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SCANNED APR 0 5 2017,

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2015

Open to Public ▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Inspection Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2015 calendar year, or tax year beginning April 1 2015, and ending 20 16 March 31 D Employer identification number C Name of organization The Shadow Barons Check if applicable Address change Doing business as 63-1227233 Number and street (or P.O box if mail is not delivered to street address) Boom/suite E Telephone number Name change Initial return P.O. Box 2770 251-450-4637 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated 181,730 G Gross receipts \$ Amended return Daphne, AL 36526 F Name and address of principal officer: Daniel T. Ford H(a) Is this a group return for subordinates? Tes Ves Vo Application pending 16559 County Road 3 Fairhope, AL 36532 H(b) Are all subordinates included? Tyes No √ 501(c) (7)
√ (insert no)
√ 4947(a)(1) or
√ 527 If "No," attach a list (see instructions) 501(c)(3) Tax-exempt status Website: ▶ www.theshadowbarons.com H(c) Group exemption number ▶ L Year of formation M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: The Shadow Barons is a Mardis Gras organization Activities & Governance that parades annually in Daphne, Alabama to celebrate Mardis Gras. A social ball is held following the parade for the organization' s members and their guests. Check this box ▶☐ 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) 11 Number of independent voting members of the governing body (Part VI, line 1b) 4 11 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 30 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . 9 Program service revenue (Part VIII, line 2g) 181,730 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 8c, 10g and 1 1e) 2017 11 Total revenue - add lines 8 through 11 (must equal Pan VIII, column (A), line 12) 12 182,982 181,730 Grants and similar amounts paid (Part IX, column (A), lines Benefits paid to or for members (Part IX, column (A), line (Part IX) 13 14 118,863 104,192 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) h Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 69,396 67,655 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 188.260 171,848 19 Revenue less expenses. Subtract line 18 from line 12 (5,278)9,882 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 532,919 515,734 21 Total liabilities (Part X, line 26) . 401,262 374,195 22 Net assets or fund balances. Subtract line 21 from line 20 131,657 141,539 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Date Treasurer Here lance Type or print name and title Date Print/Type preparer's name Preparer's signature Check I if self-employed Paid Preparer Firm's EIN ▶ Firm's name **Use Only** Phone no Firm's address. May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 11282Y

Form **990** (2015)

Form 99	 0 (2015) Page 2
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Celebrate the Mardis Gras season with a parade followed by a ball for members and their guests.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$57,238 including grants of \$) (Revenue \$)
74	Held a Mardis Gras ball in February 2016 for the organization's 250 members and their guests.
4b	(Code:) (Expenses \$ 26,781 including grants of \$) (Revenue \$)
	Held a Mardis Gras parade in Daphne, Alabama in February 2016 with the organization's members participating on horses and floats.
4c	(Code:) (Expenses \$ 17,555 including grants of \$) (Revenue \$)
	Held a "summer ball" in August 2015 for the organization's members and their guests
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 2,618 including grants of \$) (Revenue \$)

104,192

4e Total program service expenses ▶

Form 99	0 (2015)			Page 3							
Part I	V Checklist of Required Schedules										
			Yes	No							
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	١.									
•	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1							
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			V							
Ū	candidates for public office? If "Yes," complete Schedule C, Part I										
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		✓							
	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? If "Yes," complete Schedule C, Part III.	5		√							
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√							
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1							
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1							
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1							
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓							
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.										
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1								
b	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		/							
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓							
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		√							
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓							
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		√							
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓							
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓							
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓_							
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓_							
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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		✓							
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		✓							
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u>✓</u>							
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		<u> </u>							
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>·</u> ✓							
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u>√</u> .							

	00 (2015)	_		Page
Part	Checklist of Required Schedules (continued)			
20 a	Did the organization energies one or more bounital facilities? If "Vee " complete Cabadida II		Yes	No
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20a 20b		✓
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200	+-	+
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	<u> </u>	 	
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		/
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	 	1
25a	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	- "-	
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 "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1		<u> </u>
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		/
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
С	Schedule L, Part IV	28b	<u> </u>	✓_
C	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		7
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		✓
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		√
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		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	/	=

Part				
	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]		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	H	.	İ
	account)?	4a	. !	✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			İ
	(FBAR).			İ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	$\neg \neg$	1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	$\overline{}$	_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		$\neg \neg$	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	ļ	1
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).	 	\neg	-
a	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	\dashv	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	15		
-	required to file Form 8282?	7c		1
ď	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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-+	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	-+	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	 	\dashv	
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		\rightarrow	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	\dashv	
10	Section 501(c)(7) organizations. Enter:	1	\dashv	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b 0			
11	Section 501(c)(12) organizations. Enter:			İ
· ·	Gross income from members or shareholders		l	1
b	Gross income from other sources (Do not net amounts due or paid to other sources		ĺ	ĵ
_	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 12b	120	\rightarrow	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		İ	1
	Is the organization licensed to issue qualified health plans in more than one state?	13a	-+	
а	- · · · · · · · · · · · · · · · · · · ·	isa	-	 -
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which	1	l	
_	of the transfer of the transfe			
			İ	-
C 140		44-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u>.</u>		. 🗸
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 11			
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?]		
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		/
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5_		✓
6	Did the organization have members or stockholders?	6	<u> </u>	
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	✓	
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	✓	ļ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	لـــــا
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	0.5	_	
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	<u> </u>
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✓
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		√
14	Did the organization have a written document retention and destruction policy?	14		√
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,		
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			$\overline{}$
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		ł	
	organization's exempt status with respect to such arrangements?	16b		
Section	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
	☐ 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 interinancial statements available to the public during the tax year.	erest p	oolicy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and reconstruction.	cords:	>	
	Daniel T. Ford 16559 County Rd 3 Fairhope, AL 36532 251-463-8775			

	(2015)	

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			3
Part VII	Compensation of Officers, Directors, To	rustees, Key Employees, Highest Compensated Employees, a	ind
	Independent Contractors		

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

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

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

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

Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per	box,	Position (do not check more than obox, unless person is both officer and a director/trus					(D) Reportable compensation from	(E) Reportable compensation from	
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Damon Henderson	6									
President		✓		✓			_			
(2) Jeff Walding	2									
Board Chairman		✓		✓						
(3) Daniel Ford	2	_								
Treasurer		✓		✓			_			
(4) Winn Barnette		1								
(5) Steve Barker		√								
(6) James Hamrick		1								
(7) Paul Strickland		√								
(8) Tony Brunson		1								
(9) Tim Crabtree		<								
(10) Frank Griffeth		<								
(11) Kevin Haynes		1								
(12)										
(13)			-	-			_			
(14)										

Part	VII Section A. Officers, Directors, Trust	ees, key E	mpio	/ees		<u>1a r</u> C)	iigne	St C	ompensated E	:mpioyees (d	ontint	uea)	
	(A)	(B)	l			ition			(D)	(E)	ĺ	(F)	
	Name and title	Average					than o		Reportable	Reportable	,	Estimated	
		hours per week (list any					or/trus		compensation	compensation related	from	amount of	
		hours for	유표	ins	Officer	<u>\$</u>	₽₩	ξī	from the	organization	าร	other compensatio	n
		related	<u>क</u> <u>क</u>	tit	ᇛ	en	ploy	Former	organization	(W-2/1099-M	SC)	from the	
		organizations below dotted	호텔	ona		Key employee	8 8	`	(W-2/1099-MISC)			organization and related	
		line)	Individual trustee or director	Institutional trustee		8	nper					organization	
		\	l iš	stee			Highest compensated employee	1	1		1		
(4.5)				_	ļ		<u> </u>	-				<u> </u>	
(15)			}						ŀ				
(16)		<u> </u>	ļ		-	_		├—			-+		
119/							ļ	ļ	ļ	ļ			
(17)					├─	-		 					
Y::22											ĺ		
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(23)													
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(24)			·		· '					Ì	- 1		
(25)													
	Cub total					L .		Ļ					
1b c	Sub-total		 n A	٠	•	• •	•		0		- 0 -		
d	Total (add lines 1b and 1c)			•	•		•		0		0	<u> </u>	0
<u></u>	Total number of individuals (including but							V	<u>_</u>	ore then \$10		of	
-	reportable compensation from the organi		1 10 111	ose	ıısı	eu a	above	e) W	no received mi	ore man \$10	J,UUU	Of	
	reportable compensation were the organi					-		-				Yes	No.
3	Did the organization list any former of	ficer, direc	tor, o	r tr	uste	e.	kev e	emp	lovee, or high	est compen	sated		
	employee on line 1a? If "Yes," complete S											3	1
4	For any individual listed on line 1a, is the	sum of rep	oortal	ole d	com	per	nsatio	n a	nd other comp	ensation fro	m the		 -
	organization and related organizations												
	individual			•								4	1
5	Did any person listed on line 1a receive of									ation or indi	vidual		
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	edu	ıle J f	or s	uch person	· · · ·		5	1
<u>Section</u>	on B. Independent Contractors												
1	Complete this table for your five highest of												
	compensation from the organization. Rep	ort compe	nsatic	n fo	or th	e c	alend	ar y	ear ending wit	h or within th	e org	janization's ta	X
	year.												
	(A) Name and business add	race						ļ	(B)	on uses		(C)	
	Name and pusifiess add								Description of se	EI AICE2	`	Compensation	
								 					
								-				 -	
		-	_					ļ					
	Total number of independent contractor	rs (includir	na hu	t n	t to	ımıtı	ed to	th	ose listed sho	ve) who	- 77 .	,	 ,
-	received more than \$100,000 of compens								0	,	1		

Part	VIII	Check if Schedule O co	u c ontaine a	rasno	onse or note to	any line in this	Part VIII		<u>.</u> . 🗀
	_	Check ii Schedule O C	Ontains a	respi	Silve of Hote to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>0</u> 0	1a	Federated campaigns .		1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		1b					
ᅙᇀ		Fundraising events		1c			1		
₽¥	d	Related organizations		1d			ļ		
ວ,≝	e	Government grants (contri		1e			1		
<u> </u>	f	All other contributions, gifts	, grants,						
量量		and similar amounts not include	ded above	1f		1			
필	g	Noncash contributions included							
a S	ĥ	Total. Add lines 1a-1f	<u> </u>	<u>.</u>	<u> </u>				
e					Business Code				
Program Service Revenue	2a	Membership dues		}	813410	181,730	181,730		
æ	b								
<u>ş</u>	С			}					+
Ser	d								
Ë	е								
go	f	All other program service				181,730			
<u>~</u>	g	Total. Add lines 2a-2f		duude		181,730			<u> </u>
	3	Investment income (in and other similar amou	nciuairig ints)	aiviue	>				
	١.	Income from investment	of tay_aver	nntho	nd proceeds.▶				
	4	Income from investment	UI LAX-EXCI	npt bo	•				
	5	Royalties	(i) Real	<u>.</u> –	(II) Personal				
	60	Gross rents		-					
	6a b	Less: rental expenses							
	C	Rental income or (loss)							
	d	Net rental income or (kg	oss) .						
	7a	Gross amount from sales of	(ı) Secunt		(II) Other				
		assets other than inventory							
	Ь	Less: cost or other basis							
		and sales expenses .							
	С	Gain or (loss)			L				
	d	Net gain or (loss) .			<u> </u>				
•									
nue	8a		ndraising						
		events (not including \$		-22					1
Other Reve	1	of contributions reporte	a on line i	C).	1		1		
ě		See Part IV, line 18 .				1		:	
5	þ		 .am fundr	. D			-		
	C	Net income or (loss) fr Gross income from ga	mina activ	ities.	events . P				
	ya	See Part IV, line 19	ining don't	. a	1	}		1	
						1			
	b	11-1	rom gamir	ng act					
		Gross sales of in	ventory,	less					
		returns and allowance	es	. а			1	1	
	b	Less: cost of goods s	old	. t]	<u> </u>	- 	
	C	Net income or (loss) fi	rom sales	of inv	entory >			<u> </u>	
		Miscellaneous R			Business Code		_	ļ	
	11a	1				 		 	
	b				<u></u>	 		_	
	- c)				-		 	-
	c	All other revenue .				 	 	 	
	•	Total. Add lines 11a-	11d		🟲		104 -00	, 	-
	12	Total revenue. See in	nstruction	<u>s</u>	<u> P</u>	181.73	0 181,730	<u></u>	Form 990 (2015

Form 99	0 (2015)				Page 10
Part	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons	se or note to any lin	e in this Part IX	<u>.</u>	<u> </u>
	t include amounts reported on lines 6b, 7b, , 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 domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	104,192	104,192		
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 8	Other salaries and wages				
9 10	Other employee benefits				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
đ	Lobbying				
e 4	Professional fundraising services. See Part IV, line 17 Investment management fees				
f 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				
13	Office expenses	4,406	4,406		
14	Information technology				
15	Royalties				
16	Occupancy	25,758	25,758		
17 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 .	27,511	27,510		
23	Insurance	9,981	9,981		
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.)				
a					
b					
9					
d e	All other expenses	_ _			
25	Total functional expenses. Add lines 1 through 24e	171,848	171,848		
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)	171,040	171,040	-	

Р	art X	Balance Sheet							
		Check if Schedule O contains a response or	note to	any line in this Pa	rt X				
					(A) Beginning of year		(B) End of year		
	1	Cash-non-interest-bearing			4,915	1	15,240		
	2	Savings and temporary cash investments		[2			
	3	Pledges and grants receivable, net		[3			
	4	Accounts receivable, net		T I	2,716	4	2,710		
	5	Loans and other receivables from current and f							
		trustees, key employees, and highest co	•						
		Complete Part II of Schedule L				5			
	6	Loans and other receivables from other disqualified person 4958(f)(1)), persons described in section 4958(c)(3)(B), an sponsoring organizations of section 501(c)(9) volunt							
ম		organizations (see instructions). Complete Part II of Scher	dule L .			6	······································		
Assets	7	Notes and loans receivable, net				7			
As	8	Inventories for sale or use			5,839	8	5,839		
	9	Prepaid expenses and deferred charges		[4,953	9	4,953		
	10a	Land, buildings, and equipment: cost or	1						
		other basis. Complete Part VI of Schedule D	10a	664,370					
	b	Less: accumulated depreciation	10b	177,384	514,496	10c	486,986		
	11	Investments—publicly traded securities				11			
	12	Investments—other securities. See Part IV, line 1	11			12			
	13	Investments-program-related. See Part IV, line				13			
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11				15			
	16	Total assets. Add lines 1 through 15 (must equa			532,919	16	515,734		
	17	Accounts payable and accrued expenses			2,292	17	0		
	18	Grants payable		18					
	19	Deferred revenue			20,630	19	15,733		
	20	Tax-exempt bond liabilities		20					
	21	Escrow or custodial account liability. Complete F		21					
ies	22	Loans and other payables to current and fo)					
Ħ		trustees, key employees, highest compens		_					
Liabilities		disqualified persons. Complete Part II of Schedu		22					
	23	Secured mortgages and notes payable to unrelate	378,340		358,462				
	24	Unsecured notes and loans payable to unrelated	_ -	24					
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D	17-24)	. Complete Part X		25			
	26	Total liabilities. Add lines 17 through 25		L	404 000	25 26			
_	20	Organizations that follow SFAS 117 (ASC 958)			401,262	20	374,195		
ces		complete lines 27 through 29, and lines 33 and	d 34.						
lan	27	Unrestricted net assets			131,657	27	141,539		
Ba	28	Temporarily restricted net assets				28			
pu	29	Permanently restricted net assets				29			
Net Assets or Fund Balances	1	Organizations that do not follow SFAS 117 (ASC 95 complete lines 30 through 34.	58), chec	k here ► ∐ and					
ţ	30	Capital stock or trust principal, or current funds				30			
SSe	31	Paid-in or capital surplus, or land, building, or eq	_		31				
ţ.	32	Retained earnings, endowment, accumulated inc			32				
Ne Ne	33								
	34_	Total liabilities and net assets/fund balances	<u></u>	<u> </u>	532,919	34	515,734		
							Form 990 (20		

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

За

Form 990 (2015)

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No 1545-0047

2015 Open to Public

Internal Revenue Service Inspection Name of the organization Employer identification number The Shadow Barons Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements . . . 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

_	III Organizations Maintaining									
3	Using the organization's acquisition, collection items (check all that apply):		sion, and of			·		_	significa	ant use of its
а	☐ Public exhibition					or exchang				
b	Scholarly research			е	Other	r				
C	C ☐ Preservation for future generations									
4	Provide a description of the organiza XIII.	tion's	collections	and expl	ain how t	hey further	the or	ganızation's ex	empt pui	rpose in Part
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's collection?									
Part	Part IV Escrow and Custodial Arrangements.									
_	Complete if the organization .990, Part X, line 21.	n ansv	vered "Yes	on For	m 990, f	Part IV, lin	e 9, or	reported an a	amount	on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?								_	Yes 🗌 No
b	If "Yes," explain the arrangement in P	art XII	l and compl	ete the fo	llowing to	able:	Г	T	Amount	
С	Beginning balance						10	:		
d	Additions during the year						10			
e	Distributions during the year						16	,		
f	Ending balance						11			
2a	Did the organization include an amou	nt on I	Form 990, P	art X, line	21, for e	scrow or c	ustodia	l account liabil	ity? 🔲	Yes 🗌 No
b	If "Yes," explain the arrangement in P	art XII	I. Check her	e if the e	xplanatio	n has been	provid	ed on Part XIII	<u> </u>	. 🗆
Par	t V Endowment Funds.									
	Complete if the organization							···		
		(a)	Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ack (e) Fo	our years back
1a	Beginning of year balance	ļ								
b	Contributions							<u> </u>		
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance	L		<u> </u>						
2	Provide the estimated percentage of t				e (line 1g	, column (a	a)) held	as:		
а	Board designated or quasi-endowme			%						
b	Permanent endowment ▶	. %	0.4							
С	Temporarily restricted endowment ▶		<u></u> %	000/						
20	The percentages on lines 2a, 2b, and Are there endowment funds not in the				zation the	at are held	and ad	ministered for	tho	
3a	organization by:	e pos	56551011 01 11	ie organi	zanon m	at are rielu	and ad	iriii iistered ioi	uie	Yes No
	(i) unrelated organizations								. 3a(i	
	(ii) related organizations						• •		. 3a(i	
b	If "Yes" on line 3a(ıı), are the related of			 I as requi	 red on So	 chedule R?			. 3b	
4	Describe in Part XIII the intended uses									
Par										
	Complete if the organization			on For	m 990, F	Part IV, line	e 11a.	See Form 990), Part X	, line 10.
	Description of property		(a) Cost or of (investment)			or other basis ther)		Accumulated epreciation	(d) B	ook value
1a	Land	.		50,844						50,844
b	Buildings	.		515,505				98,054		417,451
С	Leasehold improvements	. [
d	Equipment	. [2,888				2,090		798
е	Other	[95,133				77,241		17,892
Total.	Add lines 1a through 1e. (Column (d) r	nust e	qual Form 9	90, Part 2	K, column	(B), line 10)c.) _	▶		486,985

Part VII	Investments—Other Securities.	vered "Vec"	on Form 0	IOO Bart IV II	na 11h	Soo Form	2000 Bort V line 10
	Complete if the organization answ (a) Description of security or category	vereu res	on Form 9	(b) Book value	ne i ib.		thod of valuation
	(including name of security)			(D) BOOK Value			i-of-year market value
(1) Financial	derivatives						
(2) Closely-h	eld equity interests						
(3) Other							
(A)							
(B)							
(C)							
(D)							
(E)							
(F)							
(G)							
(H)							
Total. (Column (t	n) must equal Form 990, Part X, col (B) line 12.) ▶						
Part VIII	Investments - Program Related						
	Complete if the organization answ	vered "Yes"	on Form 9	90, Part IV, li	ne 11c.	See Form	990, Part X, line 13.
_	(a) Description of investment			(b) Book value	T		thod of valuation -of-year market value
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
_(7)							
(8)							
(9)							
	n) must equal Form 990, Part X, col. (B) line 13.) ▶						
Part IX	Other Assets.						
	Complete if the organization answ		on Form 9	90, Part IV, li	<u>ne 11d.</u>	See Form	
	(a)	Description					(b) Book value
_(1)							
(2)							
(3)							<u> </u>
(4)							
_(5)							<u> </u>
(6)							
<u>(7)</u>							
(8)							
(9)	nn (b) must equal Form 990, Part X, co	1 (R) line 15)					
Part X	Other Liabilities.	1. (B) III e 13.)	· · · ·			· · ·	
PartA	Complete if the organization answ	vered "Yes" (on Form 9	90, Part IV, li	ne 11e c	or 11f. See	e Form 990, Part X,
1.	line 25. (a) Description of liability	(b) Book	cvalue	1			
(1) Federal in		(0, 200)		-{			
(2)				┥			
(3)				-{			
(4)				-			
(5)				-{			
(6)				-			
(7)				-{			
(8)			··········	7			
(9)				1			}
	must equal Form 990, Part X, col. (B) line 25.)			1			
	uncertain tax positions. In Part XIII, provid	le the text of th	e footnote to	o the organization	n's financ	cial stateme	nts that reports the
	liability for uncertain tax positions under l						

Part		Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains (losses) on investments	<u>.</u> 1
b	Donated services and use of facilities	<u> </u>
С	Recoveries of prior year grants]
d	Other (Describe in Part XIII.)]
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	<u> </u>
b	Other (Describe in Part XIII.)	<u>]</u>
С	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part		er Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	IV.
b	Prior year adjustments	
C	Other losses] , [
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	`_
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
С	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part	XIII Supplemental Information.	
Provic	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b	p; Part V, line 4; Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in	formation.

Schedule D (For	m 990) 2015		Page 5
Part XIII	Supplementa	I Information (continued)	
	_		
	·		
			······
	· 		
			•••••••••••••••••••••••••••••••••••••••
			······································
			······································

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.

OMB No 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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 **Employer identification number**

The Shadow Barons 63-1227233 Part III, line 4d: Expenses totaling \$2,618 were incurred for the provision of food and beverages at general membership meetings held during the year. Part VI, line 6: The Shadow Barons is a Mardis Gras organization with approximately 250 members whose dues fund annually a Mardis Gras parade and ball (party), summer ball, general meetings, administrative costs, mortgage and occupancy costs. Members elect the governing body and vote on any proposed changes to the organization by-laws at a designated annual meeting. Part VI, line 7a and 7b: All members in good financial standing with the organization have the right to vote on nominations to serve on the organization's board of directors and any proposed by-law changes. The board of directors is voted on annually by the members during a meeting held in March. Part VI, line 11b: Form 990 for the organization is reviewed with the board of directors at the board's next regularly scheduled meeting after its filing. Part VI, line 19: The organization's governing documents and financial statements are available in hard copy to the public upon receipt of written request.