	d abo	ve)	wno received more	tnan	•
BAA	<u></u>	TEEA	0108	L 03/	/09/15	 5				Form 990 (2014)

	. Check if Schedule O contains a response or note to any line in this Part VIII							
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c	Federated campaigns Membership dues Fundraising events	1 a 1 b 1 c					312-314
itions, Gif er Similar	е	Related organizations Government grants (contributions) All other contributions, gifts, grants, similar amounts not included above	1 d 1 e				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ontribund Oth	g	Noncash contributions included in lin						
	2 a	Total. Add lines 1a-1f		Business Code	The same same			
Program Service Revenue	c p							
rogram Se	e f	All other program service rev	venue					
- A	<u>g</u> 3	Total. Add lines 2a-2f Investment income (includin	g dividends	s, interest and				a ze
	4 5	other similar amounts). Income from investment of t Royalties	ax-exempt	bond proceeds.	2,850.	2,850.		
:	b	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(II) Personal			, , , , , , , , , , , , , , , , , , ,	
		Net rental income or (loss). Gross amount from sales of assets other than inventory) Securities	(ii) Other		A 1. 1 9		
		Less cost or other basis and sales expenses Gain or (loss)					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	d	Net gain or (loss)		•		Y = 47.45,	*	
Other Revenue	b	Gross income from fundraisi (not including . \$	line 1c).	351,998.				
0		Net income or (loss) from fu Gross income from gaming a See Part IV, line 19	_		192,538.			- · -
	b	Less. direct expenses Net income or (loss) from ga	i amıng actıv	ities >	-	V	<u> </u>	·-
	b	Gross sales of inventory, les and allowances Less cost of goods sold	i	3			:	
	11 a	Net income or (loss) from sa Miscellaneous Revenue	ales of Inve	Business Code				
	b							
	е	All other revenue Total. Add lines 11a-11d Total revenue. See instruction		-	ļ 	2.050		
	12	Total revenue. See instruction	UNS		195,388.	2,850.	0.	<u>0.</u>

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a re	plete all columns All oth	<i>ler organizations must c</i> line in this Part IX	omplete column (A)	
	Check if Schedule O contains a v		(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,950.	2,950.		
2	Grants and other assistance to domestic individuals See Part IV, line 22				Refig ou en
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	1			
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)			-	
	Management				
	Legal				
	Accounting	2,820.		2,820.	
	Lobbying .	2,020.		2,020.	.,.
	, ,			1	
	Professional fundraising services. See Part IV, line 17			·	
	Investment management fees				
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	49.		49.	
12	Advertising and promotion	12,682.		12,682.	
13	Office expenses	2,033.		2,033.	
14	Information technology				
15	Royalties				
16	Occupancy	3,499.		3,499.	
17	Travel	3,433.	·	3,400.	<u> </u>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,132.		2,132.	
21	Payments to affiliates			<u> </u>	
22	Depreciation, depletion, and amortization	24,331.		24,331.	<u> </u>
23					
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).	.7 = 1.	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	<u> </u>	<u> </u>
	a CONTRACT_LABOR	52,938.		52,938.	
	b BUSINESS DEVELOPMENT	19,220.			19,220.
	c RENT_EXPENSE	15,000.		15,000.	
	d MISCELLANEOUS	3,223.		3,223.	
	e All other expenses	6,498.		6,498.	
	Total functional expenses Add lines 1 through 24e	147,375.	2,950.		19,220.
26			_,		

Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 126,726 196,639. Cash - non-interest-bearing 2 2 Savings and temporary cash investments 250,474 253,201. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net $\tau_{i} \neq t$ Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L. 6 7 Notes and loans receivable, net Assets 4,295 8 Inventories for sale or use 3,998 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 471,083 10Ь b Less accumulated depreciation 160,031 335,384 10 c 311,052. Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 716,879. 764,892. Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D Liabilities 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 159,806 159,806. Unsecured notes and loans payable to unrelated third parties 24 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 D. 25 Total liabilities. Add lines 17 through 25 26 159,806 159,806. Organizations that follow SFAS 117 (ASC 958), check here > and complete Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Fund Organizations that do not follow SFAS 117 (ASC 958), check here X and complete lines 30 through 34. è 30 Capital stock or trust principal, or current funds 30 Assets 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 557,073 605,086. Set Total net assets or fund balances 33 33 557,073. 605,086. 34 Total liabilities and net assets/fund balances 716,879. 34 764,892.

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Form 990 (2014)

-orm	990 (2014) BREAUX BRIDGE CRAWFISH FESTIVAL	72-124890	15 P	age 12	
Par	t XI - Reconciliation of Net Assets				
	. Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	195,	388.	
2	Total expenses (must equal Part IX, column (A), line 25) .	2	147,	375.	
3	Revenue less expenses Subtract line 2 from line 1	3	48,	013.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		073.	
5	Net unrealized gains (losses) on investments .	5			
6	Donated services and use of facilities	6			
7	Investment expenses .	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O).	9		0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	605,	086.	
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		_		
	Onder in Carlottal a contains a response of field to any min in the carlottal and in the carl		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					
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re	viewed on a		1	
	separate basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis		-		
1	b Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s	eparate		1	
	basis, consolidated basis, or both:	- -	1 - 1	ì	
	Separate basis Consolidated basis Both consolidated and separate basis			`	
	of f'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2c X		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle	3 a	Х	
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 Ь		
BAA	<u> </u>		Form 990	(2014)	

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and it instructions is at www.irs.gov/form990.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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.

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) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

•	Section 501(c)(4), (5), or (6) or	rganizations: Complete Part III						
	of organization	3		Employer identifica	ation number			
BRE	EAUX BRIDGE CRAWFIS	H FESTIVAL		72-124890				
Par	rt I-A Complete if the or	rganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.			
1	Provide a description of the	organization's direct and indirect political o	ampaign activities in	Part IV				
2	Political expenditures			▶ \$				
3	Volunteer hours							
Pa		rganization is exempt under section						
1	•	ise tax incurred by the organization under		► \$				
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	► \$				
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes	No		
4 a	a Was a correction made?				Yes	No		
	b If 'Yes,' describe in Part IV							
Pai		rganization is exempt under section						
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	n activities >\$				
2	2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities							
3	3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b							
4	Did the filing organization file	e Form 1120-POL for this year?			Yes	XNo		
5	organization made payments amount of political contribution	and employer identification number (EIN) For each organization listed, enter the ail is received that were promptly and directly del all action committee (PAC) If additional spa	mount paid from the flivered to a separate po	filing organization's fund blitical organization, such	ds Also enter thas a separate	ie		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of po- contributions recei- promptly and dii delivered to a se political organiza none, enter -	ved and rectly parate ition If		
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								

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

Schedule C (Form 990 or 990-EZ) 2014

•					
Schedule C (Form 990 or 990-EZ) 201				72-1248	
Part II-A Complete if section 501(is exempt under see	ction 501(c)(3) and	d filed Form 5768 (el	ection under
A Check ► if the filin	g organization belongs	to an affiliated group (and	list in Part IV each affili	ated group member's name	1
address,	EIN, expenses, and	share of excess lobbying	expenditures)		
B Check ► ☐ if the filir	ng organization check	ked box A and 'limited co	ntrol' provisions apply		
(The term	Limits on Lobbyin 'expenditures' mean	ng Expenditures is amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendite	ures to influence pub	lic opinion (grass roots lo	obbying) .		
b Total lobbying expenditi	ures to influence a le	gislative body (direct lobb	oying) .		
c Total lobbying expenditi	ures (add lines 1a an	d 1b)			
d Other exempt purpose	•				
e Total exempt purpose e	•	es 1c and 1d)			
f Lobbying nontaxable an both columns	nount Enter the amo	unt from the following tal	ole in		
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable	amount is.		· · · · · · · · · · · · · · · · · · ·
Not over \$500,000		0% of the amount on line 1e.			
Over \$500,000 but not over \$1	.000.000	100,000 plus 15% of the excess	over \$500,000	[A. 5] 一下江南部[B.	
Over \$1,000,000 but not over \$	`	175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		225,000 plus 5% of the excess			•
Over \$17,000,000		1,000,000.	7.7		
g Grassroots nontaxable	<u></u>				
h Subtract line 1g from lir	<u>=</u>	·			
i Subtract line 1f from lin					
	•			\	
j If there is an amount othe section 4911 tax for this		ine in or line ii, did the org	ganization file Form 4/20		Yes No
(Som	ne organizations that	-Year Averaging Period I made a section 501(h) els below. See the instructi	lection do not have to		
	Lobby	ing Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

BAA

(election under section 501(h)).	Ji ilict	3 1 01	111 3700
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		a)	(b)
		No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		-	
a Volunteers?	ľ]	
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?			
a Publications, or published or breadcast statements?			

f Grants to other organizations for lobbying purposes?

g Direct contact with legislators, their staffs, government officials, or a legislative body?

h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

i Other activities?

j Total Add lines 1c through 1:

2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

b If 'Yes,' enter the amount of any tax incurred under section 4912

 \boldsymbol{c} If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A | Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		X
D.	WHITE A LICENT TO	 		

Part III-B. Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year .	2 a	
b Carryover from last year	2 b	
c Total	2 c	
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5 Taxable amount of lobbying and political expenditures (see instructions).	5	0.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1 Also, complete this part for any additional information

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 2014

m990. Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

	BREAUX BRIDGE CRAWFISH FES ASSOCIATION	STIVAL	72-1248905
		or Advised Eunds or Other Similar	
Par	Organizations Maintaining Don Complete if the organization ans	swered 'Yes' to Form 990, Part IV,	line 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year).		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do are the organization's property, subject to the	onor advisors in writing that the assets held e organization's exclusive legal control?	in donor advised funds Yes No
6	Did the organization inform all grantees, don for charitable purposes and not for the benefimpermissible private benefit?	ors, and donor advisors in writing that grar it of the donor or donor advisor, or for any	t funds can be used only other purpose conferring Yes No
Par	t II ` Conservation Easements. Complete if the organization and	swered 'Yes' to Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held to		
•	Preservation of land for public use (e.g.,		tion of a historically important land area
	Protection of natural habitat		tion of a certified historic structure
	Preservation of open space	ال المادي	
2	Complete lines 2a through 2d if the organization	held a qualified conservation contribution in t	ne form of a conservation easement on the
_	last day of the tax year	There is qualified defined valued defined as a second of the second of t	to form of a domain value of additional of the
			Held at the End of the Tax Year
ē	Total number of conservation easements	•	. 2a
Ł	Total acreage restricted by conservation easi	ements .	2 b
c	Number of conservation easements on a cer	tified historic structure included in (a)	2 c
C	Number of conservation easements included structure listed in the National Register	in (c) acquired after 8/17/06, and not on a	historic 2 d
3	Number of conservation easements modified, tratax year ►	ansferred, released, extinguished, or terminate	d by the organization during the
4	Number of states where property subject to cons	servation easement is located >	
5	Does the organization have a written policy rand enforcement of the conservation easement	· · _ · _ · _ · _ · _ · _ · _	n, handling of violations,
6	Staff and volunteer hours devoted to monitoring •	, inspecting, and enforcing conservation easer	nents during the year
7	Amount of expenses incurred in monitoring, insp ▶\$	pecting, and enforcing conservation easement	during the year
8	Does each conservation easement reported and section 170(h)(4)(B)(ii)?.	on line 2(d) above satisfy the requirements .	of section 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements	ts conservation easements in its revenue and e to the organization's financial statements	expense statement, and balance sheet, and that describes the organization's accounting for
Par	न् ।।। Organizations Maintaining Coll	ections of Art, Historical Treasure swered 'Yes' to Form 990, Part IV,	s, or Other Similar Assets. line 8.
1 :	a If the organization elected, as permitted und art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its fin	held for public exhibition, education, or resear	s revenue statement and balance sheet works of th in furtherance of public service, provide, is
!	b If the organization elected, as permitted und historical treasures, or other similar assets held following amounts relating to these items:	ler SFAS 116 (ASC 958), to report in its refor public exhibition, education, or research in	venue statement and balance sheet works of art, furtherance of public service, provide the
	(i) Revenue included in Form 990, Part VIII	, line 1 .	► \$
	(ii) Assets included in Form 990, Part X		►\$
2	If the organization received or held works of art amounts required to be reported under SFA:	, historical treasures, or other similar assets fo S 116 (ASC 958) relating to these items:	r financial gain, provide the following
	a Revenue included in Form 990, Part VIII, lin	e 1 .	► \$
	b Assets included in Form 990, Part X	•	► \$

(i) unrelated organizations

(ii) related organizations

b If 'Yes' to 3a(II), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

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
1 a Land		15,000.		15,000.
b Buildings .		62,375.	45,493.	16,882.
c Leasehold improvements		329,512.	50,614.	278,898.
d Equipment		55,256.	54,984.	272.
e Other		8,940.	8,940.	0.
Total. Add lines 1a through 1e (Column (d)	must equal Form 990, Part X, c	olumn (B), line 10c)	•	311,052.

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Schedule **D** (Form 990) 2014

Part VII	Investments - Other Securities.		N/A	
	Complete if the organization answered			
	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of	-year market value
(1) Financi	al derivatives			
(2) Closely	-held equity interests .			
(3) Other				
(A)				
(A) (B)				
(C) (D)		<u></u>		
(D)				· · · · · · · · · · · · · · · · · · ·
(E)				
(F)				
(G)				
(H)				
<u>(l)</u>				
Total (Colum	nn (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII	Investments — Program Related.	Weet to Form 000	N/A	M Dort V line 12
	Complete if the organization answered (a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-	of year market value
	(a) Description of investment type	(b) Book value	(c) Wethod of Valuation Cost of end-	or-year market value
(1)				·· - ··-··
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	nn (b) must equal Form 990, Part X, column (B) line 13)		1 ,	
Part IX	Other Assets.	N/A		
FAILIA	Complete if the organization answered	'Yes' to Form 990	, Part IV, line 11d. See Form 99	00, Part X, line 15.
	(a) Des	scription		(b) Book value
(1)				
(2)				
(3)		·····		
(4)		 , 		
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Co	olumn (b) must equal Form 990, Part X, column (b	3), line 15)	•	
Part X	Other Liabilities.			
	Complete if the organization answered 'Yes' to Fo	orm 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	
	(a) Description of liability	(b) Book value		
	eral income taxes			-
(2)				
(3)				•
(4)				
(6)				
(7)				
(8)				, ·
(9)				_
(10)				
(11)				· .
Total. (Colu	mn (b) must equal Form 990, Part X, column (B) line 25)	>	1	
2. Liability i	or uncertain tax positions. In Part XIII, provide the text of the fo	ootnote to the organization's f	inancial statements that reports the organization's	liability for uncertain
tax positions	under FIN 48 (ASC 740). Check here if the text of the footnote	has been provided in Part XI	II	

Schedule D (Form 990) 2014 BRE	AUX BRIDG	E CRAWFISH	FESTIVAL

72-1248905

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Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Ret	turn N/A
. Complete if the organization answered 'Yes' to Form 990, Pa		tuiii: N/A
	iit iv, iiie iza.	
1 Total revenue, gains, and other support per audited financial statements	·	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		·
a Net unrealized gains (losses) on investments	2a	
b Donated services and use of facilities	2 b	-
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII)	2 d	, z
e Add lines 2a through 2d		2 e
3 Subtract line 2e from line 1	. [3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		:
a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a	
b Other (Describe in Part XIII)	4 b	
c Add lines 4a and 4b.		4 c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Part XII Reconciliation of Expenses per Audited Financial Statemen	its With Expenses per F	Return. N/A
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line 12a.	
Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2 a	}
b Prior year adjustments	2 b	i
c Other losses	2 c	
d Other (Describe in Part XIII)	2 d	
e Add lines 2a through 2d		2 e
3 Subtract line 2e from line 1	ļ	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ı	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	
b Other (Describe in Part XIII)	4 b	
c Add lines 4a and 4b	'	4 c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
Part XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

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Schedule **D** (Form 990) 2014

SCHEDULE.G (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.

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

lame (of the organization BREAUX BRIDGE	: CRAWFISH	FESTIV	VAL		1	Employer (dentifica		
	ASSOCIATION Fundraising Activities. Comp	lete if the orga	nization ar	newered 'V	(es' to Form 990, Part I		72-124890	5	
Par	Form 990-EZ filers are not re	quired to comp	lete this pa	art.	res 10 1 01111 990, Fait 1	IV, IIIIE I	7.		
1	Indicate whether the organization	raised funds thr	ough any	of the follo	owing activities Check	all that a	apply		
а	Mail solicitations			е	Solicitation of non-	governm	ent grants		
b	Internet and email solicitations	5		f	Solicitation of gove	rnment (grants		
c	Phone solicitations			g	Special fundraising	events			
d	In-person solicitations								
	Did the organization have a written o employees listed in Form 990, Par	t VII) or entity i	n connect	ion with pi	rofessional fundraising	services	7	Yes	XNo
	If 'Yes,' list the ten highest paid indiv compensated at least \$5,000 by the	ne organization	(fundraise	ers) pursua				be	
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did have custod of contri	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or re fundra	nount paid to etained by) iser listed in olumn (i)	(vi) Amount pa (or retained organization	by)
			Yes	No					
1									
2									
3									
4									
5									
6					<u> </u>				
7									
8									
9			<u> </u>						
			 					<u></u>	
10							_		
Tota	1		,	•					0.
3	List all states in which the organizati or licensing	on is registered	or licensed	to solicit o	ontributions or has been	notified i	t is exempt from	registration	
			-						
									-
				. _					

Schedule G (Form	n 990 or 990-EZ) 2014	BREAUX	BRIDGE	CRAWFISH	FESTIVAL

72-1248905

Page 2

Part II | Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (d) Total events (add column (a) (a) Event #1 (b) Event #2 (c) Other events NONE CRAWFISH FESTI through column (c)) (total number) REVENUE (event type) (event type) 1 Gross receipts 544,536 544,536. 2 Less: Contributions 3 Gross income (line 1 minus line 2) 544,536 544,536. 4 Cash prizes 5 Noncash prizes DIRECT Rent/facility costs 7 Food and beverages EXPERSES 8 Entertainment Other direct expenses 351,998 351,998. 10 Direct expense summary Add lines 4 through 9 in column (d) 351,998. 11 Net income summary Subtract line 10 from line 3, column (d) 192,538. Part 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 (a) Bingo (c) Other gaming (add column (a) through column (c)) REVENUE bingo/progressive bingo Gross revenue 2 Cash prizes EXPERSE DIRECT 3 Noncash prizes . 4 Rent/facility costs Other direct expenses Yes 衤 Yes Yes 6 Volunteer labor Νo No No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a is the organization licensed to conduct gaming activities in each of these states? b If 'No,' explain 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? No b If 'Yes,' explain

SCITE	Eddle G (FORTH 990 OF 990-LZ) 2014 BREAUX BRIDGE CRAWFISH FESTIVAL	12-124	0905	raye 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:	1 1		
	The organization's facility	13a		%
	a An outside facility.	13Ь		8
	Enter the name and address of the person who prepares the organization's gaming/special events books and record	s:	·	
	Name ►			
	Address •			-
Ė	a Does the organization have a contact with a third party from whom the organization receives gaming revenue of If 'Yes,' enter the amount of gaming revenue received by the organization \$ and of gaming revenue retained by the third party \$ \$ If 'Yes,' enter name and address of the third party.		Yes	No
	Name ►			
	Address •	-		
16	Gaming manager information			
	Name ►			-
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ļ	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year ► \$	n the		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, c and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information (see instructions).	olumns ny addi	(III) and (tional	(v),

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Schedule **G** (Form 990 or 990-EZ) 2014

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

2014

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization BREAUX BRIDGE CRAWFISH FESTIVAL

Employer identification number

72-1248905

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

EUGENE & PAULA FAUCHEAUX

MARRIED

MARK & ANGELIQUE BERNARD

MARRIED

GEORGE & TAMMY DOMINGUES

MARRIED

MARK & MICHELYN BERNARD

FATHER & DAUGHTER

JIMMY DURIO & GENEE HEBERT

MARRIED

MARK & BLAISE BERNARD

FATHER & SON

ANGELIQUE & BLAISE BERNARD

MOTHER & SON

BRANDON & LEAH DAVID

MARRIED

Employer identification number 72-1248905

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

MOTHER & DAUGHTER

CINDY & GERALD BOREL

MARRIED

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

ACTIVE MEMBERSHIP IN THIS CORPORATION SHALL BE OPEN TO ANY PERSON EIGHTEEN YEARS OR OLDER WHO IS IN SUPPORT OF THE OBJECTIVES OF THIS CORPORATION. ACTIVE MEMBERS SHALL PAY YEARLY DUES AND SHALL ENJOY ALL MEMBERSHIP PRIVILEGES.

FORM 990, PART VI. LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

THE ELECTED DIRECTORS SHALL BE ELECTED FROM THE GENERAL MEMBERSHIP. IN ORDER TO ELECT DIRECTORS, EACH MEMBER OF THE CORPORATION WHOSE DUES ARE PAID IN FULL FOR THE CURRENT FISCAL YEAR SHALL HAVE ONE VOTE AND A MAJORITY VOTE OF THE QUORUM AS ESTABLISHED BY THE BI-LAWS SHALL BE SUFFICIENT TO ELECT A DIRECTOR.

FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS

A MAJORITY OF THE DIRECTORS SHALL CONSTITUTE A QUORUM AND A QUORUM SHALL BE
NECESSARY TO CONSIDER ANY QUESTION THAT MAY COME BEFORE ANY MEETING OF THE
DIRECTORS. ONCE A QUORUM IS PRESENT, THE ASSEMBLED DIRECTORS MAY TRANSACT ANY
BUSINESS BY A MAJORITY VOTE OF THOSE DIRECTORS PRESENT.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FORM IS REVIEWED BY THE PRESIDENT AND/OR TREASURER PRIOR TO SUBMITTING.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE BI-LAWS AND THE FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.