

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Table with columns for question number, question text, and Yes/No columns. Rows include 33, 34, 35a, 35b, 35c, 36, 37a, 37b, 38a, 38b, 39, 39a, 39b, 40a, 40b, 40c, 40d, 40e, 41.

42a The organization's books are in care of Andrew Grady Telephone no (337) 233-2337 Located at 2901 Moss St Lafayette, LA ZIP + 4 70501

Table with columns for question number, question text, and Yes/No columns. Rows include 42b and 42c.

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43

Table with columns for question number, question text, and Yes/No columns. Rows include 44a, 44b, 44c, 44d, 45a, 45b.

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	No

Part VI Section 501(c)(3) organizations only
 All section 501(c)(3) organizations must answer questions 47- 49b and 52, and complete the tables for lines 50 and 51.
 Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000. ▶ _____

52 Did the organization complete Schedule A? **NOTE.** All section 501(c)(3) organizations must attach a completed Schedule A ▶ Yes No

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 Here ***** Signature of officer	2019-11-14 Date
Todd Citron President Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name Mark P Harris CPA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00090538
	Firm's name ▶ GOING SEBASTIEN FISHER LEBOUF			Firm's EIN ▶ 26-3940785	
	Firm's address ▶ 2811 South Union Street Opelousas, LA 70570			Phone no (337) 942-3041	

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

Form 990EZ, Part III - Statement of Program Service Accomplishments

<p>Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.</p>	<p>Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)</p>	
<p>29 Previously produced programs air on the local public access channel to inform interested parties of activities and of the businesses and the goods & services provided in the upper geographic region of Lafayette Parish (Grants \$)</p> <p style="text-align: right;">If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>	<p>29a</p>	

Form 990EZ, Part IV — List of Officers, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Kirk LaCour Director	1 00	0		
Brenda Foulcard Director	1 00	0		
Todd Citron President	1 00	0		
Zachary Barker Secretary/Treas	1 00	0		
Adrian Baudoin Director	1 00	0		
Ken Lazard Director	1 00	0		
Jan Swift Director	1 00	0		
Herbert Schilling Director	1 00	0		
David Welch Director	1 00	0		
Chad Cole Director	2 00	0		
Monty Warren Director	1 00	0		
Bradley Black Executive Dir	30 00	77,300	4,849	
Donna Landry Director	1 00	0		
Jerry Vasocu Director	1 00	0		
Bryan Tabor Director	1 00	0		

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018**Open to Public Inspection**

Department of the Treasury

Name of the organization

Upper Lafayette Economic Dev Foundation

Employer identification number

20-5006336

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1001	Advertising and Promotion \$124

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1002	Office Expenses \$600

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1003	Information Technology \$912

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1007	Conferences, Conventions, and Meetings \$432

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1012	Insurance \$156

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1	Cancelled-uncollect Mbrships \$10500

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 2	Forums and meeting expenses \$6813

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 3	Television Production Costs \$750

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 4	Meals and Entertainment \$749

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 5	Payroll Processing Fee \$434

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 6	Bank and other service charges \$192

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 7	Donations \$150

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 10	Professional Development \$55

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 11	Parking & Transportation \$32

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Assets 1005	Accounts Receivable - Beginning \$13350 Accounts Receivable - Ending \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Assets 1011	Prepaid Expenses and Deferred Charges - Beginning \$455 Prepaid Expenses and Deferred Charges - Ending \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Total Liabilities 1001	Accounts Payable and Accrued Expenses - Beginning \$1840 Accounts Payable and Accrued Expenses - Ending \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Total Liabilities 1003	Deferred Revenue - Beginning \$18375 Deferred Revenue - Ending \$8463

990 Schedule O, Supplemental Information

Return Reference	Explanation
Total Liabilities 1	Payroll tax liabilities - Beginning \$988 Payroll tax liabilities - Ending \$7941