Form **990** 

**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

▶ Do not enter social security numbers on this form as it may be made public

Open to Public

Inter	artment of th nal Revenue	ne Treasury 6 Service	► Go to www.ii	s.gov/Form990 for instr	uctions and th	ne latest info	rmation.	ひなつ	Inspect	ion			
Ā	For the 2	2017 caler	ndar year, or tax year beginn	ing April 1	, 2017, a	nd ending	Mare	ch 31	, 20 <sub>18</sub>				
B	Check if a		C Name of organization The Sha			<u>_</u>			er identification n	umber			
_	Address cl		Doing business as	gow barons					63-1227233				
_	Name cha	Ť	Number and street (or P O box	If mail is not delivered to stre	et address)	Room/suite	_	E Telepho	ne number				
_	Initial retur	•	P O. Box 2770		,								
H			City or town, state or province, or	country, and ZIP or foreign no	setal code	L		· · · · · ·	<u>251-450-4637</u>				
H	Final return	•		outing, and an or toroign po	,5ta, 0000			C Cross re	naunta f	404 750			
_	Amended		Daphne, AL 36526  F Name and address of principal of	fficer Devial T Cool			11/-> 1 - 1/	G Gross re	subordinates? Yes	194,758			
	Application								_	_			
-	T		16559 County Road 3 Fairh		14047(2)(4)				s included? L. Yes a list (see instructio				
<u> </u>	Tax-exemp			(c) ( 7 ) ◀ (insert no )	4947(a)(1) or	□ 52 <b>0 1</b>				113)			
<u></u>	Website:		V.theshadowbarons.com  V. Corporation Trust Asse	ociation ☐ Other ▶	1 II Van	r of formation	H(c) Group						
_	art I	Summa	<del></del>	ociation Other >	Litea	roriormation	1999	IN State	of legal domicile	AL			
H.C			<del></del>	incian or most cisculiar	nt cotuations	The Chade	- Baran	Mar	dia Cras argani				
a)		-	scribe the organization's m	<del>-</del>									
Governance		that parades annually in Daphne, Alabama to celebrate Mardis Gras. A social ball is held following the parade for the organization											
Ē		members and their quests  Check this box ▶□ if the organization discontinued its operations or disposed of more than 25% of its net assets.											
Š			_	·		sposed of fi	iore man	1 1	its net assets.				
Ğ			of voting members of the go	- • •			• • • •	3		11			
Se			of independent voting mem				•	5		11			
ξ	ı		ber of individuals employe		r (Fart V, III le	Zd		6					
Activities &	1		ber of volunteers (estimate	• •			•	<del></del>		30			
•	I		elated business revenue fro			•	•	7a 7b					
	b V	vet urireia	ated business taxable incor	ile Irom Form 990-1, II	ne 34	<del>·                                      </del>	Prior Ye		Current Ye				
Revenue		`ontributi	one and grante (Part VIII III	no 1h)		-		<del>"</del>	- Carront 10				
		Contributions and grants (Part VIII, line 1h)											
		_	nt income (Part VIII, column (A), lines 3, 4, and 7d)						<del>-</del>	194,758			
Re						· · —	<del></del>						
			enue (Part VIII, column (A),					470 704	<del></del>				
			nue—add lines 8 through 11					173,724		<u>194,758</u>			
			d similar amounts paid (Pa paid to or for members (Par			· ·		422.047		407.474			
			ther compensation, employe			:-10)		122,817		107,471			
ses			nal fundraising fees (Part IX			) <sup>-</sup> ''')			<del></del>				
Expenses			raising expenses (Part IX, o			·	-			<del>-</del> 7			
Ex			enses (PartiX, column (A)			···	<del></del>	68,711	<del></del>	61.051			
			enses. Add lines 13-17-(me			· ·		191,528		61,951			
			ess expensesSubtraction	701	iii (A), iiiic 20)	' · <del> </del>		(17,804)		169,422 25,336			
se	10 11	CVCIIGO I	6 FEB 4 4 20		<u> </u>	Begin	nning of Cu		End of Yea				
ance	20 T	ntal asse	ets (PartiX, line 16)	88				485,714		470,381			
Asse			ities (Part X) line 26) M			. ⊢		361,979		321,310			
Net Assets of Fund Balance			s or fund balances. Subtrac	t line 21 from line 20		· ·		123,735		149,071			
			re Block	T IIIIC-247 ITOTT IIIIC 20	· · · ·	<u> </u>		123,733		143,071			
_			, I declare that I have examined th	us return uncluding accompa	nvina schedules	and statement	's and to th	e hest of m	v knowledge and	helief it is			
			te Declaration of preparer (other the						,,e	20			
	<u> </u>		2417	<del></del>	<del></del>			2-12	-19				
Sig	n   i	Signat	ture of officer				Dat			<del></del>			
Her	1 '		Daniel T. For	ed Tre	asures								
	[]	Type o	or print name and title										
D			e preparer's name	Preparer's signature		Date		Chast F	PTIN				
Pai		1						Check L self-emp	if				
	parer	Firm's nar	me ►				Firm	s EIN ▶					
US	e Only	Firm's add					Phor						
Mav	the IRS		this return with the prepare	er shown above? (see i	nstructions)	<del></del>			. Tes	No			
			tion Act Notice see the sens			Cat No. 11	2027	-		90 (2017)			



Part	Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		/
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<b>/</b>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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		1
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		1
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		<b>✓</b>
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	<b>✓</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	•	<b>✓</b>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<b>/</b>
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		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<b>✓</b>
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		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		<b>✓</b>
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		_ <u></u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
	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		✓
	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		<b>√</b>
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		· •
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		· · ·
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>
			agn	(0047)

Part	Checklist of Required Schedules (continued)			
	•		Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			,
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>/</b>
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		<b>V</b>
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	١		,
_	through 24d and complete Schedule K. If "No," go to line 25a	24a		<b>✓</b>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>√</b>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١		,
	to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
<b>4</b> 58	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	05-		
L	• • • • • • • • • • • • • • • • • • • •	25a		
D	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	230	_	
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		/
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			⊢ <del>`</del> −
-•	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):	İ		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	_	<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		<b>✓</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			_
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>✓</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>✓</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			,
24	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	ا مر ا		,
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		<b>✓</b>
52	complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u> </u>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u></u>
	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>
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	<b>√</b>	

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Order in correction of contains a response of note to any line in this fact v	Ť	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a	$\Box$		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	]]		
	reportable gaming (gambling) winnings to prize winners?	1c		
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			ļ
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		<b>✓</b>
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		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			<b>✓</b>
<b>b</b>	•	4a		<del>                                     </del>
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		· •
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	l.		
_	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>,</b>		
	If "Yes," indicate the number of Forms 8282 filed during the year	7c		
d 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 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	$\neg \dagger$		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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		
10	Section 501(c)(7) organizations. Enter:		ŀ	
а	Initiation fees and capital contributions included on Part VIII, line 12	ĺ		-
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] 0			
l1 -	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a b	Gross income from members or shareholders	1	}	
-	against amounts due or received from them.)		ł	
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<del></del>	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	$\neg \uparrow$		
b	Enter the amount of reserves the organization is required to maintain by the states in which	- 1	ľ	
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	$\rightarrow$		لــِــا
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓_
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	- 1	

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.				
	Check if Schedule O contains a response or note to any line in this Part VI				
Sect	ion A. Governing Body and Management				
	The state of the s		Yes	No	
па		1			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar	ł	1	l	
	committee, explain in Schedule O.				
b					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1	1	ł	
-	any other officer, director, trustee, or key employee?	2		1	
3	Did the organization delegate control over management duties customarily performed by or under the direct	<b>-</b>	├-	<del>  •</del>	
	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		1	
5					
6					
7a	•				
	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	✓_		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
	the year by the following:		Í		
а	The governing body?	8a	<b>✓</b>	<u> </u>	
b	Each committee with authority to act on behalf of the governing body?	8b_	✓	<u> </u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		ĺ	١.	
<del></del>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	<b>✓</b>	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	iue C	oae.,	No	
10a	Did the expensive have level chapters, branches, or affiliates?	10a	163	<b>√</b>	
b	Did the organization have local chapters, branches, or affiliates?	IUa		<b></b>	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	ļ		
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> </b> -	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1.10		<u> </u>	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Ť-	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				
	describe in Schedule O how this was done	12c	ļ	ļ	
13	Did the organization have a written whistleblower policy?	13		1	
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?			ļ	
а	The organization's CEO, Executive Director, or top management official	15a			
b	Other officers or key employees of the organization	15b	<u> </u>	<u> </u>	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				
	with a taxable entity during the year?	16a		✓_	
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?	16b			
Secti	on C. Disclosure	1 100	L		
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	n 5016	c)(3)s	only	
	available for public inspection. Indicate how you made these available. Check all that apply.	(	,,,,,,		
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	erest i	policy	, and	
	financial statements available to the public during the tax year.		,		
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords:	<b>•</b>		
	Daniel T. Ford. 16559 County Road 3. Fairhone Al. 36532. 251.463.8775				

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 nor any related organization compensated any current officer, director, or trustee. Position (A) (B) (D) (E) (do not check more than one Name and Title Average Reportable Reportable Estimated box, unless person is both an hours per compensation compensation from amount of officer and a director/trustee) from related eek (list an other Officer Individual trustee Institutional trustee Highest compensated employee Key employee compensation hours for organizations director organization (W-2/1099-MISC) related from the organizations (W-2/1099-MISC) organization below dotted and related organizations line) (1) Damon Henderson 6 President (2) Jeff Walding 3 **Board Chairman** (3) Daniel Ford 3 Treasurer (4) Winn Barnette (5) Steve Barker (6) Paul Strickland (7) James Hamrick (8) Tony Brunson (9) Jay Parke (10) Frank Griffeth (11) Kevin Haynes (12)

	(A) Name and title	(B) Average hours per week (list any	box, office	unles er and	Pos eck s pe d a d	rson irect	than on the than of the the than of the the the than of the the than of the	n an tee)	(D) Reportable compensation from	(E) Reportabl compensation related	from	am	(F) timated ount of other	f
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		fro orga and	pensation the anization trelated in the anization in the	on d
(15)														
(16)														
(17)												<del></del>		
(18)														
(19)														
(20)														
(21)									<u>,                                      </u>					
(22)											1	_		
(23)														
(24)													<del></del> -, ·	-
(25)								-						
c	Sub-total	VII, Section	n A				· ·	<b>A A</b>	0		0			0
2	Total number of individuals (including but reportable compensation from the organic	not limited					above	e) wi		ore than \$10	00,00	0 of		
3	Did the organization list any former off employee on line 1a? If "Yes," complete S							mp	loyee, or high	est comper	sate	d	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual													<b>✓</b>
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indi		_		<b>V</b>
	n B. Independent Contractors										040			
1	Complete this table for your five highest of compensation from the organization. Rep year.													ax
	(A) Name and business addr	ess							(B) Description of se	rvices		(C) Compens	ation	
		<del>-</del>		_										
2	Total number of independent contractor	re (meludin	a but	h no	ı <del>t</del> lı	mite	d to	the	asa liatad aba	ve) who				

Form **990** (2017)

Par	t VIII	Statement of Revenue					_
		Check if Schedule O contains a res	ponse or note to				
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1a	Federated campaigns 1a					
ar our	b	Membership dues 1b					
s, C Am	С	Fundraising events 1c					
ia i	d	Related organizations 1d					
LS,	е	Government grants (contributions) 1e		. ,			
atto er S	f	All other contributions, gifts, grants,					
를 돌		and similar amounts not included above 1f			, ,	•	
Contributions, Gifts, Grants and Other Similar Amounts	g h	Noncash contributions included in lines 1a-1f. \$ <b>Total.</b> Add lines 1a-1f				Total Comment	'
		Total. Add lifles Ta-11	Business Code				
enn	2a	Membership dues	813410	194,758	194,758	· · · · · · · · · · · · · · · · · · ·	<u>-</u> -
Re	ь		073410	_134,730	134,730		
<u>i</u> ce	С		<del></del>				
Šez	d						
Ē	е						
Program Service Revenue	f	All other program service revenue.					
<u> </u>	g	Total. Add lines 2a-2f		194,758			
	3	Investment income (including divid					
	.	and other similar amounts)		-			
	4	Income from investment of tax-exempt be					<u> </u>
	5	Royalties	(II) Personal	,			
	6a	Gross rents	, (ii) i diddiidi	te .		14 4 4	
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)	▶			<del></del>	· <del></del>
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses .					
	С	Gain or (loss)				<del></del>	<u> </u>
	d	Net gain or (loss)	<u> </u>				
re	0.0	Gross income from fundraising					
	8a	events (not including \$					
Other Reve		of contributions reported on line 1c).					
Ϋ́		See Part IV, line 18 a		1			
Ť	b	Less, direct expenses . b					
0		Net income or (loss) from fundraising	events . >		ľ		
		Gross income from gaming activities.		-			
		See Part IV, line 19 a			. 1		
		Loss direct expenses . b		<u> </u>			
		Net income or (loss) from gaming acti	vities ▶				
	10a	Gross sales of inventory, less returns and allowances			İ		
		· · · · · · · · · · · · · · · · · · ·		]	'	'	
		Less cost of goods sold b Net income or (loss) from sales of inve	entory ►				
- }	_с	Miscellaneous Revenue	Business Code		<del></del>		
ł	11a		200111005 0000				
	b						
	c						
[	d	All other revenue					
	е	Total. Add lines 11a-11d	▶				
	12	Total revenue. See instructions	<u></u> . ▶	194,758	194,758		

Form 9	90 (2017)				Page 10
	t IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons	se or note to any lin		<u> </u>	
	ot include amounts reported on lines 6b, 7b, b, 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	107,471	107,471		
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 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):				
а	Management				
b	Legal				<del></del>
d	Accounting	<del></del>			
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				<del></del>
13	Office expenses	5,885	5,885	<del></del>	<del></del>
14 15	Information technology				<del></del>
16	Occupancy	24,287	24,287		
17	Travel	24,207	24,201		<del></del>
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	17,503	17,503		
23	Insurance	14,276	14,276		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24c. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а					
b					
C C					
d e	All other expenses				<del></del>
25	All other expenses  Total functional expenses. Add lines 1 through 24e	169,422	169,422	<del></del>	
<u>25</u> 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)	109,422	109,422		

33

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 8.726 1 13,868 2 2 Savings and temporary cash investments . . . . 3 3 4 4 2,716 2,556 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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 7 8 8 Inventories for sale or use . . . . . . 6,930 5,839 1,050 Prepaid expenses and deferred charges 4,953 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation . . . . 463,480 10c <u>445,</u>977 218,393 11 Investments—publicly traded securities . . . . 11 12 12 Investments-other securities. See Part IV, line 11 . 13 Investments-program-related. See Part IV, line 11. 13 Intangible assets . . . . . . . . . . . . . . . . 14 14 15 Other assets. See Part IV, line 11 . . . . . . 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 485,714 470,381 17 Accounts payable and accrued expenses . . . . . . . . . 17 1,985 Grants payable . . . . . . . . . . . . . . . . . . 18 18 Deferred revenue . . . . . . . . . . . . 19 19 17,783 Tax-exempt bond liabilities . . . . . 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors. 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . 22 Secured mortgages and notes payable to unrelated third parties . . . 23 338,074 23 319,128 Unsecured notes and loans payable to unrelated third parties . . . 24 24 6,122 <u> 19</u>7 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 . . . . 26 361.979 26 321.310 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 123.735 149,071 Temporarily restricted net assets . . . . . . . . 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Net Assets 30 Capital stock or trust principal, or current funds . . . . . . . . . 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds.

Total liabilities and net assets/fund balances . .

149,071

470,381

33

123,735

<u>485,714</u>

Page	1	2

Form 9	90 (2017)			Pa	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			94,758
2	Total expenses (must equal Part IX, column (A), line 25)	2		10	69,422
3	Revenue less expenses. Subtract line 2 from line 1	3		;	25,336
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1/	23,735
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		14	49,071
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>	<u></u>	
				Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other		_	'	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	n		
	Schedule O.			-	لبدا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			<b>├</b> ─	✓_,
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled c	ir		1
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			·	اــــا
b	Were the organization's financial statements audited by an independent accountant?		. 2b	ļ	<b>✓</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ea on	a		1
	•				
_	Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	.cro.ab		·	
С	of the audit, review, or compilation of its financial statements and selection of an independent account				
	If the organization changed either its oversight process or selection process during the tax year, ex		<u> </u>	+-+	<del>                                     </del>
	Schedule O.	piaiii ii	.'		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth "	,	-	
Jd	the Single Audit Act and OMB Circular A-133?		''   3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	ran th		+	_
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		ິ   <sub>3b</sub>		
				m 990	(2017)
			, 01	555	(-0.7)

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

The Sh	adow Barons		63-1227233
Par			
	Complete if the organization answered		
		(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		<u></u>
5	Did the organization inform all donors and dono	<del>-</del>	
	funds are the organization's property, subject to the		<b>—</b> ••• <b>—</b> •••
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the bene		
		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Pari			
	Complete if the organization answered		· · · · · · · · · · · · · · · · · · ·
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recrea		• •
	Protection of natural habitat	☐ Preservation o	f a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	ield a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easemen		
C	Number of conservation easements on a certified		
d	Number of conservation easements included in historic structure listed in the National Register	(c) acquired after 7/25/06, and not	I
3	Number of conservation easements modified, tran		
3	tax year ►	isierreu, reieaseu, extinguisireu, or terr	minated by the organization during the
4	Number of states where property subject to conse	envation easement is located	
5	Does the organization have a written policy re		pection handling of
•	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec		
•		yanig, nandanig or violationo, and otheroning	ooneer taken easements caring the year
7	Amount of expenses incurred in monitoring, inspecti	ng, handling of violations, and enforcing	conservation easements during the year
	►\$	g,g or recurrency and emercing	
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
			· · · · · · · · · · · · · · · · · · ·
9	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		
	organization's accounting for conservation easem		
Part	II Organizations Maintaining Collection	is of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8.	
	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the	footnote to its financial statements tha	t describes these items.
	If the organization elected, as permitted under S		
	works of art, historical treasures, or other similar		lucation, or research in furtherance of
	public service, provide the following amounts relat	-	
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
	If the organization received or held works of art		
	following amounts required to be reported under S		
	Revenue included on Form 990, Part VIII, line 1 .		<b>&gt;</b> \$
h	Accete included in Form 990, Part Y		<b>~</b> •

Daa	_	2
rau	e	•

	t III Organizations Maintaining							
3	Using the organization's acquisition, collection items (check all that apply)		her reco	rds, ched	ck any of th	e follo	wing that are a	significant use of its
а	☐. Public exhibition				or exchang			
b	Scholarly research		e	☐ Othe	r			
C	☐ Preservation for future generation							
4	Provide a description of the organiza XIII.	ition's collections a	and expl	ain how t	they further	the or	ganızatıon's exe	empt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rathe							
Par	t IV Escrow and Custodial Arr	angements.		·				
	Complete if the organization 990, Part X, line 21.						·	
1a	Is the organization an agent, trustee included on Form 990, Part X?							
þ	If "Yes," explain the arrangement in F	art XIII and comple	ete the fo	llowing t	able:			
								Amount
С	Beginning balance					10		
ď	Additions during the year					10	<del></del>	
e	Distributions during the year					16		
f	Ending balance							
2a	Did the organization include an amou							=
Par	If "Yes," explain the arrangement in F  t V Endowment Funds.	art Alli. Check here	e ii trie e	cpianatio	n nas been	provid	ed on Part XIII .	· · · · · · · ·
r ar	Complete if the organization	answered "Yes"	on For	m 990 I	Part IV line	10		
	Complete if the organization	(a) Current year		or year	(c) Two years		(d) Three years bad	ck (e) Four years back
1a	Beginning of year balance			<u> </u>	<u> </u>			
b	Contributions							<del>                                     </del>
C	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of			e (line 1g	j, column (a)	) held	as:	
а	Board designated or quasi-endowme	nt <b>&gt;</b>	%					
b	Permanent endowment	%						
С	Temporarily restricted endowment ►							
٠.	The percentages on lines 2a, 2b, and			4 41				L .
Зa	Are there endowment funds not in the organization by:	e possession of the	e organiz	tation tha	at are neid a	and ad	ministered for t	
	•							Yes No
	(i) unrelated organizations (ii) related organizations							3a(i) 3a(ii)
ь	If "Yes" on line 3a(ii), are the related of					• •		3b
4	Describe in Part XIII the intended uses							<u> </u>
Part						_		
	Complete if the organization		on For	m 990, F	art IV, line	11a.	See Form 990	, Part X, line 10.
	Description of property	(a) Cost or oth (investme		• •	r other basis ther)		Accumulated epreciation	(d) Book value
1a	Land		50,844					50,844
b	Buildings		515,505				123,863	391,642
c	Leasehold improvements							
þ	Equipment	·	2,888				2,520	368
<u>e</u>	Other	·	95,133		(D) 1 = 1 =		92,010	3,123
ı otal.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	ιυ, Paπ X	, coiumn	ı (¤), IIne 100	J.)	🕨 📙	445,977

Part VII	Investments—Other Securities Complete if the organization an		on Form	990, Part IV, lir	ne 11b. See Fo	orm 990, Part X, line 12,
	(a) Description of security or category (including name of security)			(b) Book value	(c)	Method of valuation end-of-year market value
(1) Financia						
	1 . 1			<del></del>	<del>                                     </del>	<del></del>
			`` <del>`</del>		<del>                                     </del>	
(A)					† <del></del>	
(B)					<del>                                     </del>	<del></del>
(C)					<del>                                     </del>	<del>-</del>
(D)					<del> </del>	
(E)					<del> </del>	·
(F)				<del></del>	<del> </del>	
(G)					<del></del>	- · · · · · · · · · · · · · · · · · · ·
(H)						
Total. (Column (	o) must equal Form 990, Part X, col. (B) line 12.)	•		<del>- · · - · - · - · - · - · · - ·</del>		
Part VIII	Investments-Program Relate				<u> </u>	
	Complete if the organization an		on Form	990. Part IV. lir	ne 11c. See Fo	rm 990. Part X. line 13.
	(a) Description of investment			(b) Book value		Method of valuation
	(-,,			(-,	1 ' '	end-of-year market value
(1)	· · · · · · · · · · · · · · · · · · ·	······			<del></del>	<del></del>
(2)				<del></del>		
(3)					<del> </del>	
(4)				<del>_</del>	<del>                                     </del>	
(5)		<del></del>			<u> </u>	<u> </u>
(6)					<del>                                     </del>	<del></del>
(7)					<del> </del>	· · · · · · · · · · · · · · · · · · ·
(8)			<del></del>		-	
(9)						
	) must equal Form 990, Part X, col. (B) line 13 )	<b>&gt;</b>				
Part IX	Other Assets.				·	<del></del>
	Complete if the organization an	swered "Yes"	on Form	990, Part IV, lir	e 11d. See Fo	rm 990, Part X, line 15.
		(a) Description		<del></del>		(b) Book value
(1)						
(2)						
(3)						
(4)	<del></del>				<del></del>	
(5)		-				
(6)	····					
(7)	····		-			
(8)						
(9)	·					
Total. (Colui	nn (b) must equal Form 990, Part X,	col. (B) line 15 )				
Part X	Other Liabilities.					
	Complete if the organization and	swered "Yes"	on Form	990, Part IV, lin	e 11e or 11f. S	See Form 990, Part X,
	line 25.					
1.	(a) Description of liability	(b) Book	c value			
(1) Federal in	come taxes					
(2)						
(3)				<del> </del>		
(4)						
(5)						
(6)		1	<del></del>			
(7)		<del> </del>				
(8)	<del></del>	<del> </del>				
(9)		+				
	must equal Form 990, Part X, col (B) line 25 )	<del> </del>				
	uncertain tax positions. In Part XIII, pro-		e footnote	to the organization	n's financial state	ments that reports the
	liability for uncertain tax positions unde					
	poomono ano		,	,		

Par	Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Return.
_	Complete if the organization answered "Yes" on Form 990, f	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	]
b	Donated services and use of facilities	2b	]
С	Recoveries of prior year grants	2c	]
d	Other (Describe in Part XIII.)	2d	]
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	,	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	]
С	Add lines <b>4a</b> and <b>4b</b>		4c
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses pe	er Return.
_	Complete if the organization answered "Yes" on Form 990, F	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	2a	]
b	Prior year adjustments	2b	]
С	Other losses	2c	]
d	Other (Describe in Part XIII.)	2d	]
е	Add lines <b>2a</b> through <b>2d</b>		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.)	4b	<u> </u>
С	Add lines <b>4a</b> and <b>4b</b>		4c
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	<del>. 18.) </del>	5
	XIII Supplemental Information.		
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t		
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## \$CHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047
2017
Open to Public

Inspection

Name of the organization	Employer identification number
The Shadow Barons	63-1227233
Part III, line 4d Expenses totaling \$4,547 were incurred for the provision of food and beverages at gen	eral membership meetings held
during the year	<del></del>
Part VI, line 6: The Shadow Barons is a Mardis Gras organization with approximately 250 members wh	ose dues fund annually a Mardis Gras
parade and ball (social gathering), 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 annually at a designment of the organization o	nated meeting held in March
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 are voted	on annually by the members during
a designated meeting held in March	
Part VI, line 11b: Form 990 for the organization is reviewed with the Board of Directors at the board's n	ext regularly scheduled meeting
after its filing	
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	······································
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	