EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

A F	or the	2022 calendar year, or tax year beginning	and	ending	_					
3 c	heck if pplicable	C Name of organization			D Employer identi	ification number				
	Addres		1							
	Name chang	Doing business as			**-***8921					
]Initial return	Number and street (or P.O. box if mail is not delive	vered to street address)	Room/suite	E Telephone numb	per				
]Final return/	919 ST CHARLES AVENUE			(504) 598-4	1663				
	termin ated	City or town, state or province, country, and 2	ZIP or foreign postal code		G Gross receipts \$	243,455,297.				
	☐Amend return	NEW ORLEANS, LA /0130			H(a) Is this a group	return				
	Applic tion	I F Name and address of principal officer: ANDRE	W KOPPLIN		for subordinate	es? Yes X No				
	pendir	919 ST CHARLES AVE, NEW ORLEANS, LA	70130		H(b) Are all subordinates	s included? Yes No				
ΙT	ax-exe	empt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527	If "No," attach	a list. See instructions				
_	Vebsit				H(c) Group exempt	ion number				
		organization: X Corporation Trust Ass	sociation Other	L Year	of formation: 1983	M State of legal domicile; LA				
Pa	rt I	Summary								
ø	1	Briefly describe the organization's mission or most	significant activities: THE GR	EATER NEV	N ORLEANS					
Governance	.	FOUNDATION (GNOF) IS THE COMMUNITY FOU	NDATION (CONT'D ON SCH	0)						
er i	2	Check this box if the organization discon	tinued its operations or dispo	sed of more	e than 25% of its net	assets.				
Š		Number of voting members of the governing body (. , , , , , , , , , , , , , , , , , , ,		3	30				
<u>«</u>		Number of independent voting members of the gov								
es		Total number of individuals employed in calendar y								
Activities		Total number of volunteers (estimate if necessary) .								
Act		Total unrelated business revenue from Part VIII, col				a -93,376.				
	b	Net unrelated business taxable income from Form 9	990-T, Part I, line 11							
					Prior Year	Current Year				
ne	l .				70,916,850					
Revenue					513,208	'				
Вè		Investment income (Part VIII, column (A), lines 3, 4,			27,245,106					
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	115,186	-						
		Total revenue - add lines 8 through 11 (must equal			98,790,350					
		Grants and similar amounts paid (Part IX, column (A			33,277,818					
		Benefits paid to or for members (Part IX, column (A)		3 424 036	<u>, </u>					
Expenses		Salaries, other compensation, employee benefits (F		3,424,936						
en	l	Professional fundraising fees (Part IX, column (A), li				2,190.				
Ä		Total fundraising expenses (Part IX, column (D), line	·		4,648,449	6,328,572.				
		Other expenses (Part IX, column (A), lines 11a-11d,			41,351,203	<u>' ' </u>				
		Total expenses. Add lines 13-17 (must equal Part IX			57,439,147					
SS		Revenue less expenses. Subtract line 18 from line	12	Be	eginning of Current Yea					
Net Assets or Fund Balances	20	Total assets (Part V. line 16)		F	492,658,597					
Bal	21	T-1-1 - - - - (D1 V 00)			3,619,123					
age	22	Net assets or fund balances. Subtract line 21 from	lino 20		489,039,474					
	rt II	Signature Block	III 16 20		105,005,171	127,250,721.				
		Ities of perjury, I declare that I have examined this return, i	including accompanying schedule	s and statem	ents, and to the best of	my knowledge and belief, it is				
		t, and complete. Declaration of preparer (other than office				,				
			,							
Sign	n	Signature of officer			Date					
Her		ERIC SELING, VP OF FINANCE AND OPERATION	ONS							
		Type or print name and title								
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN				
Paid	i	JOHN S. WILES, CPA			if self-emp	loyed ₽01222673				
Prep	arer	Firm's name LAPORTE, APAC				**-**8864				
Use	Only	Firm's address 111 VETERANS MEMORIAL BLVD	., #600							
		METAIRIE, LA 70005-4958			Phone no.50	04-835-5522				
Мау	the IF	RS discuss this return with the preparer shown about	ve? See instructions			X Yes No				

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u>X</u>
1	Briefly describe the organization's mission:	
	THE GREATER NEW ORLEANS FOUNDATION (GNOF) IS THE COMMUNITY FOUNDATION	
	FOR THE SOUTHEAST LOUISIANA REGION, IMPROVING OUR COMMUNITY'S FUTURE	
	THROUGH FUND MANAGEMENT, NONPROFIT EFFECTIVENESS TRAINING,	
	PROGRAMMATIC INITIATIVES, (CONT'D ON SCH O)	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	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?	Yes X No
	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	y expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 42,445,183. including grants of \$ 36,114,873.) (Revenue \$	397,252.)
	BECAUSE THE FOUNDATION SEEKS TO IMPROVE THE QUALITY OF LIFE FOR ALL, WE	<u> </u>
	PROMOTE PHILANTHROPY AS A CRITICAL RESOURCE FOR EFFORTS TO ADDRESS OUR	
	COMMUNITY'S PRESSING ISSUES. BELOW IS A LISTING OF SOME OF THE	
	FOUNDATION'S MOST IMPORTANT WORK.	
	TOWNSTION B MOBI IM ONTINE WORK.	
	CAPITAL CAMPAIGN: THE GREATER NEW ORLEANS FOUNDATION HAS BEEN	
	INTRODUCING PHILANTHROPIC MINDED LEADERS AND INDIVIDUALS TO OUR "BE	
	GREATER CAMPAIGN" - A BOLD EFFORT TO GROW THE FOUNDATION'S BASE OF	
	ASSETS TO \$500 MILLION AND TO INCREASE THE FOUNDATION'S OWN ENDOWED	
	FUNDS THAT SUPPORT OUR LEADERSHIP ACTIVITIES BY \$20 MILLION BY 2023.	
	/	
	(CONT'D ON SCH O)	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
		·
		_
		_
11 =1	Other program conject (Decayibe on Schodule C.)	
4d	,	\
1.	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 42,445,183.)
4e	Total program service expenses 42,445,183.	Form 990 (2022)
		FUHH 330 (2022)

Part IV 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		17	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
	similar amounts as defined in Rev. Proc. 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	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0	Λ	
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
5	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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	_		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	Х	
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		Х
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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
_	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	v	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		<u> </u>
b	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	х	
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		х
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		х
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		Х
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		Х
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		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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	Х	

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Dort IV	Checklist of Required Schedules (continue	-11
Fail IV	Checking of Dequired Schedules (continue)	J)

ı aı	Officerist of nequired Schedules (continued)		Ver	N-					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No					
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х						
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current								
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete								
	Schedule J	23	Х						
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			l					
	Schedule K. If "No," go to line 25a	24a 24b		Х					
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease								
Ч	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d							
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	210							
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and								
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete								
	Schedule L, Part I	25b		х					
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current								
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%								
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х					
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,								
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled								
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X					
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,								
	instructions for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	200		х					
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X					
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//f	200							
Ū	"Yes," complete Schedule L, Part IV	28c		х					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х						
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation								
	contributions? If "Yes," complete Schedule M	30		Х					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х					
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		Х					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations								
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		77						
25-	Part V, line 1	34	X X						
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a	Λ						
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000							
	If "Yes," complete Schedule R, Part V, line 2	36		х					
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								
38									
	Note: All Form 990 filers are required to complete Schedule O	38	Х						
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response or note to any line in this Part V			Ш					
			Yes	No					
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 115								
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b								
С	DIG THE OFGENEAUOH COMDIV WITH DACKUD WITHOUTHU TUIES TO TEDOLIADIE DAVITIENTS TO VEHQUIS AND TEDOLIADIE QAMINO								

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Form **990** (2022)

(gambling) winnings to prize winners?

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
		5								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O									
	a 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 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	ia Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		х						
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 and services provided to the payor	7a	Х							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7с		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х						
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?									
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?									
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:									
а	Initiation fees and capital contributions included on Part VIII, line 12	4								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	4								
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	_								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40								
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.									
D	Enter the amount of reserves the organization is required to maintain by the states in which the									
_	organization is licensed to issue qualified health plans 13b	_								
	Enter the amount of reserves on hand Did the even instead when the index tenning convices during the tay year?	140		х						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	Α						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	+							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45	1	x						
	excess parachute payment(s) during the year?	15		Α.						
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		Х						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16								
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	47	1							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

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

						X					
Sec	tion A. Governing Body and Management										
		1 1			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	30								
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent	1b	30								
2	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?			2		X					
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?										
4											
5	Did the organization become aware during the year of a significant diversion of the organization's ass		г	5		Х					
6	Did the organization have members or stockholders?		г	6		Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a		¨								
	more members of the governing body?			7a		х					
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s		··								
	persons other than the governing body?			7b		х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		··								
				8a	х						
a				oa 8b	X						
b			··	on							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real					Х					
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Λ					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Coae.)									
			г		Yes	No					
	Did the organization have local chapters, branches, or affiliates?		··	10a		Х					
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl										
	and branches to ensure their operations are consistent with the organization's exempt purposes? \dots		г	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before filing the form?	`	11a	Х						
b	Describe on 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	Х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicts?		12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y										
	on Schedule O how this was done			12c	Х						
13	Did the organization have a written whistleblower policy?		[13	Х						
14	Did the organization have a written document retention and destruction policy?		[14	Х						
15	Did the process for determining compensation of the following persons include a review and approve	al 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	Х						
	Other officers or key employees of the organization			15b	Х						
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment with a									
	taxable entity during the year?		[16a		х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	• •									
	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, Do	C,FL,GA,IL,KS,KY									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a		:)(3):	s only	availa	able					
	for public inspection. Indicate how you made these available. Check all that apply.	(-35	,,,-,-	- · · · y /							
		on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	,	anc	d finar	ncial						
	statements available to the public during the tax year.	or or intoroot policy,	ا اد								
20	State the name, address, and telephone number of the person who possesses the organization's bo	oke and records									
20	ERIC SELING - (504) 598-4663	ons and records									
	919 ST CHARLES AVENUE, NEW ORLEANS, LA 70130										
	212 SI CHEMPER VARIOR' MEM OKTHEWIN' TW \ALTO										

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

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

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

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related or					n cor	npe	nsat	ated any current officer, director, or trustee.			
(A)	(B)	(C)						(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable	Estimated	
	hours per	box	, unle cer ar	ss pe	erson	is bot	th an	compensation	compensation	amount of	
	week		Corar	10 0	I)/ u us	1	from	from related	other	
	(list any hours for	· director				_		the organization	organizations (W-2/1099-MISC/	compensation from the	
	related	5	stee			nsateo		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations	Individual trustee	Institutional trustee		yee	Highest compensated employee		1099-NEC)	,	and related	
	below	/id ual	tution	ie.	Key employee	lest co	Je.			organizations	
	line)	Indi	Insti	Officer	Key	High emp	Former				
(1) ANDREW KOPPLIN	40.00										
PRESIDENT & CEO	5.00			Х				378,290.	0.	48,935.	
(2) ERIC SELING	40.00	1									
VP, FINANCE & OPERATIONS	2.00			Х				228,128.	0.	18,257.	
(3) KENNETH ST. CHARLES	40.00	1									
VP, PHILANTHROPY					Х			195,549.	0.	16,112.	
(4) KELLIE CHAVEZ-GREENE	40.00										
VP, PROGRAMS					Х			177,165.	0.	33,700.	
(5) KARLA RIVERA	40.00	1									
CHIEF OF STAFF					Х			179,301.	0.	20,175.	
(6) SHERINA CLAVIER	40.00										
DIRECTOR, FINANCE						Х		142,904.	0.	12,186.	
(7) RICHARD MARTINEZ	40.00	1									
SENIOR PROGRAM OFFICER						Х		102,534.	0.	22,774.	
(8) JEANETTE M. DAVIS-LOEB	2.00	1									
SECRETARY	1.00	Х		Х				0.	0.	0.	
(9) GAYLE BENSON	2.00	1									
TRUSTEE		Х						0.	0.	0.	
(10) RONALD BURNS, SR.	2.00	1									
TRUSTEE		Х						0.	0.	0.	
(11) CATHERINE FREEMAN	2.00	1									
TRUSTEE	2.00	Х						0.	0.	0.	
(12) HON. BRIAN A. JACKSON	2.00										
TRUSTEE		Х			<u> </u>			0.	0.	0.	
(13) R. FOSTER DUNCAN	2.00							_	_	_	
TRUSTEE		Х			<u> </u>			0.	0.	0.	
(14) DR. MAUDE LOFTON	2.00										
TRUSTEE		Х						0.	0,	0.	
(15) KATIE CROSBY	2.00	ļ						_	_	_	
TRUSTEE		Х						0.	0.	0.	
(16) ROGER OGDEN	2.00	4_									
TRUSTEE		Х		_	<u> </u>		<u> </u>	0.	0.	0.	
(17) NANCY BISSINGER TIMM	2.00	1									
TRUSTEE	1.00	Х	1			1	1	0.	0.	0.	

232007 12-13-22

Form 990 (2022) THE GREATER	NEW ORLEANS	FO	UND	AT, T	ON_				**-***8921	Page 8
Part VII Section A. Officers, Directors, Tru	ıstees, Key Em	ploy	ees,	, and	iH b	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per week	box	not cl , unles cer an	ss pe	more rson i	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) BERTRAND WILSON	2.00									
TRUSTEE		Х						0.	0.	0.
(19) LYNES R. SLOSS	2.00									
TRUSTEE		Х						0.	0.	0.
(20) PATRICIA WEEKS	2.00									
TRUSTEE		Х						0.	0.	0.
(21) ANDY WISDOM	2.00									
TRUSTEE		Х						0.	0.	0.
(22) DAVID BARKSDALE	2.00									
VICE CHAIR	2.00	Х		Х				0.	0.	0.
(23) LYNNE BURKART	2.00									
TRUSTEE	1.00	х						0.	0.	0.
(24) ALEX GERSHANIK	2.00									
TREASURER		х		Х				0.	0.	0.
(25) ARTHUR ROGER	2.00									
TRUSTEE		х						0.	0.	0.
(26) STEVEN W. USDIN	2.00									
TRUSTEE	1.00	х						0.	0.	0.
1b Subtotal								1,403,871.	0.	172,139.
c Total from continuation sheets to Part								0.	0.	0.
d Total (add lines 1b and 1c)								1,403,871.	0.	172,139.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CAPITAL CITY PRESS		
10705 RIEGER ROAD, BATON ROUGE, LA 70809	JOURNALISM SERVICES	421,963.
GRACEFULLY MINDFUL WELLNESS INSTITUTE,		
LLC, 4623 MANDEVILLE STREET, NEW ORLEANS,	CONSULTING	396,240.
BERNI CONSULTING, 900 CAMP STREET, SUITE		
346, NEW ORLEANS, LA 70103	CONSULTING	219,135.
BDO, 600 THIRD AVENUE, 3RD FLOOR, NEW		
YORK, NY 10016	CONSULTING	174,000.
POSTLETHWAITE & NETTERVILLE APAC, 8550		
UNITED PLAZA BLVD., SUITE 10001, BATON	CONSULTING	169,845.
2 Total number of independent contractors (including but not limited to those lis \$100,000 of compensation from the organization 5	ted above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

1 01111 000	NEW ORLEANS	FO	UND.	ATI	ON				**-***892	1
Part VII Section A. Officers, Directors, T	rustees, Key E	mplo	oyee	s, a	nd H	High	est	Compensated Employ	ees (continued)	
(A)	(D) (E) (F)									
Name and title	(B) Average		Position					Reportable	Reportable	Estimated
	hours	(cl	(check all that apply)					compensation	compensation	amount of
	per							from	from related	other
	week	<u>_</u>				loyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for related	eord	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				organizations
	below	idual	ution	_	Key employee	st co	ь			
	line)	Indiv	Instit	Officer	Key e	High	Former			
(27) CATHY W. ISAACSON	2.00									
TRUSTEE		х						0.	0.	0.
(28) JIMMIE M. WOODS, SR.	2.00									
TRUSTEE		х						0.	0.	0.
(29) WARNER L. THOMAS	2.00									
TRUSTEE		х						0.	0.	0.
(30) LEANN O. MOSES	2.00									
PAST CHAIR	1.00	х		х				0.	0.	0.
(31) ROBERT A. BORIES	2.00									
CHAIR	3.00	Х		Х				0.	0.	0.
(32) ALLISON BERGER TILLER	2.00									
TRUSTEE		Х						0.	0.	0.
(33) KAREN COAXUM	2.00									
TRUSTEE		Х						0.	0.	0.
(34) RICHARD CORTIZAS	2.00									
TRUSTEE		Х						0.	0.	0.
(35) ERICA BECK	2.00	1								
TRUSTEE		Х						0.	0.	0.
(36) JOHN HAIRSTON	2.00	1						_	_	_
TRUSTEE		Х						0.	0.	0.
(37) JEFF HEBERT	2.00	∤								
TRUSTEE		Х						0.	0.	0.
(38) MONICA SYLVAIN	2.00	١							0	
TRUSTEE		Х						0.	0.	0.
		1								
					<u> </u>					
		1								
		ł								
		1								
		1								
		1								
		1								
		L	L	L	L	L	L			
Total to Part VII, Section A, line 1c										

Form 990 (2022) THE GREATER
Part VIII | Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
		Officers in Confedence of Confedence of Toopening C	I note to uny iii	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt		Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
(0 (0							Sections 512 - 514
ints		Federated campaigns 1a					
اع ق		Membership dues 1b					
A,	c	Fundraising events					
iar Iar	c	Related organizations 1d	597,195.				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions)	200,000.				
rior S	f	All other contributions, gifts, grants, and					
the		similar amounts not included above 1f	39,436,544.				
	c	Noncash contributions included in lines 1a-1f	4,310,985.				
an Co	_	Total. Add lines 1a-1f		40,233,739.			
			Business Code				
o l	2 =	ADMINISTRATIVE FEES	561000	294,262.	294,262.		
, ki	2 b		561300	82,176.	82,176.		_
Program Service Revenue	-		541610	20,814.	20,814.		
Ye.	c		341010	20,014.	20,014.		
gra Re	C						_
ro	e		000000				
-	f	All other program service revenue	900099				
\rightarrow		Total. Add lines 2a-2f		397,252.			
	3	Investment income (including dividends, interes					
		other similar amounts)		5,990,617.		-93,376.	6,083,993.
	4	Income from investment of tax-exempt bond pr	roceeds				
	5	Royalties		4,294.			4,294.
		(i) Real	(ii) Personal				
	6 a	Gross rents 60,097.					
	b	Less: rental expenses 6b 0.					
	c	Rental income or (loss) 6c 60,097.					
	c	Net rental income or (loss)		60,097.			60,097.
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 196,769,298.					
	b	Less: cost or other basis					
e l	_	and sales expenses 7b 191,037,584.					
en e		Gain or (loss) 7c 5,731,714.					
Revenue		Net gain or (loss)		5,731,714.			5,731,714.
ther		Gross income from fundraising events (not		-,,•			7,112,1124
됩	0.0	including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
	C	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	b	Less: cost of goods sold10b					
	C	Net income or (loss) from sales of inventory					
<u>s</u>			Business Code				
eo r	11 a	·					
en	b	·					
e Se	c	·					
Miscellaneous Revenue	c	All other revenue					
	e	Total. Add lines 11a-11d					
	12	Total revenue. See instructions		52,417,713.	397,252.	-93,376.	11,880,098.

232009 12-13-22

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	34,584,273.	34,584,273.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	1,530,600.	1,530,600.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 005 613	350.000	404 020	440 204
_	trustees, and key employees	1,295,613.	358,980.	494,239.	442,394
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0 110 050	1 052 160	440.060	614 000
7	Other salaries and wages	2,110,950.	1,053,162.	442,860.	614,928
8	Pension plan accruals and contributions (include	102 504	00 004	20 252	02.000
_	section 401(k) and 403(b) employer contributions)	193,584.	89,234.	20,352.	83,998
9	Other employee benefits	209,845.	103,453.	56,185.	50,207
10	Payroll taxes	209,277.	88,296.	64,053.	56,928
11	Fees for services (nonemployees):				
a		20 005	7 022	21 670	384
b		29,085.	7,023.	21,678.	304
C	5 ······	75,285.		75,285.	
	Lobbying	27,000.		27,000.	2 100
e	· F	2,190.	1 227 615		2,190
f	Investment management fees	1,227,615.	1,227,615.		
g	,	2 005 202	2 201 616	450 112	155 654
40	column (A), amount, list line 11g expenses on Sch 0.)	3,005,383.	2,391,616.	458,113. 29,899.	155,654 41,403
12	Advertising and promotion	115,086.	55,756.	34,812.	24,518
13	Office expenses	193,808.	81,394.	61,802.	50,612
14 15	Information technology	133,000.	01,351.	01,002.	30,012
15 16	Royalties	290,620.	123,316.	90,716.	76,588
17	Occupancy	85,862.	54,267.	25,620.	5,975
18	Payments of travel or entertainment expenses	05,002.	31,207.	23,020.	3,373
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	322,261.	127,475.	140,049.	54,737
20	· · · · · · · · · · · · · · · · · · ·	,	,		,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	268,747.	112,899.	82,970.	72,878
23	t	75,491.	30,990.	24,496.	20,005
24	Other expenses. Itemize expenses not covered	,	,		
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	BANK & CREDIT CARD FEES	386,415.	365,578.	20,837.	
b	DUES & SUBSCRIPTIONS	85,359.	14,958.	71,216.	-815
c	DEVELOPMENT/PR	29,745.	16,687.	11,366.	1,692
d	TAXES	6,600.	,	6,600.	,
e		6,181.	884.	5,297.	
25	Total functional expenses. Add lines 1 through 24e	46,464,904.	42,445,183.	2,265,445.	1,754,276
<u> 26</u>	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)				

Form 990 (2022) Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to an	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			13,013,163.	1	4,711,760.
	2	Savings and temporary cash investments			21,261,407.	2	25,757,192.
	3	Pledges and grants receivable, net			3,499,819.	3	4,035,585.
	4	Accounts receivable, net			1,904,417.	4	1,498,151.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial o	contributor, or 35%			
		controlled entity or family member of any of th	ese pers	ons		5	
	6	Loans and other receivables from other disqui	alified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describ	ed in sec	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net			27,060,254.	7	25,998,147.
Assets	8	Inventories for sale or use				8	
⋖	9	5				9	
	10a	Land, buildings, and equipment: cost or other	·				
		basis. Complete Part VI of Schedule D		13,294,900.			
	b	Less: accumulated depreciation	10b	1,663,496.	11,803,810.	10c	11,631,404.
	11	Investments - publicly traded securities			413,710,240.	11	357,077,516.
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, lin	e 11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	405,487.	15	436,168.		
	16	Total assets. Add lines 1 through 15 (must ed			492,658,597.	16	431,145,923.
	17	Accounts payable and accrued expenses	145,677.	17	495,122.		
	18	Grants payable	450,023.	18	1,027,500.		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet				21	
ies	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, suk					
<u> </u>		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax, p	•				
		parties, and other liabilities not included on lin			2 022 422	0.5	2 420 507
	00	of Schedule D			3,023,423. 3,619,123.		2,429,587. 3,952,209.
	26	Total liabilities. Add lines 17 through 25		e X	3,019,123.	26	3,932,209.
es		Organizations that follow FASB ASC 958, cl	песк пег	e 🚣			
ũ	07	and complete lines 27, 28, 32, and 33.			467,819,860.	07	410,115,498.
3ale	27	Net assets without donor restrictions			21,219,614.	27 28	17,078,216.
βE	28	Net assets with donor restrictions			21,215,014.	20	17,070,210.
Ψ		Organizations that do not follow FASB ASC	956, CH	eck nere			
ō	20	and complete lines 29 through 33.	ام			20	
ets	29	Capital stock or trust principal, or current fund				29 30	
Ass	30	Paid-in or capital surplus, or land, building, or				31	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			489,039,474.	32	427,193,714.
Z	32	Total net assets or fund balances Total liabilities and net assets/fund balances			492,658,597.	33	431,145,923.
	JJ	Total habilities and thet assets/fully baldfices			1,000,001.	33	Form 990 (2022)

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 on Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE GREATER NEW ORLEANS FOUNDATION

Employer identification number

-*8921

Pa	rt I	Reason for Public Charity Status. (All organizations must complete this part.) See instructions.						
The	organ	ization is not a private found	ation because it is: (For lines 1 through 12, c	heck only	one box.)		
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1	I)(A)(i).	
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)						
3		A hospital or a cooperative		•		(b)(1)(A)(ii	ii).	
4	一	A medical research organiz						the hospital's name
•		city, and state:	a operated co	.,,				and mospital o maine,
5		An organization operated for	or the benefit of a co	ullege or university owner	d or operat	ted by a d	overnmental unit descri	hed in
3		section 170(b)(1)(A)(iv). (C		liege of difficulty owner	и ог орста	ica by a g	overnmental and aesem	oca III
				والمناه والتروم والمعارب المعارب		70/15//4// 4.	(. A	
6	X	A federal, state, or local gov	_					منا ام مانيم مام مانيم
7	Λ	An organization that norma	•	initial part of its support i	rom a gov	emmentai	unit or from the genera	i public described in
_		section 170(b)(1)(A)(vi). (Co		(4)(A)(-i) (Olete Deut				
8	Ш	A community trust describe						!!
9	ш	An agricultural research org				_	-	•
		or university or a non-land-g	grant college of agric	culture (see instructions).	Enter the	name, city	, and state of the collec	ge or
40		university:						
10		An organization that norma						
		activities related to its exen						
		income and unrelated busin		(less section 511 tax) fro	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2). (Cor	•				20/ 3/43	
11	Н	An organization organized a	•	•	-			
12		An organization organized a	•	•	•		· · · · · · · · · · · · · · · · · · ·	
		more publicly supported or						Sneck the box on
		lines 12a through 12d that	• •			-	· · · · · · · · · · · · · · · · · · ·	
а			•	•				
		the supported organization			a majority (ot the aire	ctors or trustees of the	supporting
		organization. You must o			et a la contata de		l	
b			•					•
		control or management o			ame perso	ons that co	ontrol or manage the su	оропеа
		organization(s). You mus						
С		☐ Type III functionally inte					• •	ed with,
		its supported organization Type III non-functionally		· ·				ization(a)
d		that is not functionally int						. ,
		requirement (see instructi		• ,	•		•	liveriess
_		Check this box if the orga	•	-				
е		functionally integrated, or					i Type i, Type ii, Type iii	
f	Ente	er the number of supported o	* *	rially liftegrated support	ing organiz	zation.		
		vide the following information	•	ed organization(s)				
9		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				above (see instructions))				
								
						L		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	38,167,140.	32,173,991.	42,015,375.	70,916,850.	40,233,739.	223,507,095.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	38,167,140.	32,173,991.	42,015,375.	70,916,850.	40,233,739.	223,507,095.	
	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						41,981,570.	
6	Public support. Subtract line 5 from line 4.						181,525,525.	
	ction B. Total Support						, ,	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Amounts from line 4	38,167,140.	32,173,991.	42,015,375.	70,916,850.	40,233,739.	223,507,095.	
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	5,298,267.	4,392,664.	4,720,490.	7,476,647.	6,148,384.	28,036,452.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on			15,790.	2,321.		18,111.	
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)			3,343.	61,450.		64,793.	
11							251,626,451.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	2,090,652.	
13	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third, f	ourth, or fifth tax y	ear as a section s	501(c)(3)		
	organization, check this box and stop	here						
Sec	ction C. Computation of Publi	ic Support Pe	rcentage					
14	Public support percentage for 2022 (li	ine 6, column (f), d	ivided by line 11, o	column (f))		14	72.14 %	
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	71.74 %	
16a	33 1/3% support test - 2022. If the o							
	stop here. The organization qualifies							
b	33 1/3% support test - 2021. If the o							
	and stop here. The organization quali	ifies as a publicly s	supported organiza	ition				
17a	10% -facts-and-circumstances test	t - 2022. If the orga	anization did not c	heck a box on line	13, 16a, or 16b,	and line 14 is 10%	or more,	
	and if the organization meets the facts	s-and-circumstanc	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation	
	meets the facts-and-circumstances te	st. The organization	on qualifies as a pu	blicly supported o	organization			
b	10% -facts-and-circumstances test	t - 2021. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the		•		•			
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	supported organ	ization		
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Schedule A (Form 990) 2022

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	elow, please con	ipiete i ait ii.)				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	,			, ,		,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that						
	are not an unrelated trade or bus-						
4	Tax revenues levied for the organ-					+	
4	•						
	ization's benefit and either paid to or expended on its behalf						
_			+			+	
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
Ľ	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						i
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's '	I first second third	fourth or fifth tax	vear as a section	501(c)(3) organizat	ion
•	check this box and stop here	· ·		ŕ	•		.5.1,
Sec	ction C. Computation of Publ						
	Public support percentage for 2022 (column (f))		15	9,
	Public support percentage from 2021					16	9
	ction D. Computation of Investigation					1101	
	Investment income percentage for 20					17	9
	Investment income percentage from 2					18	9
	33 1/3% support tests - 2022. If the						
198							I / IS HOL
	more than 33 1/3%, check this box a						L
b	33 1/3% support tests - 2021. If the	•			•	•	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	a box on line 14, 19	a. or 19b. check t	his box and see i	nstructions	

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Schedule A (Form 990) 2022

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	20		
	3с		
	4a		
	4b		
	4c		
	5a		
	FL.		
	5b 5c		
	6		
	7		
	8		
	0-		
	9a		
	9b		
	00		
	9c		
	40-		
	10a		
	10b		
عادر	Δ (Form	n 990	2022

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
_	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	<i>y</i> , 11 0 0		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2				
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		_		
<u>Sac</u>	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
<u> </u>	tion 6. Type it supporting organizations		V	Nia
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
800	the supported organization(s). tion D. All Type III Supporting Organizations	1		
360	tion b. All Type III Supporting Organizations		· ·	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
0	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	•		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

THE GREATER NEW ORLEANS FOUNDATION

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Org	anizations	· ·			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functionally	y integr	ated Type III supporting orga	anization (see			
	instructions).						

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ıed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsiv	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
	Breakdown of line 7:				
	Excess from 2018				
<u>b</u>	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number

2022

Schedule B (Form 990) (2022)

-*8921 THE GREATER NEW ORLEANS FOUNDATION Organization type (check one): Filers of: Section: 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$______\$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022) Page **2**

Name of organization	Employer identification number
THE GREATER NEW ORLEANS FOUNDATION	**-***8921

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$825,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,215,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,489,467.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$5,025,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$	Person X Payroll Noncash (Complete Part II for

Schedule B (Form 990) (2022) Page **2**

Name of organization	Employer identification number
THE GREATER NEW ORLEANS FOUNDATION	**-***8921

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$865,828.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Name, address, and Zir + +	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

-*8921

Part II	Noncash Property (see instructions). Use duplicate copies of Part II I	r additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - \$	

Schedule B (Form 990) (2022)

Name of organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Section 501(c)(//) (5) or (6) organizations: Complete Part III

	1 50 I (c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of or	•			=	imployer identification number
David I A		R NEW ORLEANS FOUNDATION			**-***8921
Part I-A	Complete if the org	ganization is exempt und	ier section 501(c)	or is a section 52	7 organization.
2 Politic	al campaign activity expendit	zation's direct and indirect politic tures ign activities			
Part I-B	Complete if the ord	ganization is exempt und	ler section 501(c)	(3).	
	· ·	incurred by the organization und		` '	\$
		incurred by organization manag			
		on 4955 tax, did it file Form 4720			
		······································			
b If "Yes	s," describe in Part IV.				
Part I-C	Complete if the org	ganization is exempt und	ler section 501(c)	, except section 5	01(c)(3).
1 Enter	the amount directly expended	d by the filing organization for se	ction 527 exempt fund	ction activities	\$
2 Enter	the amount of the filing organ	nization's funds contributed to ot	her organizations for s	ection 527	
exemp	ot function activities				\$
3 Total	exempt function expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL	-,	
line 17	⁷ b				\$
4 Did th	e filing organization file Form	1120-POL for this year?			Yes No
made contri	payments. For each organiza butions received that were pr	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organi a separate political org	ization's funds. Also ent ganization, such as a se	er the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization funds. If none, enter	's contributions received and

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

Sch	,		ORLEANS FOUNDATIO		**_***	
Pa	art II-A Complete if the organiza	ition is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	ection under
	section 501(h)).					
Α	Check if the filing organization be	-	* · ·	Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and share of ex		· · · · · · · · · · · · · · · · · · ·			
<u>B</u>	Check if the filing organization ch	ecked box A a	nd "limited control" pro	visions apply.		
	Limits on L (The term "expenditures	obbying Expe " means amou		1	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	oublic opinion (grassroots lobbying)		27,000.	
	Total lobbying expenditures to influence	=				
	Total lobbying expenditures (add lines 1a	-	• • • • • • • • • • • • • • • • • • • •		27,000.	
					46,437,904.	
е	Total exempt purpose expenditures (add				46,464,904.	
f	f Lobbying nontaxable amount. Enter the a	mount from th	e following table in bot	h columns.	1,000,000.	
	If the amount on line 1e, column (a) or (b) is	The lob	bying nontaxable am	ount is:		
	Not over \$500,000	20% of	the amount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,00	0 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
	Over \$17,000,000	\$1,000,	000.			
g	Grassroots nontaxable amount (enter 259	% of line 1f)			250,000.	
h	Subtract line 1g from line 1a. If zero or les	s, enter -0			0.	
i	Subtract line 1f from line 1c. If zero or les	s, enter -0			0.	
j	j If there is an amount other than zero on e	ither line 1h or	line 1i, did the organiza	ation file Form 4720	_	
	reporting section 4911 tax for this year?					Yes No
		de a section 5 See the separ	ate instructions for li	have to complete all nes 2a through 2f.)	of the five columns b	elow.
	L	obbying Expe	nditures During 4-Yea	r Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total

	Lobbying Expen	ditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	22,500.	27,000.	27,000.	27,000.	103,500.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	22,500.	27,000.	27,000.	27,000.	103,500.

Schedule C (Form 990) 2022

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		_		
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
rai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	cal			
а	Current year		2a		
b	Carryover from last year		2b		
С	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees to carryover to the reasonable estimate of nondeductible lobbying and process of the organization agrees of the organization agree organization agrees of the organization agree organization agrees of the organization agree organization ag				
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	• • • • • • • • • • • • • • • • • • • •	(1:-4). D4 II.	A 15		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.) list); Part II-/	A, IINES I a	and 2 (See	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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 Inspection

Name of the organization

THE GREATER NEW ORLEANS FOUNDATION

Employer identification number **-***8921

Pa	rt I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	510	628
2	Aggregate value of contributions to (during year)	17,844,225.	20,619,819.
3	Aggregate value of grants from (during year)	17,213,160.	18,868,167.
4	Aggregate value at end of year	263,709,835.	163,510,259.
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	
_			
	rt II Conservation Easements. Complete if the org		t IV, line 7.
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (for example, recrea		nistorically important land area
	Protection of natural habitat	Preservation of a c	certified historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif day of the tax year.	ned conservation contribution in the form of	Held at the End of the Tax Year
9	Total number of conservation easements		
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic stru		***
	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conser	vation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and enforcing conservation	n easements during the year
8	Does each conservation easement reported on line 2(d) above	vo satisfy the requirements of section 170(h)	(4)(P)(i)
0	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and	balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in furth	nerance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and ba	lance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	ance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical treation for the following sector of the		ain, provide
	the following amounts required to be reported under FASB A		Φ
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions		5 Schedule D (Form 990) 2022

232051 09-01-22

Schedule D (Form 990) 2022

11,631,404.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2022 THE GREATER NEW OF	RLEANS FOUNDATION		**-***8921	Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" o				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost of	r end-of-year marke	t value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of		1		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost of	r end-of-year marke	t value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
(a) D	escription		(b) Book	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)			
Part X Other Liabilities.			•	
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, lin	e 25.	
1. (a) Description of liability			(b) Book	value
(1) Federal income taxes				
(2) LIABILITIES UNDER SPLIT INTEREST AGREEM	MENT		2	,429,587

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	LIABILITIES UNDER SPLIT INTEREST AGREEMENT	2,429,587.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	2,429,587.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2022

Par	t XI Reconciliation of Revenue per Audited Financial Statem	nents With	Revenue per R	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	-20,863,805.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-66,406,536.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		-6,232,603.		
е	Add lines 2a through 2d			2e	-72,639,139.
3	Subtract line 2e from line 1			3	51,775,334.
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	642,379.		
С	Add lines 4a and 4b			4c	642,379.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	52,417,713.
Pai	t XII Reconciliation of Expenses per Audited Financial State	ments Wit	h Expenses per	Return	l .
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total expenses and losses per audited financial statements			1	45,652,136.
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	520,131.		
е	Add lines 2a through 2d			2e	520,131.
3	Subtract line 2e from line 1			3	45,132,005.
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	1,332,899.		
С	Add lines 4a and 4b			4c	1,332,899.
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	46,464,904.
Pai	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	rt IV, lines 1b	and 2b; Part V, line	4; Part X,	line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac	dditional infor	mation.		
PART	V, LINE 4:				
THE	GREATER NEW ORLEANS FOUNDATION SERVES THE COMMUNITY BY PARTNE	RING WITH			
INDI	VIDUALS WHO WANT TO INVEST IN THEIR COMMUNITY. BY HOLDING DON	IOR			
ADVI	SED AND ENDOWED FUNDS FOR INDIVIDUALS AND NONPROFITS, THE FOU	NDATION			
HELF	S CHARITABLE INDIVIDUALS MULTIPLY THEIR GIVING. THESE ENDOWED	FUNDS			
HELF	INDIVIDUALS GIVE AS A COLLECTIVE, MAXIMIZING A SINGLE DONATI	ON TO ITS			
FULL	EST EXTENT.				
THE	FOUNDATION ALSO ACTIVELY RAISES FUNDING FOR ITS OWN ENDOWMENT	, WHICH			
ALLC	WS IT TO MAKE PROACTIVE AND RESPONSIVE DISCRETIONARY GRANTS T	10			
ORGA	NIZATIONS MEETING THE EVER-CHANGING NEEDS OF THE REGION.				

PART X, LINE 2:

Schedule D (Form 990) 2022 THE GREATER NEW ORDEANS	FOUNDATION	- 0921	Page 5
Part XIII Supplemental Information (continued)			
ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITE	D STATES OF AMERICA		
PROVIDED ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POS	ITIONS TAKEN BY AN		
ENTITY IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. TH	E FOUNDATION BELIEVES		
IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKE	N, AND MANAGEMENT HAS		
DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS	THAT ARE MATERIAL TO		
THE COMBINED FINANCIAL STATEMENTS.			
PENALTIES AND INTEREST ASSESSED BY INCOME TAXING AUTH	ORITIES, IF ANY,		
WOULD BE INCLUDED IN INCOME TAX EXPENSE.			
PART XI, LINE 2D - OTHER ADJUSTMENTS:			
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	-1,365,387.		
INCOME REPORTED ON SEPARATE RETURNS FOR SUPPORT			
ORGANIZATIONS	1,697,963.		
INTERCOMPANY FEES NETTED	-98,215.		
UNREALIZED GAINS (LOSSES) REPORTED FOR SUPPORT			
ORGANIZATIONS	-5,049,685.		
CUSTODIAL FEES	-1,417,279.		
BOOK/TAX DIFFERENCE			
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-6,232,603.		
PART XI, LINE 4B - OTHER ADJUSTMENTS:			
FASB 136 AGENCY ADJUSTMENTS	29,136.		
INTERFUND GRANTS FROM SUPPORT ORGANIZATIONS	613,241.		
ROUNDING	2.		
TOTAL TO SCHEDULE D, PART XI, LINE 4B	642,379.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:		Sahadula D (Ear	

Part XIII Supplemental Information (continued)		
EXPENSES REPORTED ON SEPARATE RETURNS FOR SUPPORT		
ORGANIZATIONS	2,035,625.	
INTERCOMPANY FEES NETTED	-98,215.	
CUSTODIAL FEES	-1,417,279.	
BOOK/TAX DIFFERENCE		
TOTAL TO SCHEDULE D, PART XII, LINE 2D	520,131.	
PART XII, LINE 4B - OTHER ADJUSTMENTS:		
FASB 136 AGENCY ADJUSTMENT	719,658.	
INTERFUND GRANTS FROM SUPPORT ORGANIZATIONS	613,241.	
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,332,899.	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

OMB No. 1545-0047
2022
Open to Public

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Schedule F (Form 990) 2022

Name of the organization **Employer identification number** THE GREATER NEW ORLEANS FOUNDATION **-***8921 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (f) Total (a) Region (b) Number of (c) Number of (d) Activities conducted in the region émployees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region SEE PART V 0 0. 3 a Subtotal 0 0. **b** Total from continuation 0. sheets to Part I c Totals (add lines 3a 0. and 3b)

232071 10-17-22

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			I recognized as charities by the				<u> </u>	1
exempt 501(c)(3) orga 3 Enter total number of			or counsel has provided a sec		quivalency letter	>		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

Schedule F (Form 990) 2022 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)
	(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
SCHEDULE	F, PART 1, LINE 3
ALL FORE	IGN INVESTMENTS ARE INDIRECTLY HELD THROUGH PASS-THROUGH
	100 1117 DIMENTO INC. INDIVIDUELLI INC. INC. INC. INC.
ENTITIES	THAT ARE DOMICILED IN THE UNITED STATES.
-	
-	
-	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

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

Attach to Form 990.

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

Open to Public Inspection

Name of the organization THE GREATER NI	EW ORLEANS FO	JNDATION					**-***8921
Part I General Information on Grants a	nd Assistance						
Does the organization maintain records to criteria used to award the grants or assis Describe in Part IV the organization's propert II Grants and Other Assistance to	stance? ocedures for mon	itoring the use of grant	t funds in the United	d States.			Yes X No
recipient that received more than 9	_				ariizatiori ariswered	res on Form 990, Far	tiv, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
100 BLACK MEN OF METROPOLITIAN BATON ROUGE - PO BOX 2286 - BATON ROUGE, LA 70821	**-***5682	501C3	7,500.	0.			FUND RAISING & FUND DISTRIBUTION
18TH WARD SPORTS CLUB 3329 BELL STREET NEW ORLEANS, LA 70119	**-***3703	501C3	52,585.	0.			YOUTH DEVELOPMENT
504HEALTHNET 2701 AIRLINE DRIVE, SUITE K #140 METAIRIE, LA 70001	**-***1459	501 C 3	50,152.	0.			HEALTH
5116 MAGAZINE STREET PREPARATORY HIGH SCHOOL - 5116 MAGAZINE STREET - NEW ORLEANS, LA 70115	**-***3909	501 C 3	5,948.	0.			EDUCATION
826 NEW ORLEANS 1750 SAINT BERNARD AVENUE NEW ORLEANS, LA 70116	**_***3923	501C3	23,815.	0.			FUND RAISING & FUND DISTRIBUTION
ACADEMY OF THE SACRED HEART NEW ORLEANS FOUNDATION, INC 4521 SAINT CHARLES AVENUE - NEW ORLEANS, LA 70115	**-***6786		156,244.	0.			EDUCATION
2 Enter total number of section 501(c)(3) a3 Enter total number of other organizations							

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACLU FOUNDATION OF LOUISIANA 1340 POYDRAS STREET, SUITE 2160 NEW ORLEANS, LA 70112	** ₋ ***7944	50103	56,988.	0.			PUBLIC/SOCIETY BENEFIT
ADVOCATES FOR ACADEMIC EXCELLENCE IN EDUCATION - 2001 LEON C SIMON DRIVE - NEW ORLEANS, LA 70122	**_***9970	50103	55,250.	0.			EDUCATION
AFP GREATER NEW ORLEANS CHAPTER P. O. BOX 969 PEARL RIVER, LA 70452	**-***8246	501 c 3	15,000.	0.			PUBLIC/SOCIETY BENEFIT
ALAS 3612 BANKS STREET NEW ORLEANS, LA 70119	**-***4330	501 c 3	22,330.	0.			CIVIC ENGAGEMENT
ALEXANDER MILNE DEVELOPMENTAL SERVICES - 1065 MILNE CIRCLE - COVINGTON, LA 70435	**-***1790	501 c 3	9,340.	0.			FUND RAISING & FUND DISTRIBUTION
ALGIERS CHARTER SCHOOL ASSOCIATION 2401 WESTBEND PARKWAY, SUITE 2001 NEW ORLEANS, LA 70114	**-***7902	501 c 3	20,437.	0.			EDUCATION
ALLIANCE FOR AFFORDABLE ENERGY 4505 S CLAIBORNE AVENUE NEW ORLEANS, LA 70125	**-***7834	501 c 3	5,186.	0.			FUND RAISING & FUND DISTRIBUTION
ALLIANCE FOR CHOICE IN EDUCATION 1201 E. COLFAX AVENUE, SUITE 302 DENVER, CO 80218	**-***1066	501C3	1,000,000.	0.			EDUCATION
ALLIANCE FRANCAISE DE LA NOUVELLE ORLEANS - 1519 JACKSON AVENUE - NEW ORLEANS, LA 70130	**-***2908	501C3	7,247.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALTERNATE ROOTS 1270 CAROLINE STREET, SUITE D120-3 ATLANTA, GA 30307	**-***8198	501C3	10,000.	0.			ARTS/CULTURE
AMALGAMATED CHARITABLE FOUNDATION INC 1825 K STREET NW - WASHINGTON, DC 20006	**-***7696	501C3	25,500.	0.			PHILANTHROPY
AMERICAN CANCER SOCIETY INC. 3380 CHASTAIN MEADOWS PKWY NW, SUI KENNESAW, GA 30144	**-***8491	501C3	14,663.	0.			HEALTH
AMERICAN HEART ASSOCIATION 110 VETERANS MEMORIAL BLVD., SUITE METAIRIE, LA 70005	**_***3797	501C3	7,455.	0.			HEALTH
AMERICAN LEGION POST 195 P. O. BOX 386 NORCO, LA 70079	**-***5381	501C19	13,212.	0.			PUBLIC/SOCIETY BENEFIT
AMERICAN NATIONAL RED CROSS 431 18TH ST NW WASHINGTON, DC 20006	**-***6605	501C3	41,518.	0.			HUMAN SERVICES
AMIS DU LYCEE FRANCAIS 5951 PATTON STREET NEW ORLEANS, LA 70115	**-***5306	501C3	9,631.	0.			EDUCATION
AMISTAD RESEARCH CENTER 6823 ST. CHARLES AVENUE NEW ORLEANS, LA 70118	**-***9313	501C3	21,505.	0.			FUND RAISING & FUND DISTRIBUTION
ANGEL'S PLACE, INC. 4323 DIVISION STREET, SUITE 206 METAIRIE, LA 70002	**-***2739	501C3	8,996.	0.			FUND RAISING & FUND DISTRIBUTION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL RESCUE NEW ORLEANS, INC. 1219 COLISEUM STREET NEW ORLEANS, LA 70130	**-***9173	50103	40,747.	0.			FUND RAISING & FUND DISTRIBUTION
ANTI-DEFAMATION LEAGUE- SOUTH CENTRAL OFFICE - 935 GRAVIER STREET, SUITE 1625 - NEW ORLEANS, LA 70112	**-***8723	501C3	28,501.	0.			PUBLIC/SOCIETY BENEFIT
ARC OF GREATER NEW ORLEANS 925 S LABARRE ROAD METAIRIE, LA 70001	**-***6903	501c3	8,516.	0.			FUND RAISING & FUND DISTRIBUTION
ARISE SCHOOLS 6701 CURRAN BLVD. NEW ORLEANS, LA 70126	**-***0588	501c3	20,310.	0.			EDUCATION
ARTS COUNCIL OF NEW ORLEANS P.O. BOX 58379 NEW ORLEANS, LA 70158	**-***8258	501C3	116,506.	0.			ARTS/CULTURE
ARTSPOT PRODUCTIONS 1226 N ROCHEBLAVE STREET NEW ORLEANS, LA 70119	**_***9547	501C3	5,364.	0.			ARTS/CULTURE
ASPEN COUNTRY DAY SCHOOL 85 COUNTRY DAY WAY ASPEN, CO 81611	**_***3239	501C3	10,000.	0.			EDUCATION
ASSOCIATION TO BENEFIT CHILDREN 419 E 86TH STREET NEW YORK, NY 10028	**_***3089	501C3	20,250.	0.			YOUTH DEVELOPMENT
AUBURN UNIVERSITY FOUNDATION 317 SOUTH COLLEGE STREET AUBURN, AL 36849	**-***2422	501c3	10,000.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUDUBON MONTESSORI SCHOOL							
428 BROADWAY STREET							
NEW ORLEANS, LA 70118	**-***4026	501C3	23,547.	0.			EDUCATION
AUDUBON NATURE INSTITUTE INC							
6500 MAGAZINE STREET							
NEW ORLEANS, LA 70118	**-***7624	501C3	160,205.	0.			PUBLIC/SOCIETY BENEFIT
BARRANS BEARS INC							
709 HENRY LANDRY AVENUE							
METAIRIE, LA 70003	**-***9106	501C3	26,000.	0.			YOUTH DEVELOPMENT
BASTION COMMUNITY OF RESILIENCE							
1901 MIRABEAU AVENUE							
NEW ORLEANS, LA 70122	**-***3654	501C3	12,919.	0.			PUBLIC/SOCIETY BENEFIT
,							
BAY WAVELAND YACHT CLUB COMMUNITY							
SAILING FOUNDATION - 1 YACHT CLUB							
DRIVE - BAY ST. LOUIS, MS 39520	**-***5225	501C3	8,000.	0.			ARTS/CULTURE
BAYOU COMMUNITY FOUNDATION							
PO BOX 582							
HOUMA, LA 70361	**-***5950	501C3	300,452.	0.			PHILANTHROPY
DE LOUD GRUDTOG							
BE LOUD STUDIOS							EIIND DATCING C EIIND
1668 N GAYOSO STREET	**-***2865	501C3	53,141.	0.			FUND RAISING & FUND DISTRIBUTION
NEW ORLEANS, LA 70119	- 2003	50103	33,141.	0.			DISTRIBUTION
BE NOLA (BLACK EDUCATION FOR NEW							
ORLEANS) - PO BOX 52436 - NEW							
ORLEANS, LA 70152	**-***6823	501C3	7,955.	0.			EDUCATION
BE TRI FOR US							
4128 LINWOOD STREET							
SARASOTA, FL 34232	**-***2406	501C3	8,000.	0.			YOUTH DEVELOPMENT

Part II Continuation of Grants and Other			s and Domostic C	overnments (Cab	adula I (Form 000) Da		"-""8921 Page
Part II Continuation of Grants and Other				overnments (Sche	edule i (Form 990), Pa	ur II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLTOWER NEW ORLEANS							
625 SAINT CHARLES AVENUE, APT 7A							
NEW ORLEANS, LA 70130	**-***4425	501C3	250,000.	0.			EDUCATION
BERKELEY HIGH SCHOOL DEVELOPMENT							
GROUP - PO BOX 519 - BERKELEY, CA							
94701	**-***3406	501C3	10,000.	0.			EDUCATION
BETTER FAMILY LIFE							
2111 DUMAINE STREET, #204							
NEW ORLEANS, LA 70116	**-***6617	501C3	20,000.	0.			PUBLIC/SOCIETY BENEFIT
DIG ENGY ANIMAL DEGGLE							
BIG EASY ANIMAL RESCUE 513 DUMAINE STREET							
NEW ORLEANS, LA 70116	**-***1176	501C3	11,838.	0.			ANIMALS
NEW ORLEANS, LA 70116	- 1176	501C3	11,838.	0.			ANIMALS
BIKE EASY							
2100 ORETHA CASTLE HALEY BLVD.							FUND RAISING & FUND
NEW ORLEANS, LA 70113	**-***0169	501C3	17,635.	0.			DISTRIBUTION
BIRDFOOT CHAMBER MUSIC FESTIVAL							L
501 MOSS STREET, UNIT 792139	** ****	504.50	04.540				FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***1337	501C3	24,518.	0.			DISTRIBUTION
BLACK BOYS READ NOLA							
5533 DURHAM DRIVE							
NEW ORLEANS, LA 70131	**-***5913	501C3	10,993.	0.			EDUCATION
,							
BLUE KREWE							
420 N. WHITE STREET							
NEW ORLEANS, LA 70119	**-***0272	501C3	22,497.	0.			PUBLIC/SOCIETY BENEFIT
BOY SCOUTS OF AMERICA SE LOUISIANA							
COUNCIL - 4200 S. I-10 SERVICE							
ROAD WEST, SUITE 101 - METAIRIE,							
LA 70001	**-***8954	501C3	12,060.	0.			YOUTH DEVELOPMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS HOPE GIRLS HOPE							
РО ВОХ 19307							
NEW ORLEANS, LA 70179	**-***5785	501C3	79,863.	0.			YOUTH DEVELOPMENT
BOYS TOWN LOUISIANA							
300 N. BROAD STREET, SUITE 106							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***0807	501C3	37,944.	0.			DISTRIBUTION
BRAIN INJURY ASSOCIATION LOUISIANA							
CHAPTER - 3433 HIGHWAY 190, SUITE							
270 - MANDEVILLE, LA 70471	**-***1089	501C3	8,127.	0.			HEALTH
DETGOLAGE AGADEMY							
BRICOLAGE ACADEMY							
2426 ESPLANADE AVENUE	**-***2748	E0102	6 970	0			EDIICA MTON
NEW ORLEANS, LA 70119	2/40	501C3	6,870.	0.			EDUCATION
BRIDGE HOUSE							
4150 EARHART BLVD.							
NEW ORLEANS, LA 70125	**-***7674	501C3	129,826.	0.			HUMAN SERVICES
DDIGUM COUCOI FOR MUE DEVE							
BRIGHT SCHOOL FOR THE DEAF 141 ALLEN TOUSSAINT BLVD., SUITE 1							FUND RAISING & FUND
NEW ORLEANS, LA 70124	**-***8259	501C3	65,724.	0.			DISTRIBUTION
illi Gallinio, Eli 70121	0233	30103	03,721.	<u> </u>			
BROAD COMMUNITY CONNECTIONS, INC.							
300 N BROAD STREET, SUITE 208							
NEW ORLEANS, LA 70119	**-***4397	501C3	25,000.	0.			COMMUNITY IMPROVEMENT
BROTHER MARTIN HIGH SCHOOL							
4401 ELYSIAN FIELDS AVENUE	++ +++0405	501.73	F2 F2.				
NEW ORLEANS, LA 70122	**-***0486	501C3	53,794.	0.			EDUCATION
BUNNY FRIEND NEIGHBORHOOD							
ASSOCIATION - 1812 CONGRESS STREET							
- NEW ORLEANS, LA 70117	**-***3286	501C3	92,000.	0.			COMMUNITY IMPROVEMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUREAU OF GOVERNMENTAL RESEARCH,							
INC 1055 SAINT CHARLES AVENUE,							
SUITE 200 - NEW ORLEANS, LA 70130	**-***8914	501C3	104,413.	0.			PUBLIC/SOCIETY BENEFIT
BW RESEARCH FOUNDATION							
19 KENDRICK STREET							
WRENTHAM, MA 02903	**-***4861	501C3	39,950.	0.			ECONOMIC DEVELOPMENT
CAFE HOPE							
PO BOX 2021							
MARRERO, LA 70073	**-***3365	501C3	28,601.	0.			ECONOMIC DEVELOPMENT
CAFE RECONCILE							
1631 ORETHA HALEY BLVD.							
NEW ORLEANS, LA 70113	**-***1294	501C3	66,928.	0.			ECONOMIC DEVELOPMENT
,			,				
CAMELBACK VENTURES							
612 ANDREW HIGGINS DRIVE, FLOOR 3							
NEW ORLEANS, LA 70130	**-***9470	501C3	55,000.	0.			COMMUNITY IMPROVEMENT
CAPITAL CITY PRESS, LLC (DBA THE							
ADVOCATE) - 10705 RIEGER ROAD -							
BATON ROUGE, LA 70809	**-***6160	N/A	118,750.	0.			ARTS/CULTURE
CARROLLTON BOOSTER CLUB, INC.							
P.O. BOX 4165							FUND RAISING & FUND
NEW ORLEANS, LA 70178	**-***7078	501C3	5,300.	0.			DISTRIBUTION
nan enamme, an retre	7373	30103	3,300.	•			
CATHOLIC CHARITIES ARCHDIOCESE OF							
N.O P. O. BOX 58009 - NEW							
ORLEANS, LA 70158	**-***8911	501C3	707,639.	0.			PUBLIC/SOCIETY BENEFIT
CATHOLIC COMMUNITY FOUNDATION OF							
THE ARCHDIOCESE OF NEW ORLEANS -							
7887 WALMSLEY AVE - NEW ORLEANS,							
LA 70125	**-***0256	501C3	13,819.	0.			PUBLIC/SOCIETY BENEFIT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC FOUNDATION OF SOUTH							
LOUISIANA - PO BOX 505 -							
SCHRIEVER, LA 70395	**-***1690	501C3	20,956.	0.			PUBLIC/SOCIETY BENEFIT
CATHOLIC RELIEF SERVICES							
P.O. BOX 17090							
BALTIMORE, MD 21297	**-***3422	501C3	6,250.	0.			PUBLIC/SOCIETY BENEFIT
CATNIP (CARE AND TREATMENT OF							
NEGLECTED AND INDIGENT PETS) -							
82060 HIGHWAY 25 - FOLSOM, LA							FUND RAISING & FUND
70437	**-***8787	501C3	45,002.	0.			DISTRIBUTION
CENTER FOR GREAT APES							
P.O. BOX 488				_			
WAUCHULA, FL 33873	**-***4725	501C3	15,000.	0.			ANIMALS
CENTER FOR RESILIENCE							
1035 CALHOUN STREET							
NEW ORLEANS, LA 70118	**-***6904	501C3	141,553.	0.			HUMAN SERVICES
NEW ORDEANS, DA 70110	- 0304	50103	141,555.	0.			HOMAN SERVICES
CHILDREN'S BUREAU OF NEW ORLEANS							
935 CALHOUN STREET, SUITE 101							
NEW ORLEANS, LA 70118	**-***8916	501C3	32,347.	0.			HUMAN SERVICES
			<u>'</u>				
CHILDREN'S HOSPITAL							
200 HENRY CLAY AVENUE							
NEW ORLEANS, LA 70118	**-***7503	501C3	221,070.	0.			HEALTH
CHRIST EPISCOPAL CHURCH							
129 N. NEW HAMPSHIRE STREET							
COVINGTON, LA 70433	**-***3945	501C3	6,106.	0.			PUBLIC/SOCIETY BENEFIT
CHRIST EPISCOPAL SCHOOL							
80 CHRISTWOOD BOULEVARD	** ******	504.50	4-5-4-5	_			L
COVINGTON, LA 70433	**-***2238	501C3	173,140.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRIST SCHOOL 500 CHRIST SCHOOL ROAD							
ARDEN, NC 28704	**-***5187	501C3	36,000.	0.			EDUCATION
CHRISTIAN BROTHERS SCHOOL 8 FRIEDERICHS AVENUE NEW ORLEANS, LA 70124	**-***1255	501c3	9,291.	0.			EDUCATION
CHROMOSOME 18 REGISTRY AND RESEARCH SOCIETY - 7155 OAKRIDGE DRIVE - SAN ANTONIO, TX 78229	**-***7551	501C3	10,000.	0.			HEALTH
CHURCH OF THE GOOD SHEPHERD PO BOX 32 CASHIERS, NC 28717	**-***8469	501C3	5,814.	0.			PUBLIC/SOCIETY BENEFIT
CITY YEAR NEW ORLEANS 3400 ST. CLAUDE AVENUE NEW ORLEANS, LA 70117	**-***2549	501C3	19,308.	0.			FUND RAISING & FUND DISTRIBUTION
CLEARWATER WILDLIFE SANCTUARY PO BOX 2334 COVINGTON, LA 70434	**-***2121	501 c 3	46,241.	0.			ENVIRONMENT
CLOVER NOLA, INC. 1600 CONSTANCE STREET NEW ORLEANS, LA 70130	**-***8940	501C3	127,366.	0.			COMMUNITY IMPROVEMENT
COALITION TO RESTORE COASTAL LOUISIANA - 3801 CANAL STREET, SUITE 400 - NEW ORLEANS, LA 70119	**-***5589	501C3	83,759.	0.			ENVIRONMENT
COASTAL COMMUNITIES CONSULTING, INC 925 BEHRMAN HIGHWAY, SUITE 15 - GRETNA, LA 70056	**-***2312	501c3	79,738.	0.			COMMUNITY IMPROVEMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COASTAL CONSERVATION ASSOCIATION OF FLORIDA - P.O. BOX 568886 - ORLANDO, FL 32806	**-***3890	501C3	10,000.	0.			ENVIRONMENT
COLLEGE TRACK NEW ORLEANS 112 LINDEN STREET DAKLAND, CA 94607	**-***9613	501C3	38,366.	0.			FUND RAISING & FUND DISTRIBUTION
COLLEGIATE ACADEMIES 7301 DWYER ROAD JEW ORLEANS, LA 70113	**-***1507	501C3	9,965.	0.			EDUCATION
COLUMBIA UNIVERSITY ALUMNI CENTER 522 WEST 113TH STREET, MC 4524 NEW YORK, NY 10025	**-***8093	501C3	7,700.	0.			FUND RAISING & FUND DISTRIBUTION
COMMITTEE FOR A BETTER NEW ORLEANS P.O. BOX 791570 NEW ORLEANS, LA 70179	**-***5656	501C3	32,707.	0.			PUBLIC/SOCIETY BENEFIT
COMMUNITIES IN SCHOOLS OF THE GULF SOUTH, INC 3400 BIENVILLE STREET, SUITE B - NEW ORLEANS, LA 20119	**-***7054	501C3	22,762.	0.			EDUCATION
COMMUNITY CENTER OF ST. BERNARD PO BOX 1307 CHALMETTE, LA 70044	**-***3649	501C3	30,816.	0.			PUBLIC/SOCIETY BENEFIT
COMMUNITY FOUNDATION FOR NANTUCKET PO BOX 204 NANTUCKET, MA 02554	**-***6755	501C3	25,000.	0.			COMMUNITY IMPROVEMENT
COMMUNITY SAILING NEW ORLEANS, INC 101 NORTH ROADWAY STREET - NEW ORLEANS, LA 70124	**-***2411	501c3	20,888.	0.			ARTS/CULTURE

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY WORKS OF LOUISIANA 3900 GENERAL TAYLOR, SUITE 206 NEW ORLEANS, LA 70125	**-***2656	50103	7,669.	0.			FUND RAISING & FUND DISTRIBUTION
CONTEMPORARY ARTS CENTER 900 CAMP STREET, SUITE 359 NEW ORLEANS, LA 70130	**-***8830	50103	102,322.	0.			ARTS/CULTURE
CORPORATE INTERNSHIP LEADERSHIP INSTITUTE - 3157 GENTILLY BLVD., SUITE 2184 - NEW ORLEANS, LA 70122	**-***6965	501 c 3	38,046.	0.			CIVIC ENGAGEMENT
COUNCIL ON ALCOHOL & DRUG ABUSE FOR G.N.O 2601 TULANE AVENUE, SUITE 945 - NEW ORLEANS, LA 70119	**-***1502	501c3	30,712.	0.			HEALTH
COURT WATCH NOLA P.O. BOX 750633 NEW ORLEANS, LA 70175	**-***0644	501c3	6,468.	0.			PUBLIC/SOCIETY BENEFIT
COVENANT HOUSE NEW ORLEANS 511 N RAMPART STREET NEW ORLEANS, LA 70112	**_***9937	501c3	207,780.	0.			HUMAN SERVICES
CRESCENT CITY CAFE P.O. BOX 850524 NEW ORLEANS, LA 70185	**_***6736	501c3	26,571.	0.			FOOD/NUTRITION
CRESCENT CITY CHAMBER MUSIC FESTIVAL - 330 WAGNER STREET - NEW ORLEANS, LA 70114	**-***0640	501 c 3	10,000.	0.			arts/culture
CRESCENT CITY SCHOOLS 3811 NORTH GALVEZ STREET NEW ORLEANS, LA 70117	**-***1737	501C3	19,425.	0.			EDUCATION

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CRESCENT CITY STAGE 3430 COLISEUM STREET NEW ORLEANS, LA 70115	**-***7824	501C3	12,413.	0.			ARTS/CULTURE
CRIMESTOPPERS, INC. P.O. BOX 55249 METAIRIE, LA 70055	**-***1292	501C3	9,344.	0.			PUBLIC/SOCIETY BENEFIT
CROSSFIRE CHURCH 2020 ELSIE AVENUE SLIDELL, LA 70458	**-***8301	501C3	25,200.	0.			PUBLIC/SOCIETY BENEFIT
CROSSROADS NOLA 5290 CANAL BLVD. NEW ORLEANS, LA 70124	**-***6441	501C3	16,006.	0.			FUND RAISING & FUND DISTRIBUTION
DANA FARBER CANCER INSTITUTE P.O. BOX 849168 BOSTON, MA 02284	**-***3040	501C3	31,000.	0.			HEALTH
DANCING GROUNDS 3705 SAINT CLAUDE AVENUE NEW ORLEANS, LA 70117	**-***4235	501C3	39,644.	0.			ARTS/CULTURE
DAT SCHOOL 2231 ARTS STREET NEW ORLEANS, LA 70117	**-***3367	501C3	19,358.	0.			EDUCATION
DAUGHTERS BEYOND INCARCERATION 612 ANDREW HIGGINS, FLOOR 2 NEW ORLEANS, LA 70130	**-***5514	501C3	73,090.	0.			FUND RAISING & FUND DISTRIBUTION
DE LA SALLE HIGH SCHOOL 5300 SAINT CHARLES AVENUE NEW ORLEANS, LA 70115	**-***1487	501C3	27,692.	0.			EDUCATION

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DELGADO COMMUNITY COLLEGE							
615 CITY PARK AVENUE, BUIDLING 37							
NEW ORLEANS, LA 70119	**-***3204	501C3	204,276.	0.			EDUCATION
DEUTSCHES HAUS							
1700 MOSS STREET							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***9334	501C3	12,929.	0.			DISTRIBUTION
DIGNITY PERIOD							
1036 DAUTEL LANE							
ST. LOUIS, MO 63146	**-***5149	501C3	200,000.	0.			HEALTH
DILLARD UNIVERSITY							
2601 GENTILLY BLVD.							
NEW ORLEANS, LA 70122	**-***8929	501C3	16,081.	0.			EDUCATION
DISABILITY RIGHTS LOUISIANA							
8325 OAK STREET							
NEW ORLEANS, LA 70118	**-***5271	501C3	33,865.	0.			SOCIAL SERVICES
DISCOVERY HEALTH SCIENCES							
FOUNDATION - 2504 MAINE AVENUE -							
METAIRIE, LA 70003	**-***1886	501C3	12,722.	0.			HEALTH
DOCTORS WITHOUT BORDERS							
PO BOX 5030							
HAGERSTOWN, MD 21741	**-***3452	501C3	135,228.	0.			HEALTH
DOMINICAN SISTERS OF PEACE-PEACE							
CENTER - 2837 BROADWAY STREET -	**-***0703	501C3	21 117	_			DIDI TO/COCTEMY DENTETT
NEW ORLEANS, LA 70125	- "0/03	50163	21,117.	0.			PUBLIC/SOCIETY BENEFIT
DREXEL PREP FOUNDATION							
P O BOX 19112				_			FUND RAISING & FUND
NEW ORLEANS, LA 70179	**-***8475	501C3	21,710.	0.			DISTRIBUTION

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DUCKS UNLIMITED							
1 WATERFOWL WAY							
MEMPHIS, TN 38120	**-***4065	501C3	60,100.	0.			ENVIRONMENT
DULAC COMMUNITY CENTER							
125 COAST GUARD ROAD							
DULAC, LA 70353	**-***9028	501C3	15,698.	0.			PUBLIC/SOCIETY BENEFIT
EARLY LEARNING CENTER OF WOODLAND							
PRESBYTERIAN CHURCH - 5824 BERKLEY							
DRIVE - NEW ORLEANS, LA 70131	**-***5584	501C3	5,319.	0.			EDUCATION
EADLY DADWIND G							
EARLY PARTNERS							
1377 ANNUNCIATION STREET	**-***3307	501C3	152 102	0.			EDUCATION
NEW ORLEANS, LA 70130	- 3307	50103	152,102.	0.			EDUCATION
EASTER SEALS LOUISIANA							
935 GRAVIER STREET, SUITE 720							
NEW ORLEANS, LA 70112	**-***4376	501C3	19,674.	0.			SOCIAL SERVICES
ECHO COMMUNITY							
PO BOX 251							FUND RAISING & FUND
MANDEVILLE, LA 70470	**-***9973	501C3	500,000.	0.			DISTRIBUTION
	22.0						
ECOLE BILINGUE DE LA NOUVELLE							
ORLEANS - 812 GENERAL PERSHING							FUND RAISING & FUND
STREET - NEW ORLEANS, LA 70115	**-***0328	501C3	34,348.	0.			DISTRIBUTION
EDEN HANGE							
EDEN HOUSE							
P.O. BOX 750386	**-***3791	501C3	40 622	_			HOLICING / CHEL MED
NEW ORLEANS, LA 70175		00103	40,633.	0.			HOUSING/SHELTER
EDUCARE NEW ORLEANS							
3801 ST. BERNARD AVENUE							
NEW ORLEANS, LA 70122	**-***8164	501C3	18,387.	0.			EDUCATION

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EDUCATORS FOR QUALITY ALTERNATIVES							
1614 ORETHA CASTLE HALEY BLVD.							
NEW ORLEANS, LA 70113	**-***8087	501C3	7,325.	0.			ARTS/CULTURE
EFFORTS OF GRACE, INC.							
1712 ORETHA CASTLE HALEY BLVD.							
NEW ORLEANS, LA 70113	**-***6819	501C3	33,353.	0.			ARTS/CULTURE
EL CENTRO							
1334 EARHART BLVD., SUITE 700							
NEW ORLEANS, LA 70125	**-**8926	501C3	50,000.	0.			COMMUNITY IMPROVEMENT
ELECTRIC GIRLS							
2045 LAKESHORE DRIVE, SUITE 352				_			FUND RAISING & FUND
NEW ORLEANS, LA 70122	**-***5170	501C3	42,506.	0.			DISTRIBUTION
ELLA PROJECT							
100 ESPLANADE AVENUE							FUND RAISING & FUND
NEW ORLEANS, LA 70116	**-***2048	501C3	7,342.	0.			DISTRIBUTION
ELLIS MARSALIS CENTER FOR MUSIC							
1901 BARTHOLOMEW STREET							
NEW ORLEANS, LA 70117	**-***8706	501C3	40,467.	0.			ARTS/CULTURE
	0,00		10,107.				
EMERGING PHILANTHROPISTS OF NEW							
ORLEANS, INC 919 ST. CHARLES							FUND RAISING & FUND
AVENUE - NEW ORLEANS, LA 70130	**-***6859	501C3	42,560.	0.			DISTRIBUTION
EN-HACORE COMMUNITY CENTER AND							
DRIENTATIONS (ECCO) - 4334 EARHART							
BLVD., SUITE 706 - NEW ORLEANS, LA							
70125	**-***3019	501C3	11,822.	0.			PUBLIC/SOCIETY BENEFI
ENTERPRISE COMMUNITY PARTNERS							
70 CORPORATE CENTER, 11000 BROKEN							
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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ENVIRONMENTAL DEFENSE FUND 1875 CONNECTICUT AVENUE NW, #600 WASHINGTON, DC 20009	**-***7128	501C3	5,900.	0.			ENVIRONMENT
EPISCOPAL HIGH SCHOOL OF BATON ROUGE - 3200 WOODLAND RIDGE BLVD. - BATON ROUGE, LA 70816	**-***0540	501C3	10,000.	0.			EDUCATION
EQUAL JUSTICE INITIATIVE 122 COMMERCE STREET MONTGOMERY, AL 36104	**-***5091	501C3	5,200.	0.			CIVIC ENGAGEMENT
ETERNAL SEEDS 56 YELLOWSTONE DRIVE NEW ORLEANS, LA 70131	**-***9102	501C3	33,511.	0.			YOUTH DEVELOPMENT
F&L ORGANIZATIONAL SUPPORT SERVICES, INC. (F.L.O.S.S.) - P O BOX 872436 - NEW ORLEANS, LA 70187	**-***1951	501C3	17,426.	0.			COMMUNITY IMPROVEMENT
PAMILIAS UNIDAS EN ACCION 2852 ALLEN STREET NEW ORLEANS, LA 70119	**-***6275	501C39	25,000.	0.			HOUSING/SHELTER
FAMILIES AND FRIENDS OF LOUISIANA'S INCARCERATED CHILDREN - P.O. BOX 56877 - NEW ORLEANS, LA 70156	**-***4561	501C3	27,886.	0.			FUND RAISING & FUND DISTRIBUTION
FAMILIES HELPING FAMILIES NOLA 2401 WESTBEND PARKWAY, SUITE 3090 NEW ORLEANS, LA 70114	**-***6650	501C3	20,000.	0.			HUMAN SERVICES
FAMILY VIOLENCE PROGRAM OF ST. BERNARD - P.O. BOX 7 - ARABI, LA 70032	**_** <u>*</u>	501C3	10,000.	0.			PUBLIC/SOCIETY BENEFIT

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Part II Continuation of Grants and Other	er Assistance to Do	omestic Organization	is and Domestic G	overnments (Scho	eaule I (Form 990), Pa I	ат II.) Т	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEIRO MARINE LIFE CENTER							
917 EAST FRONT STREET							
PORT ANGELES, WA 98362	**-***7956	501C3	600,000.	0.			PUBLIC/SOCIETY BENEFIT
FIRST GRACE COMMUNITY ALLIANCE							
3401 CANAL STREET	**-***7178	501C3	47 252	0			UIIMANI CEDUTCEC
NEW ORLEANS, LA 70119	/1/8	501C3	47,352.	0.			HUMAN SERVICES
FIRSTLINE SCHOOLS, LLC							
300 N BROAD STREET, SUITE 207							
NEW ORLEANS, LA 70119	**-***9800	501C3	15,645.	0.			EDUCATION
FLEUR DE QUE							
PO BOX 750018	** ****	504.50					
NEW ORLEANS, LA 70175	**-***2054	501C3	22,257.	0.			COMMUNITY IMPROVEMENT
FOOD BANK OF EAST ALABAMA INC							
355 INDUSTRY DRIVE							
AUBURN, AL 36832	**-***2492	501C3	10,000.	0.			FOOD/NUTRITION
FOR PROVIDERS BY PROVIDERS							
1678 N BROAD STREET	** *****						
NEW ORLEANS, LA 70119	**-***4378	501C3	9,118.	0.			EDUCATION
FORE! KIDS FOUNDATION, INC.							
11005 LAPALCO BLVD.							
AVONDALE, LA 70094	**-***0111	501C3	21,500.	0.			YOUTH DEVELOPMENT
			, -	<u> </u>			
FORUM FOR EQUALITY FOUNDATION							
4519 S CLAIBORNE AVENUE							
NEW ORLEANS, LA 70125	**-***9734	501C3	15,140.	0.			DIVERSITY
FOUNDATION FOR LOUISIANA							
2022 ST. BERNARD AVENUE	**-***9944	501C3	160 100	0.			PHILANTHROPY
NEW ORLEANS, LA 70116	" - " 9944	D01C3	169,100.	l ".			PHILANTHROPY

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR SCIENCE &							
MATHEMATICS EDUCATION - 2011							
BIENVILLE STREET - NEW ORLEANS, LA							
70112	**-***7170	501C3	14,099.	0.			EDUCATION
FRENCH QUARTER FESTIVAL INC.							
400 N PETERS STREET, SUITE 205							
NEW ORLEANS, LA 70130	**-***6163	501C3	7,114.	0.			ARTS/CULTURE
FRIENDS OF A STUDIO IN THE WOODS							
13401 PATTERSON ROAD							
NEW ORLEANS, LA 70131	**-***2728	501C3	9,869.	0.			ARTS/CULTURE
FRIENDS OF BEAUREGARD KEYES HOUSE							
1113 CHARTRES STREET							
NEW ORLEANS, LA 70116	**-***3509	501C3	5,977.	0.			ARTS/CULTURE
Man Calling, In 70110	3303	50103	3,311.	<u> </u>			INCID/ COLITORE
FRIENDS OF BEN FRANKLIN CHARTER							
HIGH SCHOOL - 2001 LEON C. SIMON							
DRIVE - NEW ORLEANS, LA 70122	**-***9067	501C3	92,327.	0.			EDUCATION
,			1	<u> </u>			
FRIENDS OF CITY PARK							
1 PALM DRIVE							
NEW ORLEANS, LA 70124	**-***5507	501C3	137,137.	0.			PUBLIC/SOCIETY BENEFIT
FRIENDS OF CODEY'S NOLA							
4228 EVE STREET	** ***			_			L ,
NEW ORLEANS, LA 70125	**-***2721	501C3	8,259.	0.			FOOD/NUTRITION
FRIENDS OF LAFITTE CORRIDOR							
P.O. BOX 701727							
NEW ORLEANS, LA 70179	**-***5500	501C3	75,727.	0.			COMMUNITY IMPROVEMENT
		1	,3,727.	•••			
FRIENDS OF LUBAVITCH, INC.							
7037 FRERET STREET							
NEW ORLEANS, LA 70118	**-***1958	501C3	10,000.	0.			HUMAN SERVICES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF RIVERTOWN THEATERS 325 MINOR STREET	**_***3534	501C3	E 207	0			Apms / CITI MITE
KENNER, LA 70062	3534	501C3	5,287.	0.			ARTS/CULTURE
FRIENDS OF THE CABILDO 701 CHARTRES STREET NEW ORLEANS, LA 70116	**-***7414	501C3	11,661.	0.			arts/culture
FRIENDS OF THE LOUISIANA CENTER FOR WOMEN AND GOVERNMENT - PO BOX 2062 - THIBODAUX, LA 70310	**-***3491	501C3	25,000.	0.			CIVIC ENGAGEMENT
FRIENDS OF THE NEW ORLEANS FIRE DEPARTMENT - 317 DECATUR STREET - NEW ORLEANS, LA 70130	**-***4170	501C3	41,727.	0.			PUBLIC/SOCIETY BENEFIT
FRIENDS OF THE NEW ORLEANS PUBLIC LIBRARY - 219 LOYOLA AVENUE - NEW DRLEANS, LA 70112	**-***8003	501C3	32,116.	0.			EDUCATION
FUND 17 2533 COLUMBUS STREET, SUITE 100 NEW ORLEANS, LA 70119	**-***2881	501C3	53,709.	0.			COMMUNITY IMPROVEMENT
GEAUX GIRL MEDIA 1917 ANNUNCIATION STREET NEW ORLEANS, LA 70115	**_***9837	501C3	7,974.	0.			ARTS/CULTURE
GIVE ONE DOLLAR A DAY 36 CRANE DRIVE SAN ANSELMO, CA 94960	**-***8957	501C3	10,000.	0.			SOCIAL SERVICES
GIVING HOPE INC. 13040 I-10 SERVICE ROAD NEW ORLEANS, LA 70128	**-***9360	501C3	47,800.	0.			FUND RAISING & FUND DISTRIBUTION

Part II Continuation of Grants and Other	Assistance to Do		s and Domestic G	overnments (Sch	edule I (Form 990) Pa		"-""8921 Pag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLADEWAVES, INC. 4505 S. CLAIBORNE AVENUE NEW ORLEANS, LA 70125	**-***3254	501C3	6,627.	0.			FUND RAISING & FUND DISTRIBUTION
GLASSROOTS 3935 LOUISA STREET NEW ORLEANS, LA 70126	**-***6629	501C3	5,291.	0.			FUND RAISING & FUND DISTRIBUTION
GO.BE. 2016 ORETHA CASTLE HALEY BLVD. NEW ORLEANS, LA 70113	**-***9442	501c3	102,384.	0.			FUND RAISING & FUND DISTRIBUTION
GOAT IN THE ROAD PRODUCTIONS 609 ST. FERDINAND STREET NEW ORLEANS, LA 70117	**-***8111	501 c 3	13,077.	0.			FUND RAISING & FUND DISTRIBUTION
GOLDEN CROWN LITERARY SOCIETY P.O. BOX 662 NORTHFIELD, MN 55057	**-***7315	501C3	100,000.	0.			EDUCATION
GOOD SAMARITAN MINISTRY OF ST. LUKE THE EVANGELIST CATHOLIC CHURCH - 910 CROSS GATES BLVD SLIDELL, LA 70461	**-***7538	501C3	10,944.	0.			PUBLIC/SOCIETY BENEFIT
GOOD SHEPHERD EPISCOPAL SCHOOL 4207 FOREST HILL AVENUE RICHMOND, VA 23225	**-***0978	501C3	20,000.	0.			EDUCATION
GOODWILL IND. S.E. LA, INC. 3400 TULANE AVE NO 1000 NEW ORLEANS, LA 70119	**-***6906	501 c 3	10,078.	0.			SOCIAL SERVICES
GRACE CATHEDRAL 1100 CALIFORNIA STREET SAN FRANCISCO, CA 94108	**-***6846	501 c 3	5,500.	0.			PUBLIC/SOCIETY BENEFIT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER NEW ORLEANS DEVELOPMENT							
FOUNDATION - 1100 POYDRAS STREET,	** ***	504.50	110.000				
GUITE 3475 - NEW ORLEANS, LA 70163 GREATER NEW ORLEANS YOUTH	**-***7207	501C3	110,000.	0.			ECONOMIC DEVELOPMENT
DRCHESTRA - 7100 ST CHARLES							
AVENUE, SUITE 207 - NEW ORLEANS,							
A 70118	**-***7229	501C3	13,421.	0.			ARTS/CULTURE
GREATER NO EDUCTV FOUNDATION							
P.O. BOX 24026 NEW ORLEANS, LA 70184	**-***7926	501C3	100,053.	0.			PUBLIC/SOCIETY BENEFIT
VEH CKEEPING, EAR / 0104	7320	50165	100,033.	<u> </u>			TOBBIC, BOCIBIT BENEFIT
GREATER TREME CONSORTIUM INC.							
316 N ROBERTSON STREET							
NEW ORLEANS, LA 70116	**-***5393	501C3	92,000.	0.			COMMUNITY IMPROVEMENT
DDDW LIGHT NEW ODLENIG							
GREEN LIGHT NEW ORLEANS 8203 JEANNETTE STREET							
NEW ORLEANS, LA 70118	**-***1937	501C3	42,217.	0.			ENVIRONMENT
(1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	250.		12,227.				
GROUNDS KREWE							
3962 MAGAZINE STREET							
NEW ORLEANS, LA 70115	**-***9692	501C3	6,575.	0.			ENVIRONMENT
GROUNDWORK NEW ORLEANS							
2372 ST. CLAUDE AVENUE, SUITE 300							
NEW ORLEANS, LA 70117	**-***6300	501C3	126,706.	0.			ENVIRONMENT
,	2220					1	
GROW DAT YOUTH FARM							
L PALM DRIVE							
NEW ORLEANS, LA 70124	**-***2732	501C3	48,160.	0.			YOUTH DEVELOPMENT
CDOMMU FOINDAMION							
GROWTH FOUNDATION PO BOX 401							
NORCO, LA 70079	**-***4295	501C3	25,000.	0.			YOUTH DEVELOPMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HABITAT FOR HUMANITY ST. TAMMANY WEST - 1400 NORTH LANE -							
MANDEVILLE, LA 70471	**-***1695	501C3	5,206.	0.			HUMAN SERVICES
HANDS ON NEW ORLEANS 130 S TELEMACHUS STREET NEW ORLEANS, LA 70119	**-***1213	501C3	12,406.	0.			COMMUNITY IMPROVEMENT
HARCH HYPERBARIC INSTITUTE 228 AUDUBON BLVD. NEW ORLEANS, LA 70118	**_***9818	501C3	107,998.	0.			HEALTH
HARRY TOMPSON CENTER INC 130 BARONNE STREET NEW ORLEANS, LA 70112	**-***8026	501C3	22,713.	0.			HUMAN SERVICES
HEALING HANDS OF JOY P.O. BOX 30431 CHARLOTTE, NC 28230	**-***1638	501C3	50,000.	0.			HEALTH
HEALTH AND EDUCATION ALLIANCE OF LOUISIANA - 1700 JOSEPHINE STREET, SUITE 200 - NEW ORLEANS, LA 70113	**-***9042	501C3	20,000.	0.			HEALTH
HEALTHY COMMUNITY RESOURCES & ADVOCACY - 1855 DUELS STREET - NEW DRLEANS, LA 70119	**-***1170	501C3	92,093.	0.			HEALTH
HEALTHY GULF 935 GRAVIER STREET, SUITE 700 NEW ORLEANS, LA 70112	**-***7742	501C3	57,844.	0.			ENVIRONMENT
HEARTBEAT NOLA 820 N. UPLAND AVENUE METAIRIE, LA 70003	**-***5608	50103	5,487.	0.			HEALTH

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARTGIFT FOUNDATION 5500 PRYTANIA STREET, SUITE 306 NEW ORLEANS, LA 70115	**-***7809	501C3	14,142.	0.			HEALTH
HEIFER INTERNATIONAL FOUNDATION 1 WORLD AVENUE LITTLE ROCK, AR 72202	**-***9477	501C3	7,500.	0.			INTERNATIONAL RELIEF
HELP HOPE LIVE 2 RADNOR CORPORATE CENTER, SUITE 1 RADNOR, PA 19087	**-***2317	501C3	7,500.	0.			HEALTH
HISTORIC NEW ORLEANS COLLECTION 533 ROYAL STREET NEW ORLEANS, LA 70130	**-***6090	501C3	42,000.	0.			ARTS/CULTURE
HOGS RESQUE P.O. BOX 750018 NEW ORLEANS, LA 70175	**-***3695	501C3	10,428.	0.			PUBLIC/SOCIETY BENEFIT
HOLLYGROVE-DIXON NEIGHBORHOOD ASSOCIATION - 8606 MARKS STREET - NEW ORLEANS, LA 70118	**-***5227	501C3	52,000.	0.			COMMUNITY IMPROVEMENT
HOLY CROSS SCHOOL 5500 PARIS AVENUE NEW ORLEANS, LA 70122	**-***6902	501C3	23,616.	0.			EDUCATION
HOLY NAME OF JESUS PARISH 6220 LA SALLE PLACE NEW ORLEANS, LA 70118	**-***0520	501C3	144,667.	0.			PUBLIC/SOCIETY BENEFIT
HOME BY HAND 6323 FRANKLIN AVENUE NEW ORLEANS, LA 70122	**-***0373	501C3	56,862.	0.			COMMUNITY IMPROVEMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOMER A. PLESSY COMMUNITY SCHOOL 423 ST. PHILIP STREET NEW ORLEANS, LA 70116	**-***4690	501C3	5,978.	0.			EDUCATION
OTEL HOPE 923 MARTIN LUTHER KING JR. BLVD. IEW ORLEANS, LA 70125	**-***3749	501c3	25,500.	0.			HOUSING/SHELTER
OUSE OF TULIP P.O. BOX 770335 IEW ORLEANS, LA 70177	**-***6745	501c3	71,245.	0.			ALLIANCES AND ADVOCACY
OUSEHOLD OF FAITH FAMILY WORSHIP HURCH - 2074 PAXTON STREET - LARVEY, LA 70058	**-***6529	501c3	24,500.	0.			PUBLIC/SOCIETY BENEFIT
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVENUE NW NASHINGTON, DC 20036	**-***1896	501c3	5,500.	0.			CIVIC ENGAGEMENT
UMANE SOCIETY OF LOUISIANA O BOX 740321 EW ORLEANS, LA 70174	**-***5272	501C3	13,586.	0.			FUND RAISING & FUND DISTRIBUTION
MMIGRATION SERVICES AND LEGAL DVOCACY (ISLA) - 3801 CANAL TREET, SUITE 210 - NEW ORLEANS, A 70119	**-***5254	501 c 3	9,160.	0.			HUMAN SERVICES
NNOCENCE PROJECT NEW ORLEANS 051 ULLOA STREET EW ORLEANS, LA 70119	**-***1261	501C3	69,025.	0.			FUND RAISING & FUND DISTRIBUTION
INTERNATIONAL HIGH SCHOOL OF NEW PRLEANS - 727 CARONDELET STREET - IEW ORLEANS, LA 70130	**-***9868	501C3	20,000.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL RESCUE COMMITTEE,							
INC 122 EAST 42ND STREET - NEW							
YORK, NY 10168	**-***0870	501C3	7,156.	0.			HUMAN SERVICES
INTERNATIONAL SCHOOL OF LOUISIANA							
1400 CAMP STREET							
NEW ORLEANS, LA 70130	**-***1891	501C3	11,448.	0.			EDUCATION
ISIDORE NEWMAN SCHOOL							
1903 JEFFERSON AVENUE							
NEW ORLEANS, LA 70115	**-***8935	501C3	335,073.	0.			EDUCATION
JANE PLACE NEIGHBORHOOD			, -				
SUSTAINABILITY INITIATIVE - 2533							
COLUMBUS STREET, SUITE 104 - NEW							FUND RAISING & FUND
ORLEANS, LA 70119	**-***9820	501C3	34,500.	0.			DISTRIBUTION
JEFFERSON COUNCIL ON AGING							
6620 RIVERSIDE DRIVE, SUITE 216							
METAIRIE, LA 70003	**-***8657	501C3	12,450.	0.			PUBLIC/SOCIETY BENEFIT
			12,155.				
JEFFERSON DOLLARS FOR SCHOLARS							
РО ВОХ 6526							
METAIRIE, LA 70009	**-***6360	501C3	6,510.	0.			EDUCATION
JEFFERSON SPCA							
4421 JEFFERSON HIGHWAY							
JEFFERSON, LA 70121	**-***4861	501C3	7,681.	0.			ANIMALS
· · · · · · · · · · · · · · · · · ·			1,702.				
JERICHO ROAD EPISCOPAL HOUSING							
INITIATIVE - 2919 ST. CHARLES AVE.							
- NEW ORLEANS, LA 70115	**-***9678	501C3	34,600.	0.			HOUSING/SHELTER
JESUIT HIGH SCHOOL							
4133 BANKS STREET							
NEW ORLEANS, LA 70119	**-***7510	501C3	13,497.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JESUS PROJECT MINISTRIES							
8401 APPLE STREET							
NEW ORLEANS, LA 70118	**-***3281	501C3	21,682.	0.			PUBLIC/SOCIETY BENEFIT
JEWISH CHILDREN'S REGIONAL SERVICE							
P.O. BOX 7368							
METAIRIE, LA 70010	**-***8936	501C3	8,456.	0.			HUMAN SERVICES
JEWISH COMMUNITY CENTER							
5342 ST. CHARLES AVENUE							
NEW ORLEANS, LA 70115	**-***8937	501C3	6,611.	0.			PUBLIC/SOCIETY BENEFIT
JEWISH COMMUNITY DAY SCHOOL							
3747 W ESPLANADE AVENUE							
METAIRIE, LA 70002	**-***8328	501C3	13,265.	0.			EDUCATION
	0320	30103	13,203.	•			
JEWISH ENDOWMENT FOUNDATION							
1 GALLERIA BLVD 1040							
METAIRIE, LA 70001	**-***8456	501C3	104,041.	0.			PHILANTHROPY
TEWICH EAMILY CEDUICE							
JEWISH FAMILY SERVICE 3300 W ESPLANADE AVENUE S, SUITE 6							
METAIRIE, LA 70002	**-***1575	501C3	26,690.	0.			HUMAN SERVICES
	10,0		20,000.	•			
JEWISH FEDERATION OF GREATER NEW							
ORLEANS - 3747 W ESPLANADE AVENUE							
N - METAIRIE, LA 70002	**-***8938	501C3	279,929.	0.			PUBLIC/SOCIETY BENEFIT
JULIA MORGAN SCHOOL FOR GIRLS							
5000 MACARTHUR BLVD, BOX 9966							
OAKLAND, CA 94613	**-***5524	501C3	10,000.	0.			EDUCATION
JUNEBUG PRODUCTIONS, INC.							
1010 N. GALVEZ STREET, SUITE 111							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***7381	501C3	28,992.	0.			DISTRIBUTION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					appraisal, other)		
JUNIOR ACHIEVEMENT OF GREATER NEW							
ORLEANS - 5100 ORLEANS AVENUE -							FUND RAISING & FUND
NEW ORLEANS, LA 70124	**-***9314	501C3	5,369.	0.		1	DISTRIBUTION
JUNIOR LEAGUE OF NEW ORLEANS, INC. 14319 CARONDELET STREET							EIIND DATGING C EIIND
	-*0609	501C3	6 204	0.		1	FUND RAISING & FUND DISTRIBUTION
NEW ORLEANS, LA 70115 JUSTICE AND ACCOUNTABILITY CENTER	- 0003	50103	6,204.	0.			DISTRIBUTION
OF LOUISIANA - 4035 WASHINGTON							
AVENUE, SUITE 203 - NEW ORLEANS,							
LA 70125	**-***2878	501C3	6,443.	0.			CIVIC ENGAGEMENT
			,				
KEDILA FAMILY LEARNING CENTER							
1922 S. SALCEDO STREET							
NEW ORLEANS, LA 70125	**-***6539	501C3	10,025.	0.			EDUCATION
KID SMART							
2533 COLUMBUS STREET, SUITE 201	**-***7355	501C3	40 452	0			ADMC / CITI MIDE
NEW ORLEANS, LA 70119	""-"" /355	501C3	40,453.	0.			ARTS/CULTURE
KINSHIP CENTER							
921 S. CARROLLTON AVENUE							
NEW ORLEANS, LA 70118	**-***2907	501C3	24,331.	0.			PUBLIC/SOCIETY BENEFIT
KIPP NEW ORLEANS							
1055 ST. CHARLES AVENUE, SUITE 400		504.50	10.510				
NEW ORLEANS, LA 70130	**-***7213	501C3	40,640.	0.			EDUCATION
KREWE OF RED BEANS							
3300 ROYAL STREET							FUND RAISING & FUND
NEW ORLEANS, LA 70117	**-***7168	501C3	25,221.	0.		1	DISTRIBUTION
·			·				
LAFOURCHE EDUCATION FOUNDATION,							
INC P.O. BOX 529 - THIBODAUX,							
LA 70302	**-***4723	501C3	13,059.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
organization of government		паррпоавіс	oasii grant	assistance	(book, FMV, appraisal, other)	non cash assistance	or assistance
LAMBETH HOUSE FOUNDATION							
150 BROADWAY STREET							FUND RAISING & FUND
NEW ORLEANS, LA 70118	**-***8005	501C3	10,185.	0.			DISTRIBUTION
LAND TRUST FOR LOUISIANA							
P. O. BOX 1636							FUND RAISING & FUND
HAMMOND, LA 70404	**-***9029	501C3	5,858.	0.			DISTRIBUTION
LAWYERS' COMMITTEE FOR CIVIL							
RIGHTS - 1500 K ST. NW, SUITE 900							
- WASHINGTON, DC 20005	**-***9246	501C3	10,000.	0.			CIVIC ENGAGEMENT
LBF KENDALL VICK PUBLIC LAW FUND							
1615 POYDRAS STREET, SUITE 1000							
NEW ORLEANS, LA 70112	**-***3729	501C3	5,153.	0.			CIVIC ENGAGEMENT
,			,				
LE PETIT THEATRE DU VIEUX CARRE							
616 SAINT PETER STREET							
NEW ORLEANS, LA 70116	**-***3626	501C3	82,122.	0.			ARTS/CULTURE
LEDE NEW ORLEANS							
309 S. MURAT STREET, APT B							
NEW ORLEANS, LA 70119	**-***2323	501C3	10,000.	0.			ARTS/CULTURE
LGBT COMMUNITY CENTER OF NEW							
ORLEANS - 2727 SOUTH BROAD STREET	++ +++0744	501.02	10.405				
- NEW ORLEANS, LA 70125	**-***9711	501C3	12,427.	0.			HUMAN SERVICES
LIBERTY'S KITCHEN							
P.O. BOX 19293							
NEW ORLEANS, LA 70179	**-***4285	501C3	46,532.	0.			ECONOMIC DEVELOPMENT
LIFE LEGAL DEFENSE FOUNDATION							
PO BOX 2105							
NAPA, CA 94558	**-***1488	501C3	6,624.	0.			CIVIC ENGAGEMENT

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIGHTHOUSE LOUISIANA							
123 STATE STREET							
NEW ORLEANS, LA 70118	**-***8941	501C3	31,356.	0.			HUMAN SERVICES
LIVE OAK WILDERNESS CAMP							
1240 MOSS STREET							
NEW ORLEANS, LA 70119	**-***1850	501C3	145,934.	0.			EDUCATION
LIVING SCHOOL							
6003 BULLARD AVENUE, SUITE 16							
NEW ORLEANS, LA 70128	**-***9714	501C3	7,278.	0.			EDUCATION
LONGUE VUE HOUSE & GARDENS							
7 BAMBOO ROAD							
NEW ORLEANS, LA 70124	**-***8039	501C3	44,238.	0.			PUBLIC/SOCIETY BENEFIT
LOOP NOLA							
1 PALM DRIVE							
NEW ORLEANS, LA 70124	**-***2248	501C3	9,249.	0.			YOUTH DEVELOPMENT
LOUISE S. MCGEHEE SCHOOL							
2343 PRYTANIA STREET							
NEW ORLEANS, LA 70130	**-***8943	501C3	345,849.	0.			EDUCATION
LOUISIANA BUCKET BRIGADE							
3416 B CANAL STREET							
NEW ORLEANS, LA 70119	**-***8935	501C3	20,755.	0.			ENVIRONMENT
LOUISIANA CENTER FOR CHILDRENS							
RIGHTS - 1100-B MILTON STREET -							
NEW ORLEANS, LA 70122	**-***1971	501C3	76,359.	0.			YOUTH DEVELOPMENT
LOUISIANA CHILDRENS MEDICAL CENTER							
210 STATE STREET							
NEW ORLEANS, LA 70118	**-***0131	501C3	15,549.	0.			HEALTH

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA CHILDRENS MUSEUM							
15 HENRY THOMAS DRIVE							
NEW ORLEANS, LA 70124	**-***9068	501C3	33,488.	0.			ARTS/CULTURE
LOUISIANA COMMUNITY HEALTH							
OUTREACH NETWORK INC 2028-2030							
ORETHA C HALEY - NEW ORLEANS, LA							
70113	**-***8575	501C3	60,000.	0.			HEALTH
			·				
LOUISIANA CRAWFISH FEST FOUNDATION							
PO BOX 651							FUND RAISING & FUND
CHALMETTE, LA 70044	**-***5676	501C3	7,500.	0.			DISTRIBUTION
LOUISIANA ENDOWMENT FOR THE							
HUMANITIES - 938 LAFAYETTE STREET							
SUITE 300 - NEW ORLEANS, LA 70113	**-***5568	501C3	6,762.	0.			ARTS/CULTURE
LOUISIANA FAIR HOUSING ACTION							
CENTER - 1340 POYDRAS STREET,							FUND RAISING & FUND
SUITE 710 - NEW ORLEANS, LA 70112	**-***6717	501C3	28,112.	0.			DISTRIBUTION
LOUISIANA GREEN CORPS							
2645 TOULOUSE STREET							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***4715	501C3	39,112.	0.			DISTRIBUTION
LOUISIANA HIBERNIAN CHARITY							
209 SPENCER AVENUE							
NEW ORLEANS, LA 70124	**-***5627	501C3	5,880.	0.			ARTS/CULTURE
LOUISIANA LANDMARKS SOCIETY, INC.							
1440 MOSS STREET							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***3491	501C3	11,858.	0.			DISTRIBUTION
LOUISIANA MUSEUM FOUNDATION							
1000 BOURBON STREET, B429							
NEW ORLEANS, LA 70116	**-***4712	b01C3	7,800.	0.			ARTS/CULTURE

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA PERINATAL JUSTICE ALLIANCE - P.O. BOX 851038 - NEW ORLEANS, LA 70185	**-***1201	501C3	38,198.	0.			CIVIC ENGAGEMENT
LOUISIANA PHILHARMONIC ORCHESTRA 2533 COLUMBUS STREET, SUITE 202 NEW ORLEANS, LA 70119	**-***9023	501C3	321,151.	0.			ARTS/CULTURE
LOUISIANA SPCA 1700 MARDI GRAS BLVD. NEW ORLEANS, LA 70114	**-***1368	501C3	328,378.	0.			animals
LOUISIANA UNITED METHODIST CHILDREN AND FAMILY SERVICES, INC. - P.O. BOX 929 - RUSTON, LA 71273	**-***5081	501 c 3	26,013.	0.			PUBLIC/SOCIETY BENEFIT
LOUISIANA YOUTH SEMINAR P.O. BOX 14241 BATON ROUGE, LA 70898	**-***0035	501c3	87,775.	0.			YOUTH DEVELOPMENT
LOUVIS SERVICES 4035 WASHINGTON AVENUE NEW ORLEANS, LA 70125	**-***3898	501 c 3	9,404.	0.			HOUSING/SHELTER
LOWER 9TH WARD CENTER FOR SUSTAINABLE ENGAGEMENT AND DEVELOPMENT - P.O. BOX 770407 - NEW ORLEANS, LA 70177	**-***5863	501C3	21,614.	0.			COMMUNITY IMPROVEMENT
LOWER 9TH WARD HOMEOWNERSHIP ASSOCIATION - 1235 DESLONDE STREET - NEW ORLEANS, LA 70117	**-***9422	501 c 3	39,055.	0.			COMMUNITY IMPROVEMENT
LOWERNINE ORG 627 LAMANCHE STREET NEW ORLEANS, LA 70117	**-***1601	501c3	16,192.	0.			SOCIAL SERVICES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOYOLA UNIVERSITY							
3363 ST. CHARLES AVENUE, CAMPUS BO							
NEW ORLEANS, LA 70118	**-***8946	501C3	259,162.	0.			EDUCATION
LSU HEALTH FOUNDATION NEW ORLEANS							
2000 TULANE AVENUE, 4TH FLOOR							FUND RAISING & FUND
NEW ORLEANS, LA 70112	**-***5391	501C3	101,769.	0.			DISTRIBUTION
LSU MEDICAL ALUMNI ASSOCIATION,							
INC 2020 GRAVIER STREET, 5TH							
FLOOR - NEW ORLEANS, LA 70112	**-***5268	501C3	8,172.	0.			EDUCATION
LUKE'S HOUSE							
2023 SIMON BOLIVAR AVENUE							
NEW ORLEANS, LA 70113	**-***2262	501C3	76,324.	0.			HEALTH
NEW GREENER, EN 70113	2202	50103	70,321.	•••			
LUSHER CHARTER SCHOOL							
5624 FRERET STREET							
NEW ORLEANS, LA 70115	**-***4839	501C3	13,802.	0.			EDUCATION
LUTHERAN HIGH SCHOOL OF GREATER							
NEW ORLEANS - 3864 17TH STREET -							
METAIRIE, LA 70002	**-***1179	501C3	9,488.	0.			EDUCATION
LYRICA BAROQUE							
P.O. BOX 750524	**-***2289	501C3	5 760	0.			ADMC/CIII MIIDE
NEW ORLEANS, LA 70175	2209	50103	5,760.	0.			ARTS/CULTURE
MADE IN NEW ORLEANS FOUNDATION							
461 NINTH STREET							
NEW ORLEANS, LA 70115	**-***6342	501C3	47,719.	0.			HUMAN SERVICES
MAGNOLIA COMMUNITY SERVICES							
100 CENTRAL AVENUE							FUND RAISING & FUND
JEFFERSON, LA 70121	**-***3625	501C3	130,297.	0.			DISTRIBUTION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKE YOUR MOVE FOUNDATION							
4980 ARTS STREET							
NEW ORLEANS, LA 70122	**-***0571	501C3	10,217.	0.			FOOD/NUTRITION
MAKE-A-WISH FDTN. TX GULF COAST &							
LA - 3340 SEVERN AVENUE, SUITE 350							
- METAIRIE, LA 70002	**-***6615	501C3	9,105.	0.			HUMAN SERVICES
MARILLAC COMMUNITY HEALTH CENTERS							
(BDA DEPAUL COMMUNITY HEALTH							
CENTERS) - P.O. BOX 4148 - NEW							
ORLEANS, LA 70178	**-***6997	501C3	20,000.	0.			HEALTH
MARTIN AGARTINI							
MARIN ACADEMY							
1600 MISSION AVENUE	**-***6189	501C3	10 000	0.			EDUCATION
SAN RAFAEL, CA 94901	- 0109	50103	10,000.	0.			EDUCATION
MARITIME PASTORAL INSTITUTE							
512 E BOSTON STREET							
COVINGTON, LA 70433	**-***1594	501C3	8,000.	0.			PUBLIC/SOCIETY BENEFIT
,			, -	<u> </u>			·
MARKET UMBRELLA							
200 BROADWAY STREET, SUITE 107							
NEW ORLEANS, LA 70118	**-***7706	501C3	99,560.	0.			ECONOMIC DEVELOPMENT
MAROON, INC.							
1206 ST. CHARLES AVENUE							
NEW ORLEANS, LA 70130	**-***8781	501C3	75,492.	0.			PUBLIC/SOCIETY BENEFIT
MARKETIN OF SE HOOD DANKEN							
MATTHEW 25:35 FOOD PANTRY							
14034 RIVER ROAD	**-***1540	501C3	25,996.	0.			FOOD/NUTRITION
DESTREHAN, LA 70047	_ 1340	20103	23,330.	0.			E OOD, NOTKITION
MCDONOGH 35 ALUMNI ASSOCIATION							
P.O. BOX 50306							FUND RAISING & FUND
NEW ORLEANS, LA 70150	**-***5205	501C3	5,736.	0.			DISTRIBUTION

Part II Continuation of Grants and Other				,	, ,,	,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCY CORPS							
PO BOX 80020							
PRESCOTT, AZ 86304	**-***8123	501C3	7,000.	0.			HUMAN SERVICES
MERCY ENDEAVORS							
457 JACKSON AVENUE							FUND RAISING & FUND
NEW ORLEANS, LA 70130	**-***2228	501C3	12,611.	0.			DISTRIBUTION
METAIRIE PARK COUNTRY DAY SCHOOL 300 PARK ROAD							
METAIRIE, LA 70005	**-***9360	501C3	107,650.	0.			EDUCATION
METRO CENTERS FOR COMMUNITY ADVOCACY - P.O. BOX 10775 - JEFFERSON, LA 70181	**-***2244	501c3	35,795.	0.			HUMAN SERVICES
				- •			
METROPOLITAN CRIME COMMISSION OF N.O., INC 1615 POYDRAS STREET,							
SUITE 1060 - NEW ORLEANS, LA 70112	**-***9984	501C3	49,333.	0.			COMMUNITY IMPROVEMENT
METROPOLITAN SAFETY COUNCIL OF NEW ORLEANS - 4200 SOUTH I-10, SUITE 140 - METAIRIE, LA 70001	**-***9032	501C3	12,591.	0.			PUBLIC/SOCIETY BENEFI
	2.2.2						
MID-CITY MINISTRIES 4540 SOUTH CARROLLTON AVENUE							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***6248	501C3	32,092.	0.			DISTRIBUTION
MINISTRY AGAINST THE DEATH PENALTY							
3009 GRAND RTE ST. JOHN, APT 6 NEW ORLEANS, LA 70119	**-***8640	501C3	20,124.	0.			FUND RAISING & FUND DISTRIBUTION
MONDO BIZARRO							
609 SAINT FERDINAND STREET NEW ORLEANS, LA 70117	**-***1312	501C3	11,747.	0.			FUND RAISING & FUND DISTRIBUTION

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sche	edule i (Form 990), Pa	rt II.) T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MORRIS JEFF COMMUNITY SCHOOL							
211 SOUTH LOPEZ STREET							
NEW ORLEANS, LA 70119	**-***1479	501C3	25,848.	0.			EDUCATION
MOSCOW NIGHTS, INC.							
5231 ST. CHARLES AVENUE, UNIT D							
NEW ORLEANS, LA 70115	**-***1009	501C3	8,475.	0.			ARTS/CULTURE
MOUNT CALVARY CHURCH							
P.O. BOX 325							
CHAUVIN, LA 70344	**-***6687	501C3	25,000.	0.			PUBLIC/SOCIETY BENEFIT
MOUNT CARMEL ACADEMY							
7027 MILNE BOULEVARD	**-***5732	501C3	27,134.	0.			EDUCATION
NEW ORLEANS, LA 70124	3732	50105	27,134.	٠.			EDUCATION
MULTIPLE MYELOMA RESEARCH							
FOUNDATION, INC 383 MAIN AVE #5							
- NORWALK, CT 06851	**-***4413	501C3	10,000.	0.			HEALTH
MUSEUM OF THE SOUTHERN JEWISH							
EXPERIENCE - P.O. BOX 15071 - NEW ORLEANS, LA 70175	**-***2378	501C3	34,118.	0.			ARTS/CULTURE
ORDEANS, LA 70175	- 2376	50103	34,110.	0.			ARIS/CULTURE
MUSIC AND CULTURE COALITION OF NEW							
ORLEANS - 1762 PAUL MORPHY STREET							
- NEW ORLEANS, LA 70119	**-***9310	501C3	104,861.	0.			ARTS/CULTURE
MUSICAL ARTS SOCIETY OF NEW							
ORLEANS - P.O. BOX 750698 - NEW							
ORLEANS, LA 70175	**-***3207	501C3	12,617.	0.			ARTS/CULTURE
MUSLIM AMERICAN LEADERSHIP							
ALLIANCE - 47 WEST DIVISION							
STREET, #159 - CHICAGO, IL 60610	**-***2096	501C3	27,500.	0.			CIVIC ENGAGEMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NAMI NEW ORLEANS							
4403 CANAL STREET							
NEW ORLEANS, LA 70119	**-***6349	501C3	61,333.	0.			HEALTH
NAMI ST. TAMMANY PO BOX 2055							
MANDEVILLE, LA 70470	**-***6671	501C3	26,400.	0.			HEALTH
NATIONAL CLEAN WATER ALLIANCE 30 WESTGATE PLAZA #329 ASHEVILLE, NC 28806	**-***7419	501C3	7,000.	0.			ENVIRONMENT
NATIONAL COUNCIL OF JEWISH WOMEN 5221 S. CLAIBORNE AVENUE, #208 NEW ORLEANS, LA 70125	**-***1230	501C3	5,291.	0.			SOCIAL SERVICES
NATIONAL KIDNEY FOUNDATION OF LOUISIANA - 8200 HAMPSON STREET, GUITE 229 - NEW ORLEANS, LA 70118	**_***9707	501C3	5,206.	0.			HEALTH
IATIONAL PERFORMANCE NETWORK P.O. BOX 56698 IEW ORLEANS, LA 70156	**-***2546	501C3	44,828.	0.			ARTS/CULTURE
TATIONAL TRUST FOR HISTORIC RESERVATION - 600 14TH STREET NW, UITE 500 - WASHINGTON, DC 20005	** ₋ ***0807	501C3	25,000.	0.			ARTS/CULTURE
NATIONAL WWII MUSEUM INC.							
NEW ORLEANS, LA 70130	**-***0790	501C3	30,638.	0.			ARTS/CULTURE
ATURE CONSERVANCY 245 NORTH FAIRFAX DRIVE RLINGTON, VA 22203	**-***2652		15,446.	0.			ENVIRONMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEIGHBORHOOD DEVELOPMENT FDTN. 1429 SOUTH RAMPART STREET NEW ORLEANS, LA 70113	**-***1468	501C3	28,657.	0.			COMMUNITY IMPROVEMENT
NEO PHILANTHROPY, INC. 1001 AVENUE OF THE AMERICAS, 12TH NEW YORK, NY 10018	**-***1113	501C3	32,500.	0.			PHILANTHROPY
NEW ORLEANS ABORTION FUND P.O. BOX 850773 NEW ORLEANS, LA 70185	**-***0114	501C3	7,584.	0.			HUMAN SERVICES
NEW ORLEANS ACADEMY OF FINE ARTS LTD - 5256 MAGAZINE STREET - NEW ORLEANS, LA 70115	**-***6432	501C3	15,461.	0.			ARTS/CULTURE
NEW ORLEANS ADVOCATES FOR GLBT ELDERS - 1631 ELYSIAN FIELDS AVENUE - NEW ORLEANS, LA 70117	**-***8708	501C3	11,733.	0.			SOCIAL SERVICES
NEW ORLEANS AFRICAN AMERICAN MUSEUM - 1417 GOVERNOR NICHOLLS STREET - NEW ORLEANS, LA 70116	**-***7537	501C3	47,800.	0.			ARTS/CULTURE
NEW ORLEANS AIRLIFT 4557 N. RAMPART STREET NEW ORLEANS, LA 70117	**_***5334	501C3	27,544.	0.			ARTS/CULTURE
NEW ORLEANS AREA HABITAT FOR HUMANITY - 2900 ELYSIAN FIELDS AVENUE - NEW ORLEANS, LA 70122	**-***3161	501C3	265,615.	0.			FUND RAISING & FUND DISTRIBUTION
NEW ORLEANS ARTS & CULTURAL HOST COMMITTEE - 124 ROSELYN PARK PLACE - NEW ORLEANS, LA 70131	**-***6655	501C3	8,114.	0.			ARTS/CULTURE

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ORLEANS BALLET ASSOCIATION 035 GRAVIER STREET, SUITE 800							
NEW ORLEANS, LA 70112	**-***2403	501C3	24,447.	0.			ARTS/CULTURE
EW ORLEANS BALLET THEATRE							
213 MARENGO STREET EW ORLEANS, LA 70115	**-***8652	501C3	14,016.	0.			ARTS/CULTURE
IEW ORLEANS BULLDOG RESCUE	** ***	F01g2	5.005				
NEW ORLEANS, LA 70119	**-***0898	501C3	5,285.	0.			ANIMALS
IEW ORLEANS CHAMBER OF COMMERCE COUNDATION - 1515 POYDRAS STREET -	**-***3531	501.02	65,000				
IEW ORLEANS, LA 70112	**-***3531	501C3	65,000.	0.			COMMUNITY IMPROVEMENT
JEW ORLEANS COLLEGE PREP 2301 MARENGO STREET							
IEW ORLEANS, LA 70115	**-***5689	501C3	10,000.	0.			EDUCATION
NEW ORLEANS COUNCIL ON AGING, INC. 2745 CANAL STREET, SUITE 400 NEW ORLEANS, LA 70119	**-***4096	501c3	10,050.	0.			PUBLIC/SOCIETY BENEFIT
	4030	50103	10,030.	0.			TOBBIC, SOCIETY BENEFIT
WEW ORLEANS CULINARY & HOSPITALITY INSTITUTE - 725 HOWARD AVENUE, SUITE 101 - NEW ORLEANS, LA 70130	**-***1280	501C3	45,511.	0.			FOOD/NUTRITION
JOILE TOT MEN ONDERNO, DA 70130	1200	50103	40,511.	0.			2 COD/ NOTATITON
NEW ORLEANS FAMILY JUSTICE ALLIANCE - 701 LOYOLA AVENUE,							
GUITE 201 - NEW ORLEANS, LA 70113	**-***1029	501C3	40,737.	0.			HUMAN SERVICES
NEW ORLEANS FRIENDS OF MUSIC 5500 PRYTANIA STREET, PMB #402							
NEW ORLEANS, LA 70115	**-***1704	501C3	8,934.	0.			ARTS/CULTURE

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ORLEANS HISPANIC HERITAGE							
FOUNDATION - 201 SAINT CHARLES							
AVENUE, SUITE 114-106 - NEW				_			
ORLEANS, LA 70170	**-***1913	501C3	6,088.	0.			ARTS/CULTURE
NEW ORLEANS MILITARY AND MARITIME							
ACADEMY - 425 O'BANNON STREET -							FUND RAISING & FUND
NEW ORLEANS, LA 70114	**-***8305	501C3	55,418.	0.			DISTRIBUTION
NEW ORLENNA MIGGION							
NEW ORLEANS MISSION 1134 BARONNE STREET							
NEW ORLEANS, LA 70113	**-***1696	501C3	33,911.	0.			HUMAN SERVICES
MIN OKIDIND, DI 70113	1030	50103	33,311.	•••			HOMMY BERVICES
NEW ORLEANS MUSEUM OF ART							
PO BOX 19123							
NEW ORLEANS, LA 70179	**-***0331	501C3	152,339.	0.			ARTS/CULTURE
NEW ORLEANS MUSICIANS ASSISTANCE							
FOUNDATION - 1525 LOUISIANA AVENUE							
- NEW ORLEANS, LA 70115	**-***9539	501C3	26,481.	0.			ARTS/CULTURE
112.11 01.12.12.12.1	3003		20,102.				
NEW ORLEANS OPERA ASSOCIATION							
PO BOX 52108							
NEW ORLEANS, LA 70152	**-***2897	501C3	416,648.	0.			ARTS/CULTURE
NEW ORLEANS POLICE AND JUSTICE							
FOUNDATION INC - 141 ALLEN							
TOUSSAINT BLVD., SUITE 210 - NEW							
ORLEANS, LA 70124	**-***1151	501C3	91,773.	0.			PUBLIC/SOCIETY BENEFIT
NEW ORLEANS RECREATION DEVELOPMENT							
FOUNDATION - 5420 FRANKLIN AVENUE							
- NEW ORLEANS, LA 70122	**-***3946	501C3	16,762.	0.			COMMUNITY IMPROVEMENT
			==,,,,,,,,				
NEW ORLEANS REGIONAL LEADERSHIP							
INSTITUTE - 1100 POYDRAS STREET,							
SUITE 3475 - NEW ORLEANS, LA 70163	**-***1154	501C3	10,648.	0.			CIVIC ENGAGEMENT

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NEW ORLEANS ROWING CLUB LTD							
3 VERSAILLES BLVD.							FUND RAISING & FUND
NEW ORLEANS, LA 70125	**-***6401	501C3	5,811.	0.			DISTRIBUTION
NEW ORLEANS SCHOOL OF GLASSWORKS							
727 MAGAZINE STREET							
NEW ORLEANS, LA 70130	**-***2502	501C3	60,000.	0.			ARTS/CULTURE
NEW ORLEANS SPEECH & HEARING							
CENTER - 1636 TOLEDANO STREET -							
NEW ORLEANS, LA 70115	**-***3103	501C3	43,745.	0.			HUMAN SERVICES
NEW ORLEANS SPONSORING COMMITTEE -			, , , , , , , , , , , , , , , , , , ,				
TOGETHER NEW ORLEANS - 2721 S							
BROAD STREET - NEW ORLEANS, LA							FUND RAISING & FUND
70125	**-***0699	501C3	1,000,268.	0.			DISTRIBUTION
NEW ORLEANS STARTUP FUND							
1100 POYDRAS STREET, SUITE 3475							FUND RAISING & FUND
NEW ORLEANS, LA 70163	**-***6668	501C3	50,000.	0.			DISTRIBUTION
NEW ORDEANS, DA 70103	- 0000	50163	30,000.	<u> </u>			DISTRIBUTION
NEW ORLEANS VIDEO ACCESS CENTER							
4422 SOUTH CARROLTON AVENUE							
NEW ORLEANS, LA 70119	**-***3854	501C3	9,832.	0.			CIVIC ENGAGEMENT
NEW ORLEANS VOCAL ARTS CHORALE							
223 S. OLYMPIA STREET							
NEW ORLEANS, LA 70119	**-***6901	501C3	6,612.	0.			ARTS/CULTURE
,	1		1,132.				
NEW ORLEANS WOMEN & CHILDRENS							
SHELTER INC 2020 S LIBERTY							
STREET - NEW ORLEANS, LA 70113	**-***9964	501C3	99,968.	0.			HOUSING/SHELTER
NEW ORLEANS WORKER'S CENTER FOR			<u> </u>				
RACIAL JUSTICE - 3500 CANAL							
STREET, 2ND FLOOD - NEW ORLEANS,							
LA 70119	**-***7415	501C3	22,220.	0.			CIVIC ENGAGEMENT

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NEW ORLEANS YOUTH ALLIANCE							
1705 S. WHITE STREET, UNIT A	** ***	F.0.4.772	66.240				
NEW ORLEANS, LA 70125	**-***2541	501C3	66,348.	0.			EDUCATION
NEW PENTECOSTAL COMMUNITY							
DEVELOPMENT CENTER INC 708							
HOBSON STREET - GREENSBORO, AL	++ +++0065	E01 G2	10.000	0			D. D. T. G. G. G. T. T. T. D. T.
36744	**-***2265	501C3	10,000.	0.			PUBLIC/SOCIETY BENEFIT
NEW SCHOOLS FOR NEW ORLEANS							
1555 POYDRAS STREET, SUITE 781							
NEW ORLEANS, LA 70112	**-***3717	501C3	57,000.	0.			EDUCATION
NEW ORDEANS, DA 70112	- 3/1/	50103	37,000.	0.			EDUCATION
NICHOLLS STATE UNIVERSITY							
P.O. BOX 2005							
THIBODAUX, LA 70310	**-***1797	501C3	9,605.	0.			EDUCATION
	1 2.5.		7,000.	•			
NO KID HUNGRY LOUISIANA							
1030 15TH STREET NW, SUITE 1100							
WASHINGTON D.C., WA 20005	**-***7538	501C3	20,000.	0.			FOOD/NUTRITION
							,
NO AIDS TASK FORCE							
1631 ELYSIAN FIELDS							
NEW ORLEANS, LA 70117	**-***9635	501C3	154,266.	0.			 HEALTH
•			, ,	-			
NOCCA FOUNDATION							
2800 CHARTRES STREET							
NEW ORLEANS, LA 70117	**-***2102	501C3	80,637.	0.			ARTS/CULTURE
NOLA WESLEY UNITED METHODIST							
7102 FRERET STREET							
NEW ORLEANS, LA 70118	**-***7855	501C3	35,000.	0.			PUBLIC/SOCIETY BENEFIT
NONPROFIT KNOWLEDGE WORKS							
1100 POYDRAS STREET, SUITE 1220							
NEW ORLEANS, LA 70163	**-***0841	501C3	48,077.	0.			PHILANTHROPY

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NORCO CIVIC ASSOCIATION, INC.							
P.O. BOX 22							
NORCO, LA 70079	**-***2424	501C4	25,774.	0.			COMMUNITY IMPROVEMENT
NORTHSHORE FOOD BANK							
125 W. 30TH. AVENUE							
COVINGTON, LA 70433	**-***8539	501C3	46,784.	0.			PUBLIC/SOCIETY BENEFIT
Notice Double Design							
NOUS FOUNDATION							EIIND DATCING C FIIND
1113 CHARTRES STEET NEW ORLEANS, LA 70116	**-***6547	501C3	11,119.	0.			FUND RAISING & FUND DISTRIBUTION
NEW ORDEANS, DA 70110	0347	50103	11,113.	0.			DISTRIBUTION
OCHSNER CLINIC FOUNDATION							
1514 JEFFERSON HIGHWAY							
NEW ORLEANS, LA 70121	**-***2505	501C3	37,814.	0.			HEALTH
OCHSNER HEALTH							
1514 JEFFERSON HIGHWAY, #1E617	**-***6918	E0103	46 257	0			1173 A T (1171
NEW ORLEANS, LA 70121	6918	501C3	46,357.	0.			HEALTH
OGDEN MUSEUM OF SOUTHERN ART							
925 CAMP STREET							
NEW ORLEANS, LA 70130	**-***9496	501C3	303,742.	0.			ARTS/CULTURE
OUD O'VEREE MIGRIM OF ADM							
OHR-O'KEEFE MUSEUM OF ART							
POST OFFICE BOX 248	**-***7485	501C3	15,000.	0.			ARTS/CULTURE
BILOXI, MS 39533	- 7465	50103	15,000.	0.			ARIS/COLIURE
ONE BOOK ONE NEW ORLEANS							
PO BOX 7067							FUND RAISING & FUND
NEW ORLEANS, LA 70186	**-***6504	501C3	5,162.	0.			DISTRIBUTION
OPERATION RESTORATION							
1450 POYDRAS STREET, SUITE 2260	** ***1044	E0103	110 454				HIMAN GEDVICES
NEW ORLEANS, LA 70112	**-***1941	borc3	118,474.	0.			HUMAN SERVICES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPERATION SMILE							
3641 FACULTY BOULEVARD							
VIRGINIA BEACH, VA 23453	**-***0147	501C3	94,604.	0.			HEALTH
OPERATION SPARK							
P.O. BOX 19924							
NEW ORLEANS, LA 70179	**-***4606	501C3	11,219.	0.			EDUCATION
ORLEANS PARISH DISTRICT ATTORNEY							
619 SOUTH WHITE STREET							
NEW ORLEANS, LA 70119	**-***0730	gov	242,487.	0.			COMMUNITY IMPROVEMENT
ORLEANS PUBLIC DEFENDERS							
2601 TULANE AVENUE, SUITE 700							
NEW ORLEANS, LA 70119	**-***2780	501C3	35,000.	0.			COMMUNITY IMPROVEMENT
			, -	-			
ORLEANS PUBLIC EDUCATION NETWORK							
P.O. BOX 791312							
NEW ORLEANS, LA 70179	**-***8257	501C3	21,101.	0.			EDUCATION
OUR LADY OF PEACE							
P.O. BOX 70							
PINEDALE, WY 82941	**-***1543	501C3	100,000.	0.			PUBLIC/SOCIETY BENEFIT
OUR VOICE NUESTRA VOZ							
900 CAMP STREET, SUITE 359							
NEW ORLEANS, LA 70130	**-***4599	501C3	31,386.	0.			ARTS/CULTURE
MIN GRIEBIND, EM 70100	1333	30103	31,300.	•			INCID, COLITORIA
OUTRIGHT ACTION INTERNATIONAL							
216 EAST 45TH STREET, 17TH FLOOR							
NEW YORK, NY 10017	**-***9952	501C3	20,000.	0.			SOCIAL SERVICES
OZANAM INN							
2239 POYDRAS STREET							
NEW ORLEANS, LA 70119	**-***4403	501C3	98,313.	0.			HOUSING/SHELTER

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(D) LIIV	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
ARENTS FAMILIES FRIENDS-LESBIANS							
AYS - P.O. BOX 15515 - NEW							
RLEANS, LA 70175	**-***0694	501C3	18,085.	0.			EDUCATION
ARTNERS IN HEALTH							
300 BOYLSTON STREET, SUITE 300							
BOSTON, MA 02199	**-***7502	501C3	12,000.	0.			HEALTH
PARTNERSHIP FOR ACTION							
01 POYDRAS STREET, 12TH FLOOR							
NEW ORLEANS, LA 70130	**-***6457	501C3	7,069.	0.			COMMUNITY IMPROVEMENT
DEAGUMDEE DOAD UNIMED MEMUODIGM							
PEACHTREE ROAD UNITED METHODIST CHURCH - 3180 PEACHTREE ROAD NE -							
ATLANTA, GA 30305	**-***5363	501C3	10,500.	0.			PUBLIC/SOCIETY BENEFIT
				-•			
PELICAN INSTITUTE FOR PUBLIC							
POLICY - 400 POYDRAS STREET, SUITE							
900 - NEW ORLEANS, LA 70130	**-***4791	501C3	24,965.	0.			CIVIC ENGAGEMENT
PEOPLE PROGRAM							
2240 LAKESHORE DRIVE							FUND RAISING & FUND
NEW ORLEANS, LA 70122	**-***2258	501C3	9,654.	0.			DISTRIBUTION
PINCKLEY PRIZE MEMORIAL FOUNDATION							
FUND - PO BOX 13926 - NEW ORLEANS,							
LA 70185	**-***8386	501C3	100,000.	0.			ARTS/CULTURE
PLANNED PARENTHOOD GULF COAST							
1636 S. CLAIBORNE AVENUE, SUITE 10							
IEW ORLEANS, LA 70125	**-***0163	501C3	101,461.	0.			HUMAN SERVICES
PLAQUEMINES COMMUNITY CARE CENTERS							
FOUNDATION, INC 115 KEATING							
DRIVE - BELLE CHASSE, LA 70037	**-***4943	501C3	21,347.	0.			HUMAN SERVICES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLAYBUILD							
PO BOX 52871							
NEW ORLEANS, LA 70113	**-***2257	501C3	6,347.	0.			COMMUNITY IMPROVEMENT
PLEASE FOUNDATION							
P.O. BOX 9223							FUND RAISING & FUND
METAIRIE, LA 70055	**-***2327	501C3	14,733.	0.			DISTRIBUTION
POLICY INSTITUTE FOR THE CHILDREN							
OF LA, INC P.O. BOX 13552 - NEW							FUND RAISING & FUND
ORLEANS, LA 70185	**-***7461	501C3	21,521.	0.			DISTRIBUTION
DOMONA GOLLEGE							
POMONA COLLEGE							
550 NORTH COLLEGE AVENUE, #249 CLAREMONT, CA 91711	**-***4112	501C3	215,000.	0.			EDUCATION
CHAREMONI, CA 91711	- 4112	50103	213,000.	0.			EDUCATION
PONTCHARTRAIN CONSERVANCY							
P.O. BOX 6965							
METAIRIE, LA 70009	**-***2784	501C3	54,092.	0.			ENVIRONMENT
DOGGE HOUNDAMION NEW ORLEANS							
POSSE FOUNDATION NEW ORLEANS 1555 POYDRAS STREET, SUITE 470							
NEW ORLEANS, LA 70112	**-***0394	501C3	56,744.	0.			EDUCATION
MAN ONDERING, EII FOITE	0331	30103	30,711.	<u> </u>			
PRESCRIPTION JOY							
РО ВОХ 19983							FUND RAISING & FUND
NEW ORLEANS, LA 70179	**-***2153	501C3	13,238.	0.			DISTRIBUTION
PRESERVATION HALL FOUNDATION							
726 SAINT PETER STREET	** ***	E01.03	10.000				A D mg / GILL MILE T
NEW ORLEANS, LA 70116	**-***0626	501C3	19,803.	0.			ARTS/CULTURE
PRESERVATION RESOURCE CENTER							
923 TCHOUPITOULAS STREET							
NEW ORLEANS, LA 70130	**-***0857	501C3	47,070.	0.			COMMUNITY IMPROVEMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESS STREET (DBA ANTENNA) 3718 ST CLAUDE AVENUE NEW ORLEANS, LA 70117	**-***4240	501C3	20,000.	0.			ARTS/CULTURE
PRO BONO PUBLICO FOUNDATION 1240 CAMP STREET NEW ORLEANS, LA 70130	**-***2587	50103	36,500.	0.			PHILANTHROPY
PROJECT LAZARUS PO BOX 3906 NEW ORLEANS, LA 70177	**-***4192	501C3	21,627.	0.			HEALTH
PROJECT PEACEFUL WARRIORS 2533 COLUMBUS STREET, #108 NEW ORLEANS, LA 70119	**-***5697	501 c 3	7,820.	0.			SOCIAL SERVICES
PROMISE OF JUSTICE INITIATIVE 1024 ELYSIAN FIELDS AVENUE NEW ORLEANS, LA 70117	**-***7037	501c3	23,011.	0.			FUND RAISING & FUND DISTRIBUTION
PROPELLER: A FORCE FOR SOCIAL INNOVATION - 4035 WASHINGTON AVENUE - NEW ORLEANS, LA 70125	**-***3585	501c3	156,923.	0.			CIVIC ENGAGEMENT
PROSPECT SIERRA SCHOOL 2060 TAPSCOTT AVENUE EL CERRITO, CA 94530	**-***0144	501c3	10,000.	0.			EDUCATION
PUBLIC ALLIES 735 N WATER STREET, SUITE 550 MILWAUKEE, WI 53202	**-***9564	501c3	104,663.	0.			FUND RAISING & FUND DISTRIBUTION
RAINTREE SERVICES, INC. 1233 EIGHTH STREET NEW ORLEANS, LA 70115	**-***6905	501C3	17,455.	0.			HUMAN SERVICES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RALLY FOUNDATION INC. 5775 GLENRIDGE DRIVE BUILDING B, S ATLANTA, GA 30328	** ₋ ***0849	501c3	251,308.	0.			HEALTH
RAPHAEL ACADEMY 517 SORAPARU STREET, APT 104 NEW ORLEANS, LA 70130	**-***1105	501C3	20,000.	0.			EDUCATION
RAPHAEL VILLAGE 530 JACKSON AVENUE NEW ORLEANS, LA 70130	**-***3179	501C3	7,878.	0.			HUMAN SERVICES
RAYNE MEMORIAL UNITED METHODIST CHURCH - 3900 ST. CHARLES AVENUE - NEW ORLEANS, LA 70115	**-***5090	501 c 3	22,611.	0.			PUBLIC/SOCIETY BENEFIT
REBUILDING TOGETHER NEW ORLEANS 2831 ST. CLAUDE AVENUE NEW ORLEANS, LA 70117	** ₋ ***7337	501c3	221,083.	0.			FUND RAISING & FUND DISTRIBUTION
RED CHURCH COUNCIL NO. 3634 375 SPRUCE STREET NORCO, LA 70079	**-***5251	50108	17,400.	0.			PUBLIC/SOCIETY BENEFIT
RE-ENTRY MEDIATION INSTITUTE OF LOUISIANA - 4035 WASHINGTON AVENUE - NEW ORLEANS, LA 70125	**-***0898	501 c 3	22,764.	0.			HEALTH
REFLEX SYMPATHETIC DYSTROPHY SYNDROME ASSOC - PO BOX 502 - MILFORD, CT 06460	**-***9139	501c3	30,000.	0.			HEALTH
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY - 1995 UNIVERSITY AVENUE, STE 400 - BERKELEY, CA 94704	**-***2123	501C3	6,000.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REILY MEMORIAL UNITED METHODIST CHURCH - 2318 DOSS HIGHWAY - COLLINSTON, LA 71229	**-***8652	501C3	9,474.	0.			PUBLIC/SOCIETY BENEFIT
REMOTE AREA MEDICAL, INC. 2200 STOCK CREEK BLVD. ROCKFORD, TN 37853	**-***7546	501C3	94,604.	0.			HEALTH
RESURRECTION OF OUR LORD SCHOOL 4861 ROSALIA DRIVE NEW ORLEANS, LA 70127	**-***3915	501C3	7,000.	0.			EDUCATION
RIDE NOLA PO BOX 19231 NEW ORLEANS, LA 70179	**-***0291	501C3	15,795.	0.			FUND RAISING & FUND DISTRIBUTION
RIPPLE EFFECT WATER LITERACY PROJECT - 3151 ST THOMAS STREET - NEW ORLEANS, LA 70115	**-***8632	501 c 3	5,927.	0.			FUND RAISING & FUND DISTRIBUTION
RIVER ROAD HISTORICAL SOCIETY P. O. BOX 5 DESTREHAN, LA 70047	**-***2390	501C3	77,716.	0.			ARTS/CULTURE
ROMAN CATHOLIC CHURCH OF THE ARCHDIOCESE OF NEW ORLEANS - 3774 GENTILLY BLVD NEW ORLEANS, LA 70122	**-***4579	501 C 3	100,903.	0.			PUBLIC/SOCIETY BENEFIT
RONALD MCDONALD HOUSE 210 STATE STREET, BUILDING 4 NEW ORLEANS, LA 70118	**-***2569	501 c 3	20,821.	0.			FUND RAISING & FUND DISTRIBUTION
SACRED HEART OF JESUS CHURCH 401 SPRUCE STREET DESTREHAN, LA 70079	**_***8180	501c3	63,000.	0.			PUBLIC/SOCIETY BENEFIT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT JOSEPH ABBEY AND SEMINARY COLLEGE - 75376 RIVER ROAD - SAINT BENEDICT, LA 70457	**_***9000	501C3	10,600.	0.			EDUCATION
SAINT MARY'S ACADEMY 6905 CHEF MENTEUR HIGHWAY NEW ORLEANS, LA 70126	**-***8977	501C3	35,978.	0.			EDUCATION
SAINT PETER CLAVER FOUNDATION 1825 ORLEANS AVENUE NEW ORLEANS, LA 70116	**-***8126	501C3	9,102.	0.			FUND RAISING & FUND DISTRIBUTION
SANKOFA COMMUNITY DEVELOPMENT CORPORATION - 5200 DAUPHINE STREET - NEW ORLEANS, LA 70117	**-***1054	50103	44,202.	0.			PUBLIC/SOCIETY BENEFIT
SAUL'S LIGHT P.O. BOX 820146 NEW ORLEANS, LA 70182	**-***5988	50103	32,963.	0.			FUND RAISING & FUND DISTRIBUTION
SAVE OUR CEMETERIES P.O. BOX 56762 NEW ORLEANS, LA 70156	**_***8358	501c3	11,617.	0.			FUND RAISING & FUND DISTRIBUTION
SCHOLARSHIP AMERICA P.O. BOX 772514 DETROIT, MI 48277	**_***6967	501c3	19,475.	0.			EDUCATION
SCHOLARSHIP FOUNDATION OF NEW ORLEANS - PO BOX 871812 - NEW ORLEANS, LA 70187	**-***2017	501 c 3	7,448.	0.			EDUCATION
SEASONS GRIEF CENTER 654 BROCKENBRAUGH COURT METAIRIE, LA 70005	**-***7414	501c3	50,000.	0.			HUMAN SERVICES

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SECOND CHANCE LIVING PMI							
CORPORATION - 9029 JEFFERSON HWY,							
SUITE D-1014 - NEW ORLEANS, LA							
70123	**-***9052	501C3	7,003.	0.			SOCIAL SERVICES
SECOND HARVEST FOOD BANK OF GNO/ACADIANA - 700 EDWARDS AVENUE	** ***						
- NEW ORLEANS, LA 70123	**-***6468	501C3	427,128.	0.			FOOD/NUTRITION
SEXUAL TRAUMA AWARENESS AND RESPONSE CENTER - 5615 CORPORATE BLVD, SUITE 200 - BATON ROUGE, LA 70808	**-***8168	501C3	355,973.	0.			FUND RAISING & FUND DISTRIBUTION
SIASCONSET UNION CHAPEL							
PO BOX 400				_			
SIASCONSET, MA 02564	**-***2057	501C3	7,000.	0.			PUBLIC/SOCIETY BENEFIT
SIERRA CLUB FOUNDATION 2101 WEBSTER STREET, SUITE 1250							
OAKLAND, CA 94612	**-***9890	501C3	5,964.	0.			ENVIRONMENT
SIGMA LAMBDA SCHOLARSHIP FOUNDATION - 9701 LAKE FOREST BLVD, #123 - NEW ORLEANS, LA 70127	**-***9423	501C3	11,364.	0.			EDUCATION
SILENCE IS VIOLENCE							
2000 LAKESHORE DRIVE	** ***	E01.03	0.005				GOGIAL GERMANA
NEW ORLEANS, LA 70148	**-***3685	501C3	9,885.	0.			SOCIAL SERVICES
SISTERS, SERVANTS OF MARY							
5001 PERLITA STREET NEW ORLEANS, LA 70122	**-***1588	501C3	7,027.	0.			PUBLIC/SOCIETY BENEFIT
SOCIETY OF ST VINCENT DE PAUL AT	1300	20103	7,027.	0.			- ODDIC/ DOCTETT DENEFTT
ST. MATTHIAS CATHOLIC CHURCH - 302							
SOUTH MAGNOLIA BLVD MAGNOLIA,	**-***4210	E0102	9 000				DIDITO/COCTEMY DEVIDETM
TX 77355	4210	501C3	8,000.	0.			PUBLIC/SOCIETY BENEFIT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SON OF A SAINT							
P.O. BOX 19205							
NEW ORLEANS, LA 70179	**-***4558	501C3	314,820.	0.			YOUTH DEVELOPMENT
SONG (FORMERLY MQVN CD							
CORPORATION) - 4626 ALCEE FORTIER							
BLVD., UNIT 1B - NEW ORLEANS, LA							
70129	**-***2186	501C3	50,500.	0.			COMMUNITY IMPROVEMENT
SOUTH LOUISIANA WETLANDS DISCOVERY CENTER - 7910 PARK AVENUE - HOUMA, LA 70364	**_***3998	501C3	55,874.	0.			ENVIRONMENT
SOUTHEAST LOUISIANA LEGAL SERVICES							
CORPORATION - P.O. DRAWER 2867 -							
HAMMOND, LA 70404	**-***7422	501C3	16,146.	0.			HUMAN SERVICES
SOUTHERN ANIMAL FOUNDATION							
1823 MAGAZINE STREET	**-***4028	501C3	22,253.	0.			ANIMALS
NEW ORLEANS, LA 70130	- 4028	50103	22,255.	0.			ANIMALS
SOUTHERN DOMINICAN PROVINCE							
P.O. BOX 8129							
NEW ORLEANS, LA 70182	**-***1284	501C3	15,430.	0.			HUMAN SERVICES
·							
SOUTHERN MUTUAL HELP ASSOCIATION							
3602 OLD JEANERETTE ROAD							
NEW IBERIA, LA 70563	**-***6092	501C3	75,000.	0.			COMMUNITY IMPROVEMENT
SOUTHERN UNIVERSITY OF NEW ORLEANS							
6400 PRESS DRIVE	** ***			_			
NEW ORLEANS, LA 70126	**-***9587	501C3	55,476.	0.			EDUCATION
SPAY-MART, INC							
P.O. BOX 6493							FUND RAISING & FUND
METAIRIE, LA 70009	**-***8016	501C3	142,981.	0.			DISTRIBUTION

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Scho	edule I (Form 990), Pa r	ırt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPIRIT OF CHARITY FOUNDATION							
2000 CANAL STREET							
NEW ORLEANS, LA 70112	**-***1751	501C3	10,161.	0.			HEALTH
SPIRIT OF ST. BERNARD FOUNDATION							
PO BOX 212							
ARABI, LA 70032	**-***3378	501C3	103,667.	0.			PHILANTHROPY
SPROUT NOLA							
527 FLOOD STREET							FUND RAISING & FUND
NEW ORLEANS, LA 70117	**-***7849	501C3	21,446.	0.			DISTRIBUTION
ST. ANDREW'S EPISCOPAL CHURCH							
1031 S. CARROLLTON AVENUE							
NEW ORLEANS, LA 70118	**-***5542	501C3	20,223.	0.			PUBLIC/SOCIETY BENEFIT
ST. ANDREW'S EPISCOPAL SCHOOL							
8012 OAK STREET							
NEW ORLEANS, LA 70118	**-***4864	501C3	78,819.	0.			EDUCATION
ST. ANNA'S EPISCOPAL CHURCH							
1313 ESPLANADE AVENUE							
NEW ORLEANS, LA 70116	**-***1881	501C3	51,007.	0.			EDUCATION
ST. AUGUSTINE HIGH SCHOOL							
2600 A.P. TUREAUD AVENUE							
NEW ORLEANS, LA 70119	**-***9545	501C3	83,957.	0.			EDUCATION
ST. BERNARD ECONOMIC DEVELOPMENT							
FOUNDATION - 100 PORT BOULEVARD,							
SUITE 210 - CHALMETTE, LA 70043	**-***2951	501C3	22,240.	0.			ECONOMIC DEVELOPMENT
ST. BERNARD PROJECT (DBA SBP)							
2645 TOULOUSE STREET							
NEW ORLEANS, LA 70119	**-***9665	501C3	139,971.	0.			COMMUNITY IMPROVEMENT

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ET. BERNARD VOLUNTEERS FOR FAMILY AND COMMUNITY - PO BOX 1505 - CHALMETTE, LA 70044	** ₋ ***0079	501c3	10,400.	0.			COMMUNITY IMPROVEMENT
ST. CHARLES AVENUE PRESBYTERIAN CHURCH - 1545 STATE STREET - NEW DRLEANS, LA 70118	**_**3638	501c3	29,727.	0.			PUBLIC/SOCIETY BENEFIT
ST. FRANCIS ANIMAL SANCTUARY P.O. BOX 616 MANDEVILLE, LA 70470	**-***2429	501C3	21,838.	0.			PUBLIC/SOCIETY BENEFIT
ST. FRANCIS OF ASSISI CATHOLIC PARISH - 118 NORTH NEW STREET - STAUNTON, VA 24401	**-***5890	501c3	27,000.	0.			PUBLIC/SOCIETY BENEFIT
ST. GEORGES EPISCOPAL SCHOOL 923 NAPOLEON AVENUE NEW ORLEANS, LA 70115	**-***4077	501C3	116,843.	0.			EDUCATION
ET. JAMES SCHOOL 17641 COLLEGE ROAD HAGERSTOWN, MD 21740	**-***1413	501C3	251,000.	0.			EDUCATION
ET. JOHN RECOVERY GROUP (DBA NEW WINE CHRISTIAN FELLOWSHIP) - PO BOX 633 - LAPLACE, LA 70069	**-***2788	501c3	50,500.	0.			PUBLIC/SOCIETY BENEFIT
ST. MARTIN'S EPISCOPAL SCHOOL 225 GREEN ACRES ROAD METAIRIE, LA 70003	**-***5552	501C3	70,500.	0.			EDUCATION
ST. MICHAEL THE ARCHANGEL CATHOLIC PARISH - 1100 NORTH COLLEGE STREET - AUBURN, AL 36830	**-***3762	501c3	20,000.	0.			PUBLIC/SOCIETY BENEFIT

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa I	rt II.) T	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. MICHAEL'S SPECIAL SCHOOL							
1522 CHIPPEWA STREET							
NEW ORLEANS, LA 70130	**-***6395	501C3	38,295.	0.			EDUCATION
ST. PAUL'S EPISCOPAL SCHOOL							
6249 CANAL BLVD.							
NEW ORLEANS, LA 70124	**-***1323	501C3	8,974.	0.			EDUCATION
ST. TAMMANY ANIMAL RESOURCE TEAM,							
INC P. O. BOX 1186 -							
MADISONVILLE, LA 70447	**-***3065	501C3	7,581.	0.			ANIMALS
ST. TAMMANY HUMANE			,				
SOCIETY/NORTHSHORE HUMANE SOCIETY							
- 20384 HARRISON AVENUE -							
COVINGTON, LA 70433	**-***3369	501C3	37,125.	0.			HUMAN SERVICES
ST. TAMMANY OUTREACH FOR THE							
PREVENTION OF SUICIDE - 427 N.							
THEARD STREET - COVINGTON, LA							
70433	**-***6206	501C3	10,230.	0.			PUBLIC/SOCIETY BENEFIT
ST. THERESE ACADEMY							
6421 W. METAIRIE ROAD							
METAIRIE, LA 70003	**-***7151	501C3	14,684.	0.			EDUCATION
ST. THOMAS COMMUNITY HEALTH CENTER							
1936 MAGAZINE STREET							
NEW ORLEANS, LA 70130	**-***8494	501C3	54,286.	0.			HEALTH
CONDUCTION OF ADVISOR OF THE PROPERTY OF THE							
START THE ADVENTURE IN READING INC							
1545 STATE STREET NEW ORLEANS, LA 70118	**-***8996	501C3	31,866.	0.			EDUCATION
THE CALLERYO, DA /VIIO	0990	50103	31,000.	0.			PROCEETION
STEM LIBRARY LAB							
3011 N I-10 SERVICE ROAD E	**-*** 4 985	E0102	11 754	_			EDUCATION
METAIRIE, LA 70002	4985	DOTC3	11,754.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEM NOLA							
4910 DREXEL DRIVE, BOX 61							
NEW ORLEANS, LA 70125	**-***6976	501C3	130,165.	0.			EDUCATION
STRIVE INCORPORATED							
1139 NAPOLEON AVENUE							
NEW ORLEANS, LA 70115	**-***7127	501C3	6,643.	0.			HUMAN SERVICES
STUART HALL SCHOOL							
2032 S. CARROLLTON AVENUE							
NEW ORLEANS, LA 70118	**-***8860	501C3	42,839.	0.			EDUCATION
CUICAD DOOMS FARM INC							
SUGAR ROOTS FARM INC 10701 WILLOW DRIVE							
	-*0621	501C3	103,540.	0.			FOOD/NUTRITION
NEW ORLEANS, LA 70131	- 0021	50103	103,540.	0.			FOOD/NOTRITION
SUSTAINING OUR URBAN LANDSCAPE							
130 S TELEMACHUS STREET							
NEW ORLEANS, LA 70119	**-***6653	501C3	42,515.	0.			ENVIRONMENT
GYMDHONY GUODHG OF NEW ODI FANG							
SYMPHONY CHORUS OF NEW ORLEANS PO BOX 50542							
NEW ORLEANS, LA 70150	**-***2296	501C3	7,390.	0.			ARTS/CULTURE
THE STEELING, ELI , 6150		30103	7,330.	•			Intib, collinia
TAKE PAWS RESCUE							
2730 BANKS STREET							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***9005	501C3	16,986.	0.			DISTRIBUTION
TEACH FOR AMERICA - GNO							
865 FULTON STREET, SUITE 400							
NEW ORLEANS, LA 70130	**-***1913	501C3	66,228.	0.			EDUCATION
FEACHING RESPONSIBLE EARTH							
EDUCATION - 6221 S. CLAIBORNE							L
AVENUE, SUITE 628 - NEW ORLEANS,	** *****			_			FUND RAISING & FUND
LA 70125	**-***0276	501C3	8,191.	0.		1	DISTRIBUTION

1	The strong and strong		overmiente (een	5 daie 1 (1 61111 666), 1 d	T	1
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
						FUND RAISING & FUND
-*9316	501C3	156 998.	0.			DISTRIBUTION
-*8036	501C3	18,753.	0.			ARTS/CULTURE
-*3477	501C3	72,375.	0.			EDUCATION
** ***	504.50	24 524				
-*9062	501C3	31,534.	0.			EDUCATION
-*0297	501C3	15 000.	0.			FOOD/NUTRITION
0257		20,000.	-			1 002, 110111111111
						FUND RAISING & FUND
-*8658	501C3	5,878.	0.			DISTRIBUTION
-*3546	501C3	6,000.	0.			ARTS/CULTURE
-*3850	501C3	35,858.	0.			COMMUNITY IMPROVEMENT
						YOUTH DEVELOPMENT
	(b) EIN **-***9316 **-***8036 **-***3477 **-***9062 **-***8658 **-***3546 **-***3546	(b) EIN (c) IRC section if applicable **-***9316 501C3 **-***3477 501C3 **-***9062 501C3 **-***9062 501C3 **-***8658 501C3 **-***3546 501C3 **-***3546 501C3	(b) EIN (c) IRC section if applicable (d) Amount of cash grant **-***9316 501c3 156,998. **-***3477 501c3 72,375. **-***9062 501c3 31,534. **-***0297 501c3 15,000. **-***8658 501c3 5,878. **-***3546 501c3 6,000. **-***3850 501c3 35,858.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance **-***9316 501C3 156,998. 0. **-***8036 501C3 18,753. 0. **-***9062 501C3 72,375. 0. **-***9062 501C3 31,534. 0. **-***8658 501C3 15,000. 0. **-***3546 501C3 5,878. 0. **-***3850 501C3 35,858. 0.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (book, FMV, appraisal, other) **-***9316 501c3 156,998. 0. **-***3477 501c3 72,375. 0. **-***9062 501c3 31,534. 0. **-***9062 501c3 15,000. 0. **-***8658 501c3 5,878. 0. **-***3546 501c3 6,000. 0. **-***3546 501c3 0.	**-***9316 501c3 156,998. 0. **-***8036 501c3 18,753. 0. **-***9062 501c3 31,534. 0. **-***0297 501c3 15,000. 0. **-***8658 501c3 5,878. 0.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BOAR'S NEST							
1560 HENRY CLAY AVENUE							
NEW ORLEANS, LA 70118	**-***2110	501C3	22,500.	0.			PUBLIC/SOCIETY BENEFIT
THE CHARTWELL CENTER							
1225 MAGAZINE STREET							
NEW ORLEANS, LA 70130	**-***2874	501C3	16,800.	0.			EDUCATION
THE COOL COOPERATIVE, INC.							
105 JARRELL DRIVE							FUND RAISING & FUND
BELLE CHASSE, LA 70037	**-***9146	501C3	6,650.	0.			DISTRIBUTION
THE FIRST 72+/RISING FOUNDATIONS							
2915 PERDIDO STREET				_			_
NEW ORLEANS, LA 70119	**-***3909	501C3	69,432.	0.			PUBLIC/SOCIETY BENEFIT
THE FIRST TEE OF GREATER NEW							
ORLEANS - 3201 GENERAL DE GAULLE							
DRIVE, SUITE 102 - NEW ORLEANS, LA							
70114	**-***0528	501C3	123,471.	0.			YOUTH DEVELOPMENT
THE FRONT							
4100 ST. CLAUDE AVENUE							FUND RAISING & FUND
NEW ORLEANS, LA 70117	**-***1411	501C3	7,399.	0.			DISTRIBUTION
THE GOOD SHEPHERD NATIVITY SCHOOL							
1839 AGRICULTURE STREET							
NEW ORLEANS, LA 70119	**-***905 4	501C3	45,008.	0.			EDUCATION
	7034	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	45,000.	•			
THE GREEN PROJECT, INC.							
2831 MARAIS STREET							
NEW ORLEANS, LA 70117	**-***9769	501C3	5,947.	0.			ENVIRONMENT
			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
THE IDEA VILLAGE, INC.							
900 CAMP STREET, SUITE 308							
NEW ORLEANS, LA 70130	**-***0675	501C3	98,500.	0.			ECONOMIC DEVELOPMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JAPANESE GARDEN FOUNDATION OF							
NEW ORLEANS - 566 EMERALD STREET - NEW ORLEANS, LA 70124	**-***1573	501C3	5,031.	0.			ENVIRONMENT
THE LENS							
P.O. BOX 13242 NEW ORLEANS, LA 70185	**-***2772	501C3	40,098.	0.			CIVIC ENGAGEMENT
THE NOLA PROJECT							
1 COLLINS DIBOLL CIRCLE NEW ORLEANS, LA 70124	**-***6597	501C3	12,782.	0.			ARTS/CULTURE
THE OZOLS COLLECTION: A MUSEUM OF AMERICAN PAINTING AND PEDAGOGY - 4627 BARONNE STREET - NEW ORLEANS,							
LA 70115	**-***0976	501C3	7,246.	0.			ARTS/CULTURE
THE PRO BONO PROJECT							
935 GRAVIER STREET, SUITE 1340 NEW ORLEANS, LA 70112	**-***4167	501C3	16,501.	0.			FUND RAISING & FUND DISTRIBUTION
THE ROOTS OF MUSIC, INC.							
2624 BURGUNDY STREET NEW ORLEANS, LA 70117	**-***0255	501C3	81,384.	0.			ARTS/CULTURE
THE SALVATION ARMY							
4526 S. CLAIBORNE AVENUE NEW ORLEANS, LA 70125	**-***0607	501C3	24,659.	0.			HUMAN SERVICES
THE SPLIT SECOND FOUNDATION							
P.O. BOX 8620	**-***0639	501C3	0 071	0.			UUMAN CEDUTCEC
NEW ORLEANS, LA 70182	- "0039	Porc3	8,871.	0.			HUMAN SERVICES
THE STEP ONE SCHOOL 499 SPRUCE STREET							
BERKELEY, CA 94708	**-***9939	501C3	10,000.	0.			EDUCATION

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE TIDES CENTER							
P.O. BOX 29907							
SAN FRANCISCO, CA 94129	**-***3100	501C3	16,894.	0.			SOCIAL SERVICES
THE UNIVERSITY OF MISSISSIPPI							
FOUNDATION - 406 UNIVERSITY AVENUE							
- OXFORD, MS 38655	**-***0293	501C3	10,000.	0.			EDUCATION
THE URBAN CONSERVANCY							
1239 BARONNE STREET, SUITE A							
NEW ORLEANS, LA 70113	**-***7826	501C3	56,837.	0.			CIVIC ENGAGEMENT
THE WOMAN'S EXCHANGE (DBA			,				
HERMANN-GRIMA + GALLIER HISTORIC							
HOUSES) - P.O. BOX 56836 - NEW							
ORLEANS, LA 70156	**-***8902	501C3	6,154.	0.			ARTS/CULTURE
MUOMU GUADIMING II G							
THOTH CHARITIES LLC 1215 PRYTANIA STREET							
	-*1260	501C3	10,843.	0.			HUMAN SERVICES
NEW ORLEANS, LA 70130	- 1200	50105	10,045.	0.			HOMAN SERVICES
THRIVE NEW ORLEANS							
1433 N CLAIBORNE AVENUE							
NEW ORLEANS, LA 70116	**-***4498	501C3	26,300.	0.			HUMAN SERVICES
TOURO INFIRMARY FOUNDATION							
1401 FOUCHER STREET							
NEW ORLEANS, LA 70115	**_***9939	501C3	19,017.	0.			 HEALTH
,							
TOURO SYNAGOGUE							
4238 ST. CHARLES AVENUE							
NEW ORLEANS, LA 70115	**-***8158	501C3	20,000.	0.			PUBLIC/SOCIETY BENEFIT
TRAINING GROUNDS							
1597 CUTTYSARK COVE							FUND RAISING & FUND
SLIDELL, LA 70458	**-***3953	501C3	152,295.	0.			DISTRIBUTION

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	urt II.)	i
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRAP DAT CAT INC.							
P. O. BOX 850212							
NEW ORLEANS, LA 70185	**-***7256	501C3	6,055.	0.			ANIMALS
TRAVELERS AID SOCIETY OF GREATER							
NEW ORLEANS - 1530 GRAVIER STREET							
- NEW ORLEANS, LA 70112	**-***8990	501C3	5,152.	0.			HUMAN SERVICES
TRINITY CHRISTIAN COMMUNITY							
3908 JOLIET STREET							
NEW ORLEANS, LA 70118	**-***9114	501C3	58,803.	0.			PUBLIC/SOCIETY BENEFIT
TRINITY EPISCOPAL CHURCH							
1329 JACKSON AVENUE							
NEW ORLEANS, LA 70130	**-***7513	501C3	302,662.	0.			PUBLIC/SOCIETY BENEFIT
TULANE CANAL NEIGHBORHOOD							
DEVELOPMENT CORP 2200 TULANE							
AVENUE - NEW ORLEANS, LA 70119	**-***2559	501C3	25,806.	0.			COMMUNITY IMPROVEMENT
TULANE HILLEL							
912 BROADWAY STREET							
NEW ORLEANS, LA 70118	**-***1116	501C3	10,334.	0.			PUBLIC/SOCIETY BENEFIT
TULANE UNIVERSITY							
P.O. BOX 669394							
DALLAS, TX 75266	**-***3889	501C3	727,452.	0.			EDUCATION
MIDNING MADIES							
TURNING TABLES 1810 HASTINGS PLACE, #4							
NEW ORLEANS, LA 70130	**-***2226	501C3	24,041.	0.			EDUCATION
UDINOU VIII AGE							
UBUNTU VILLAGE 2021 S. DUPRE STREET							
NEW ORLEANS, LA 70125	**-***8051	501C3	7,309.	0.			SOCIAL SERVICES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UJAMAA ECONOMIC DEVELOPMENT CORPORATION - 1240 N CLAIBORNE AVENUE - NEW ORLEANS, LA 70116	**-** 4 066	501C3	24,193.	0.			ECONOMIC DEVELOPMENT
ULI FOUNDATION 2001 L ST. NW, SUITE 200 WASHINGTON, DC 20036	**_***3957	501C3	10,000.	0.			ENVIRONMENT
UNCOMMON CONSTRUCTION PO BOX 791438 NEW ORLEANS, LA 70179	**-***3284	501C3	69,755.	0.			YOUTH DEVELOPMENT
UNION FOR REFORM JUDAISM 633 THIRD AVENUE, 7TH FLOOR NEW YORK, NY 10017	**-***3143	501C3	86,904.	0.			CIVIC ENGAGEMENT
UNITED HOUMA NATION 400 MONARCH DRIVE HOUMA, LA 70364	**-***2264	501C3	48,969.	0.			FUND RAISING & FUND DISTRIBUTION
UNITED STATES CONFERENCE OF CATHOLIC BISHOPS - 3211 4TH ST. NE - WASHINGTON, DC 20017	**-***6617	501C3	51,298.	0.			PUBLIC/SOCIETY BENEFIT
UNITED WAY OF SOUTHEAST LOUISIANA 2401 CANAL STREET NEW ORLEANS, LA 70119	**-***1369	501C3	532,539.	0.			HUMAN SERVICES
UNITED WAY OF ST. CHARLES 13207 RIVER ROAD LULING, LA 70070	**_***8066	501C3	101,500.	0.			HUMAN SERVICES
UNITY OF GREATER NEW ORLEANS 2475 CANAL STREET, SUITE 300 NEW ORLEANS, LA 70119	**-***2911	501C3	50,453.	0.			HUMAN SERVICES

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF HOLY CROSS							
4123 WOODLAND DRIVE							
NEW ORLEANS, LA 70131	**-***2832	501C3	46,026.	0.			EDUCATION
UNIVERSITY OF NEW ORLEANS							
FOUNDATION - 2021 LAKESHORE DRIVE,							
SUITE 420 - NEW ORLEANS, LA 70122	**-***1326	501C3	579,244.	0.			EDUCATION
UNIVERSITY OF TEXAS FOUNDATION							
9011 MOUNTAIN RIDGE DRIVE, SUITE.							
AUSTIN, TX 78759	**-***9336	501C3	20,000.	0.			EDUCATION
UNIVERSITY PRESBYTERIAN CHURCH							
3240 DALRYMPLE DRIVE							
BATON ROUGE, LA 70802	**-***1426	501C3	7,000.	0.			PUBLIC/SOCIETY BENEFIT
UPTURN ARTS							
1719 TOLEDANO STREET							
NEW ORLEANS, LA 70115	**-***5350	501C3	46,124.	0.			ARTS/CULTURE
· · · · · · · · · · · · · · · · · · ·			, -	-			·
URBAN LEAGUE OF LOUISIANA							
4640 S. CARROLLTON AVENUE, SUITE 2							FUND RAISING & FUND
NEW ORLEANS, LA 70119	**-***3627	501C3	117,767.	0.			DISTRIBUTION
URSULINE ACADEMY							
2635 STATE STREET							
NEW ORLEANS, LA 70118	**-***4891	501C3	37,937.	0.			EDUCATION
IIII ONDERIS, EII (OIIO	1031	30103	37,337.	<u> </u>			
US BIENNIAL INC.							
PO BOX 58800							
NEW ORLEANS, LA 70158	**-***4608	501C3	25,000.	0.			ARTS/CULTURE
HIM HEALTH CAN ANDONTO							
UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE MC 7835							
SAN ANTONIO, TX 78229	**-***7488	501C3	15,000.	0.			 HEALTH
DIM IMIONIO, IN 10223	/ 400	Porcs	13,000.	0.		I .	hearth

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VERMONT COMMUNITY FOUNDATION 3 COURT STREET MIDDLEBURY, VT 05753	**-***2160	501C3	50,000.	0.			COMMUNITY IMPROVEMENT
VIA LINK, INC 5001 HWY 190, SUITE C-1 COVINGTON, LA 70433	**-***6669	501C3	73,628.	0.			PUBLIC/SOCIETY BENEFIT
VIETNAMESE INITIATIVE IN ECONOMIC TRAINING - 13435 GRANVILLE STREET - NEW ORLEANS, LA 70129	**_***6796	501C3	8,849.	0.			ECONOMIC DEVELOPMENT
VIEUX CARRE COMMISSION FOUNDATION P. O. BOX 57444 NEW ORLEANS, LA 70157	**-***4605	501C3	5,773.	0.			FUND RAISING & FUND DISTRIBUTION
VIEUX CARRE PROPERTY OWNERS RESIDENTS AND ASSOCIATES - P.O. BOX 56095 - NEW ORLEANS, LA 70156	**-***8940	501C3	5,464.	0.			FUND RAISING & FUND DISTRIBUTION
VOLUNTEER FLORIDA FOUNDATION 1545 RAYMOND DEIHL ROAD, SUITE 250 TALLAHASSEE, FL 32308	**-***3168	501C3	10,000.	0.			FUND RAISING & FUND DISTRIBUTION
VOLUNTEERS OF AMERICA SOUTHEAST LOUISIANA - 4152 CANAL STREET - NEW ORLEANS, LA 70119	**-***9750	501C3	13,256.	0.			SOCIAL SERVICES
WAKE 3713 N. RAMPART STREET NEW ORLEANS, LA 70117	**-***6274	501C3	8,266.	0.			FUND RAISING & FUND DISTRIBUTION
WARREN WILSON COLLEGE WWC 6376 PO BOX 9000 ASHEVILLE, NC 28815	**-***7736	501C3	15,000.	0.			EDUCATION

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON AND LEE UNIVERSITY 204 W. WASHINGTON STREET LEXINGTON, VA 24450	**-***5977	501C3	105,000.	0.			EDUCATION
WATER WISE GULF SOUTH 641 CONGRESS STREET NEW ORLEANS, LA 70117	**-***6699	501 c 3	302,100.	0.			ENVIRONMENT
WHOLE VILLAGE ART THERAPY INC. 3436 MAGAZINE STREET, SUITE 542 NEW ORLEANS, LA 70115	**-***3953	501C3	6,479.	0.			ARTS/CULTURE
WIGGED OUT INC. 7227 NORTH 16 STREET, SUITE 113 PHOENIX, AZ 85020	**-***6316	501C3	112,000.	0.			HEALTH
WINROCK INTERNATIONAL 204 EAST 4TH STREET NORTH LITTLE ROCK, AR 72114	**-***3560	501 c 3	10,000.	0.			COMMUNITY IMPROVEMENT
WLAE-CHANNEL 32 TV/EDUCATIONAL BROADCAST. FDTN PO BOX 792497 - NEW ORLEANS, LA 70179	**-***0100	501 c 3	13,399.	0.			EDUCATION
WOMAN'S NEW LIFE CLINIC 4612 S. CLAIBORNE AVENUE NEW ORLEANS, LA 70125	**-***5326	501 c 3	11,906.	0.			HUMAN SERVICES
WOMEN DONORS NETWORK PO BOX 2930 SAN FRANCISCO, CA 94126	**-***2397	501C3	200,000.	0.			PHILANTHROPY
WOMEN WITH A VISION, INC. 2030 ORETHA CASTLE HALEY BLVD. NEW ORLEANS, LA 70113	**-***2185	501c3	8,226.	0.			FUND RAISING & FUND DISTRIBUTION

Part II Continuation of Grants and Other	Assistance to De	omestic Organization	s and Domestic G	overnments (Scho	edule i (Form 990), Pa	п II.) 	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOMEN'S BUSINESS ENTERPRISE							
COUNCIL SOUTH - 401 ST. JOSEPH							
STREET, SUITE 2A - NEW ORLEANS, LA							
70130	**-***2436	501C3	10,555.	0.			ECONOMIC DEVELOPMENT
WOODLANDS CONSERVANCY							
1500 WOODLAND HIGHWAY, SUITE A							FUND RAISING & FUND
BELLE CHASSE, LA 70037	**-***6708	501C3	8,990.	0.			DISTRIBUTION
WORLD CENTRAL KITCHEN							
200 MASSACHUSETTS AVENUE NW, 7TH F	** *****	50193	100 550				
WASHINGTON, DC 20001	**-***1132	501C3	102,750.	0.			FOOD/NUTRITION
WORLDWIDE FISTULA FUND							
1100 E. WOODFIELD ROAD, SUITE 350							
SCHAUMBURG, IL 60173	**-***9210	501C3	100,000.	0.			PUBLIC/SOCIETY BENEFIT
			, -	-			·
WRBH FM RADIO FOR THE BLIND/PRINT							
HANDICAPPED - 3606 MAGAZINE STREET							
- NEW ORLEANS, LA 70115	**-***5663	501C3	24,851.	0.			SOCIAL SERVICES
WWOZ							
PO BOX 51840	**-***2220	501C3	10 160	0.			ARTS/CULTURE
NEW ORLEANS, LA 70151		501C3	18,162.	0.			ARTS/CULTURE
XAVIER UNIVERSITY OF LOUISIANA							
1 DREXEL DRIVE, SUITE 600							
NEW ORLEANS, LA 70125	**-***5884	501C3	16,181.	0.			EDUCATION
YMCA OF GREATER NEW ORLEANS							
320 METAIRIE HAMMOND HIGHWAY, SUIT							
METAIRIE, LA 70005	**-***3890	501C3	128,309.	0.			HUMAN SERVICES
YOUNG ASPIRATIONS - YOUNG ARTISTS,							
INC 3322 LASALLE STREET - NEW	**-***2928	E0103	60 160				ADMG / GILL MIDE
ORLEANS, LA 70115	7928	501C3	68,162.	0.			ARTS/CULTURE

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUNG LEADERSHIP COUNCIL INC.							
EW ORLEANS, LA 70156	**-***8004	501C3	17,997.	0.			PUBLIC/SOCIETY BENEFIT
OUTH EMPOWERMENT PROJECT 600 ORETHA CASTLE HALEY BLVD EW ORLEANS, LA 70113	**-***3060	501C3	300,547.	0.			YOUTH DEVELOPMENT
OUTH RUN NOLA INC. 035 WASHINGTON AVENUE IEW ORLEANS, LA 70125	**_***9783	501C3	25,930.	0.			YOUTH DEVELOPMENT
OUTHFORCE NOLA 100 POYDRAS STREET, SUITE 1405 IEW ORLEANS, LA 70163	**-***6930	501c3	264,795.	0.			EDUCATION
WCA OF GREATER NEW ORLEANS O BOX 50255	**-***7142	501.03	15.516				
EW ORLEANS, LA 70150	**-***/142	501C3	17,716.	0.			HUMAN SERVICES
EUS RESCUES INC. 520 NAPOLEON AVENUE EW ORLEANS, LA 70115	**-***0493	501C3	40,883.	0.			FUND RAISING & FUND DISTRIBUTION

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EMPLOYEE ASSISTANCE FUND RECIPIENT	544	1,530,600.	. 0.	FMV	
Part IV Supplemental Information. Provide the information re	quired in Part I, lin	e 2; Part III, column	n (b); and any other a	dditional information.	
PART 1, LINE 2 - PROCEDURES FOR MONITORING USE OF	GRANTS FUNDS	IN U.S.			
THE GREATER NEW ORLEANS FOUNDATION ("GNOF") IS A C	OMMUNITY FOUN	DATION			
THAT MANAGES THE PROCESS OF MAKING DISTRIBUTIONS T	O VARIOUS CHA	RITIES,			
AS REFLECTED IN SCHEDULE I, PART II. GNOF CONDUCTS	A PRE-GRANT	INQUIRY			
TO ENSURE THAT THE GRANTEE IS APPROPRIATE, SUCH AS					
STATUS UNDER SECTION 501(C)(3) OR BEING A GOVERNME					
EXECUTES A WRITTEN AGREEMENT WITH THE GRANTEE THAT					
CHARITABLE PURPOSE OF THE GRANT AND INCLUDES PROVI					
CHIRCHDOLD TORIOGE OF THE GRANT AND INCHODES PROVI	STONS THAT PRO	OHIDII.			
THE USE OF THE FUNDS FOR NON-CHARITABLE PURPOSES,	POLITICAL CAM	PAIGN			

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

THE GREATER NEW ORLEANS FOUNDATION

Employer identification number **-**8921

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		<u> </u>
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any person listed on Form 900 Part VII. Section A. line 1s, with respect to the filling			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а		4a		Х
h	Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
c		4c		X
Ĭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		<u> </u>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ANDREW KOPPLIN	(i)	342,290.	36,000.	0.	30,263.	18,672.	427,225.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ERIC SELING	(i)	214,228.	13,900.	0.	18,250.	7.	246,385.	0.
VP, FINANCE & OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KENNETH ST. CHARLES	(i)	188,549.	7,000.	0.	15,644.	468.	211,661.	0.
VP, PHILANTHROPY	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KELLIE CHAVEZ-GREENE	(i)	166,665.	10,500.	0.	14,173.	19,527.	210,865.	0.
VP, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KARLA RIVERA	(i)	168,801.	10,500.	0.	14,344.	5,831.	199,476.	0.
CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SHERINA CLAVIER	(i)	134,404.	8,500.	0.	11,432.	754.	155,090.	0.
DIRECTOR, FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)			_				
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

THE GREATER NEW ORLEANS FOUNDATION

Employer identification number **-***8921

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		_	s
1	Art - Works of art			, , ,				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7								
8	Boats and planes Intellectual property							
9	Securities - Publicly traded	X	59	4 310 985	SELLING PRICE			
10	Securities - Publicity traded Securities - Closely held stock	A	3,	1,310,303	DEBEING TRICE			
11	Securities - Partnership, LLC, or							
10	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
44	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organic		-					
	for which the organization completed Form 82	83, Part V, [Oonee Acknowledg	gement 29				
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least 3 years from the date of		•	•				
	exempt purposes for the entire holding period	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance					31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash	1			
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Schedule N	1 (Forr	n 990)	2022

232141 09-09-22

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, LINE 32B:
THE FOUNDATION USES THE SERVICE OF REAL ESTATE PROFESSIONALS IN
LIQUIDATING GIFTS OF RESIDENTIAL AND COMMERCIAL REAL ESTATE. THE
FOUNDATION USES THE SERVICES OF INVESTMENT PROFESSIONALS IN LIQUIDATING
GIFTS OF MARKETABLE SECURITIES.

SCHEDULE O (Form 990)

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 Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public

Open to Public Inspection

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION FOR THE SOUTHEAST LOUISIANA REGION. IMPROVING OUR COMMUNITY'S FUTURE THROUGH FUND MANAGEMENT, NONPROFIT EFFECTIVENESS TRAINING, PROGRAMMATIC INITIATIVES. AND BY PROMOTING PHILANTHROPY ITSELF. WITH APPROXIMATELY \$450 MILLION IN ASSETS AND A RECENT HISTORY OF GRANTING TO NONPROFITS \$25 TO \$35 MILLION ANNUALLY, THE FOUNDATION STRIVES TO BE THE LEADER OF STRATEGIC AND IMPACTFUL PHILANTHROPY IN SOUTHEAST LOUISIANA. THE FOUNDATION'S KNOWLEDGEABLE STAFF WORKS CLOSELY WITH DONORS AND HIGH-PERFORMING ORGANIZATIONS THAT SEEK TO CREATE A VIBRANT SUSTAINABLE, AND JUST GREATER NEW ORLEANS REGION FOR ALL. BY WORKING WITH THE FOUNDATION, GENEROUS INDIVIDUALS ARE GIVEN THE HIGHEST-QUALITY DONOR SERVICES AND FUND MANAGEMENT. BY PARTNERING WITH THE FOUNDATION ORGANIZATIONS RECEIVE GRANTS AND TRAINING THAT HELP THEM ACHIEVE THEIR MISSIONS WHILE MAINTAINING FINANCIAL STABILITY AND PROGRAMMATIC STRENGTH. IN ITS EXTENSIVE DISASTER RESPONSE AND RECOVERY EFFORTS PUBLIC EDUCATION INITIATIVES, WORKFORCE DEVELOPMENT PROGRAMMING ENVIRONMENTAL INITIATIVES, RACIAL EQUITY INITIATIVES, AND NONPROFIT EFFECTIVENESS WORK, THE FOUNDATION SERVES AS A VITAL CIVIC LEADER TO BRING PEOPLE ACROSS SOUTHEAST LOUISIANA TOGETHER TO SOLVE OUR REGION'S MOST PRESSING CHALLENGES. FORM 990, PART III, LINE 1 AND BY PROMOTING PHILANTHROPY ITSELF. WITH APPROXIMATELY \$450 MILLION

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

IN ASSETS AND A RECENT HISTORY OF GRANTING TO NONPROFITS \$25 TO \$35

Schedule O (Form 990) 2022

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION MILLION ANNUALLY, THE FOUNDATION STRIVES TO BE THE LEADER OF STRATEGIC AND IMPACTFUL PHILANTHROPY IN SOUTHEAST LOUISIANA. THE FOUNDATION'S KNOWLEDGEABLE STAFF WORKS CLOSELY WITH DONORS AND HIGH-PERFORMING ORGANIZATIONS THAT SEEK TO CREATE A VIBRANT SUSTAINABLE, AND JUST GREATER NEW ORLEANS REGION FOR ALL. BY WORKING WITH THE FOUNDATION, GENEROUS INDIVIDUALS ARE GIVEN THE HIGHEST-QUALITY DONOR SERVICES AND FUND MANAGEMENT. BY PARTNERING WITH THE FOUNDATION, ORGANIZATIONS RECEIVE GRANTS AND TRAINING THAT HELP THEM ACHIEVE THEIR MISSIONS WHILE MAINTAINING FINANCIAL STABILITY AND PROGRAMMATIC STRENGTH.IN ITS EXTENSIVE DISASTER RESPONSE AND RECOVERY EFFORTS. PUBLIC EDUCATION INITIATIVES, WORKFORCE DEVELOPMENT PROGRAMMING ENVIRONMENTAL INITIATIVES, RACIAL EQUITY INITIATIVES, AND NONPROFIT EFFECTIVENESS WORK, THE FOUNDATION SERVES AS A VITAL CIVIC LEADER TO BRING PEOPLE ACROSS SOUTHEAST LOUISIANA TOGETHER TO SOLVE OUR REGION'S MOST PRESSING CHALLENGES. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS FUND MANAGEMENT: BY WORKING WITH A DIVERSE SET OF GENEROUS INDIVIDUALS. THE FOUNDATION HELPS DONORS OF ALL TYPES DO THEIR PART TO SUPPORT CAUSES ABOUT WHICH THEY ARE PASSIONATE. THE FOUNDATION WORKS WITH INDIVIDUALS, SMALL BUSINESSES AND CORPORATIONS, LOCAL AND NATIONAL FOUNDATIONS, AND GOVERNMENT AGENCIES TO IMPROVE OUR REGION. WITH APPROXIMATELY 1,100 FUNDS UNDER MANAGEMENT, FUNDHOLDERS ARE PROVIDED WITH EXPERT GUIDANCE AND CONCIERGE SERVICE - ALL FROM THE FOUNDATION'S PHYSICAL HOME, THE CENTER FOR PHILANTHROPY, IN THE HEART OF DOWNTOWN NEW ORLEANS.

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Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION ENVIRONMENTAL PROGRAMS: GUIDED BY THE THEORY OF CHANGE FOR THE ENVIRONMENTAL PROGRAM, THE FOUNDATION WORKS TO OVERCOME THE SEVERE EFFECTS OF CLIMATE CHANGE ON THE COAST AND IN OUR CITIES THAT THREATEN THE FUTURE HEALTH AND SUSTAINABILITY OF SOUTHEAST LOUISIANA AND DISPROPORTIONATELY IMPACT BIPOC AND SOCIALLY AND ECONOMICALLY VULNERABLE COMMUNITIES DUE TO SYSTEMIC RACIAL INJUSTICES. TO PROMOTE EQUITABLE CLIMATE ADAPTATION AND MITIGATION, THE FOUNDATION FOCUSES ON SEVERAL PROGRAM AREAS: LIVING BETTER WITH WATER - FOR OVER A DECADE, THE FOUNDATION HAS BEEN A LEADER IN DEVELOPING AND PROMOTING THE REGION'S ABILITY TO IMPLEMENT GREEN STORMWATER INFRASTRUCTURE TO HELP REDUCE NEIGHBORHOOD FLOODING IMPROVE WATER QUALITY, AND RELIEVE PRESSURE ON THE PUMPS IN OUR DRAINAGE SYSTEMS. SINCE 2010, OVER \$4 MILLION IN GRANTS HAVE BEEN AWARDED TO SUPPORT ORGANIZATIONS WORKING TO BUILD THE MOVEMENT TO LIVE BETTER WITH WATER. THRIVING COASTAL COMMUNITIES - THE FOUNDATION FACILITATES SELA VOICE, A COALITION OF COMMUNITY-BASED ORGANIZATIONS IN COASTAL COMMUNITIES AND ENVIRONMENTAL ADVOCATES TO ENSURE STRONG COMMUNITY VOICE IN THE COMPLEX PROCESSES OF COASTAL PROTECTION AND RESTORATION. COMMUNITY-LED CLIMATE SOLUTIONS - THE FOUNDATION CONVENES THE CLIMATE ACTION EQUITY PROJECT ADVISORY GROUP TO WORK WITH THE CITY OF NEW ORLEANS AND DEEP SOUTH CENTER FOR ENVIRONMENTAL JUSTICE ON EQUITABLE IMPLEMENTATION OF THE CITY'S CLIMATE ACTION PLAN. THE FOUNDATION ALSO SUPPORTS THE IMPLEMENTATION OF THE NEW ORLEANS COMPREHENSIVE

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION REFORESTATION PLAN. SUSTAINABLE AND EQUITABLE TRANSPORTATION - THE FOUNDATION SUPPORTS NONPROFITS ACTIVE IN PROMOTING TRANSIT, BIKING, AND WALKING, AND IS CURRENTLY DEVELOPING FURTHER STRATEGIES TO BOLSTER SUSTAINABLE AND EQUITABLE MOBILITY OPTIONS. WORKFORCE PROGRAMS: THE FOUNDATION HAS BEEN AN INFLUENTIAL LEADER AND DRIVER OF POSITIVE CHANGE IN THE WORKFORCE ECOSYSTEM FOR OVER A DECADE. PARTICULARLY THROUGH THE CREATION OF NEW ORLEANS WORKS: HEALTHCARE. WHICH TRAINED AND PLACED OVER 500 INDIVIDUALS INTO ENTRY-LEVEL HEALTHCARE JOBS THAT OFFERED CAREER PATHS AND NAVIGATORS TO HELP THEM WITH NON-WORK ISSUES. IN 2022, THE FOUNDATION BEGAN A TRANSITION TO THE NEXT STAGE OF ITS LEADERSHIP AND INNOVATION IN WORKFORCE THROUGH THE FOLLOWING WORKFORCE PROJECTS: INDUSTRY SECTOR PARTNERSHIPS - INDUSTRY SECTOR PARTNERSHIPS (ISPS) BRING EDUCATION, WORKFORCE DEVELOPMENT, ECONOMIC DEVELOPMENT, AND COMMUNITY ORGANIZATIONS TOGETHER WITH BUSINESS LEADERS, FROM THE SAME INDUSTRY AND IN THE SAME LABOR MARKET. TO ADDRESS THE WORKFORCE AND OTHER COMPETITIVENESS NEEDS OF THAT INDUSTRY. IN PARTNERSHIP WITH AND WITH FUNDING FROM THE CITY'S OFFICE OF WORKFORCE DEVELOPMENT. THE FOUNDATION IS PLANNING AND DEVELOPING TWO INDUSTRY SECTOR PARTNERSHIPS FOR OUR REGION IN HEALTHCARE AND CONSTRUCTION/GREEN INFRASTRUCTURE TO INCREASE OPPORTUNITY AND ECONOMIC ADVANCEMENT FOR BOTH THESE INDUSTRIES AND THEIR TALENT POOLS.

WORKFORCE INTERMEDIARY - WORKFORCE INTERMEDIARIES ARE A BEST PRACTICE

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION IN WORKFORCE ACROSS THE COUNTRY AND HAVE BECOME ESSENTIAL TO SUCCESSFUL FEDERAL GRANT APPLICATIONS. THE FOUNDATION IS IN THE EARLY STAGES OF RESEARCH AND DEVELOPMENT AND IS WORKING WITH PARTNERS ON THE DEVELOPMENT OF AN INDEPENDENT, REGIONAL WORKFORCE INTERMEDIARY TO NOT ONLY HELP PROVIDE STRATEGIC COHERENCE FOR REGIONAL WORKFORCE EFFORTS BUT TO INCREASE ECONOMIC VITALITY AND ULTIMATELY GROW THE MIDDLE CLASS IN OUR REGION. NONPROFIT LEADERSHIP & EFFECTIVENESS (NLE): THE FOUNDATION WORKS AT ALL LEVELS OF THE NONPROFIT ECOSYSTEM IN SUPPORT OF A RESPONSIVE EQUITABLE, SUSTAINABLE, AND IMPACTFUL NONPROFIT SECTOR WHERE BOTH ORGANIZATIONS AND THEIR LEADERS ARE REACHING THEIR FULL POTENTIAL. SINCE NLE'S INCEPTION 10 YEARS AGO, THE FOUNDATION HAS BECOME THE GO-TO-SOURCE FOR NONPROFIT TRAINING, CAPACITY BUILDING, AND LEADERSHIP DEVELOPMENT IN THE GREATER NEW ORLEANS REGION. NLE HAS SERVED MORE THAN 1,000 NONPROFITS FROM ACROSS THE REGION AND HAS A STRONG TRACK RECORD FOR DELIVERING HIGH IMPACT TRAINING AND LEADERSHIP PROGRAMS ROOTED IN PEER-LEARNING, RACIAL EQUITY AND INCLUSION, AND LEADING-EDGE PRACTICES. NLE STAFF ARE ORGANIZATIONAL DEVELOPMENT EXPERTS AND WORK CLOSELY WITH NONPROFIT LEADERS, INCLUDING STAFF AND BOARD MEMBERS, TO GUIDE THEM TO RESOURCES, PROVIDE THOUGHT-PARTNERSHIP, AND PROBLEM-SOLVE. IN ADDITION, NLE'S BOARD GOVERNANCE SERIES HAS TRAINED MORE THAN 100 NONPROFITS ON LEADING GOVERNANCE PRACTICES AIMED AT CREATING MORE ENGAGED, IMPACTFUL AND EQUITABLE BOARDS. SINCE THE INCEPTION OF THE MISSION ACCELERATOR GRANTS PROGRAM IN 2019, THE FOUNDATION HAS AWARDED MORE THAN \$600,000 IN GRANTS TO MORE THAN 30

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION NONPROFITS. THESE GRANTS INCLUDE FUNDING AS WELL AS SUPPORT SERVICES DELIVERED BY THE NLE TEAM FOR PROJECTS RANGING FROM RESTRUCTURING TO GOVERNANCE. DISASTER RESPONSE AND RESTORATION: THE FOUNDATION'S DISASTER RESPONSE FRAMEWORK AND STRATEGY GROUNDS DISASTER GRANTMAKING DECISIONS IN EQUITY, RESILIENCE, SUSTAINABILITY, AND CIVIC PARTICIPATION. THE DISASTER RESPONSE AND RESTORATION FUND STRATEGY CALLS FOR RESERVING UP TO 40% OF FUNDS RAISED FOR LONG-TERM INVESTMENT. AS PART OF THIS LONG-TERM DISASTER STRATEGY. THE FOUNDATION LAUNCHED THE NEXT 100 YEARS CHALLENGE BY INVITING COLLABORATIVE TEAMS TO SUBMIT GAME-CHANGING SOLUTIONS THAT BUILD STRONGER, MORE EQUITABLE COMMUNITIES IN SOUTHEAST LOUISIANA THROUGH PHYSICAL INFRASTRUCTURE AND HAZARD MITIGATION PROJECTS. THE CHALLENGE AIMS TO PROVIDE TEN \$100,000 AWARDS (FOR A TOTAL OF \$1 MILLION) TO FURTHER DEVELOP AND REFINE PROMISING COMMUNITY-CENTERED PROJECTS. GREATER TOGETHER FUND FOR RACIAL EQUITY: THE FOUNDATION HAS COMMITTED TO ADDRESSING RACIAL EQUITY AND JUSTICE BY ESTABLISHING THE GREATER TOGETHER FUND FOR RACIAL EQUITY. THROUGH THIS FUND, THE FOUNDATION INTENDS TO MAKE LARGE. SUSTAINED INVESTMENTS IN A SMALL NUMBER OF NONPROFITS WHOSE WORK HAS SCALABLE LOCAL, REGIONAL, AND EVEN STATEWIDE IMPACT. THE OVERARCHING GOALS OF THE FUND ARE TO BOLSTER THE WORK OF BLACK-LED NONPROFITS LEADING ON RACIAL EQUITY, CLOSE THE RACIAL WEALTH GAP BY INVESTING IN INITIATIVES TO HELP SMALL, MINORITY BUSINESSES GROW, AND INVEST IN HOUSING AND OTHER STRATEGIES THAT CAN BUILD WEALTH FOR BLACK FAMILIES. TO DATE, THE FUND HAS DISTRIBUTED \$2.45 MILLION AS PART OF THE FOUNDATION'S COMMITMENT TO DISTRIBUTE \$3 MILLION FOR OVER A

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION THREE-YEAR PERIOD. LGBTQ FUND: THE FOUNDATION CREATED LOUISIANA'S FIRST DEDICATED SOURCE OF FOUNDATION FUNDING FOR LGBTQ-LED AND SERVING ORGANIZATIONS TO SUPPORT EQUALITY, FAIRNESS, ACCEPTANCE, AND MUTUAL RESPECT FOR ALL. SINCE ITS FIRST ROUND OF GRANTMAKING IN 2016, THE LGBTQ FUND HAS GRANTED \$552,000 TO NEW ORLEANS AREA ORGANIZATIONS WORKING TO IMPROVE THE QUALITY OF LIFE AND ADVOCATE ON BEHALF OF LGBTQ PEOPLE IN OUR REGION. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS PROMOTION OF PHILANTHROPY: GIVE NOLA DAY - THE FOUNDATION PROMOTES PHILANTHROPY THROUGH ITS HIGHLY SUCCESSFUL GIVENOLA DAY, A ONE-DAY 24 HOUR ONLINE GIVING EVENT THAT, SINCE 2014, HAS RAISED OVER \$48 MILLION IN SUPPORT OF OVER 1,800 NONPROFIT ORGANIZATIONS THROUGHOUT THE FOUNDATION'S 13-PARISH SERVICE REGION. WITH A MINIMUM DONATION LEVEL OF \$10, GIVENOLA DAY DEMONSTRATES THE FOUNDATION'S BELIEF THAT EVERYONE CAN BE A PHILANTHROPIST. THE FOUNDATION RECEIVES NO FEES FROM EITHER DONORS OR PARTICIPATING NONPROFITS AS A RESULT OF GIVENOLA DAY. NOT INCLUDING GNOF STAFF TIME. THE DIRECT COSTS TO PRODUCE, PROMOTE, AND PROVIDE PRIZES AND AWARDS TO NONPROFITS PARTICIPATING IN GIVENOLA DAY ACTIVITIES EXCEEDED \$300,000 IN 2022. THESE COSTS WERE UNDERWRITTEN BY GENEROUS SPONSOR CONTRIBUTIONS AND INDIVIDUAL DONOR DIRECTED GIFTS. 1923 LEGACY SOCIETY - THE 1923 LEGACY SOCIETY CELEBRATES THOSE INDIVIDUALS WHO HAVE REMEMBERED THE GREATER NEW ORLEANS FOUNDATION WITH A PLANNED GIFT. THE FOUNDATION'S TEAM OF EXPERTS IN GIFT PLANNING WORK

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION CLOSELY WITH PROFESSIONAL ADVISORS TO INCLUDE CPAS, INVESTMENT ADVISORS, AND ESTATE ATTORNEYS TO BUILD TAX-SAVVY GIFT PLANS THAT ARE UNIQUE TO THE DONOR, SERVE THEIR HIGHEST PHILANTHROPIC GOALS, AND ENABLE INDIVIDUALS AND FAMILIES TO SECURE THEIR DREAMS OF ESTABLISHING A PHILANTRHOPIC LEGACY THAT WILL BENEFIT THE GREATER NEW ORLEANS REGION FOR GENERATIONS TO COME. GIVING CIRCLES - THE FOUNDATION ALSO PROMOTES AND SUPPORTS MULTIPLE GIVING CIRCLES AND CLUBS SUCH AS IMPACT 100, AN ORGANIZATION COMPRISED OF PHILANTHROPIC-MINDED WOMEN. AND EMERGING PHILANTHROPISTS OF NEW ORLEANS. THE FOUNDATION SUPPORTS THESE ORGANIZATIONS BY ASSISTING WITH THEIR RECRUITMENT OF DIVERSE INDIVIDUALS THAT COME TOGETHER TO MAKE A LASTING DIFFERENCE IN OUR COMMUNITY. THROUGH GIVING CIRCLES, THE FOUNDATION IS ENSURING THAT SIZABLE, TRANSFORMATIVE GRANTS ARE MADE TO ORGANIZATIONS THAT ARE PERFORMING OUTSTANDING WORK, WHILE CELEBRATING THE UNIQUE PASSION AND PHILANTHROPIC GOALS OF THE FOUNDATION AND THE GIVING CIRCLE MEMBERSHIP. TO DATE, THE IMPACT 100 GIVING CIRCLE HAS DISTRIBUTED OVER \$1.3 MILLION TO 41 NONPROFITS. FORM 990, PART VI, SECTION B, LINE 11B: UPON COMPLETION OF A FINAL DRAFT OF FORM 990, A COPY OF THE DRAFT IS SENT TO MEMBERS OF THE AUDIT COMMITTEE. THE COMMITTEE IS THEN CONVENED WITH THE REPRESENTATIVES OF THE FOUNDATION'S OUTSIDE CPA FIRM TO DISCUSS THE FORM AND TO REVIEW THE PUBLIC SUPPORT TEST. AFTER ACCEPTANCE BY THE COMMITTEE, THE FORM IS SENT TO ALL MEMBERS OF THE BOARD BEFORE BEING FILED WITH THE APPLICABLE AGENCIES.

232212 10-28-22 Schedule O (Form 990) 2022

Name of the organization **Employer identification number** **-***8921 THE GREATER NEW ORLEANS FOUNDATION FORM 990, PART VI, SECTION B, LINE 12C: THE FOUNDATION ANNUALLY REQUIRES ALL EMPLOYEES AND TRUSTEES TO DISCLOSE ANY POTENTIAL PERSONAL OR BUSINESS ASSOCIATIONS WHICH COULD BE PERCEIVED AS A CONFLICT OF INTEREST. THROUGHOUT THE YEAR TRUSTEES ARE REMINDED TO DISCLOSE ANY NEW RELATIONSHIPS WHERE A CONFLICT OF INTEREST MAY BE PRESENT. NEW TRUSTEES AND NEW EMPLOYEES ARE ALSO REQUIRED TO ATTEND AN ORIENTATION WHERE THIS SPECIFIC TOPIC IS DISCUSSED. FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE COMMITTEE OF THE BOARD OF THE GREATER NEW ORLEANS FOUNDATION MEETS ANNUALLY TO REVIEW THE COMPENSATION OF THE PRESIDENT AND CEO AS WELL AS SENIOR MANAGEMENT OF THE FOUNDATION. THE REVIEW CONISTS OF COMPARISONS TO OTHER NON PROFITS IN THE AREA, REVIEW OF ANNUAL COMPENSATION SURVEYS AND A REVIEW OF OVERALL MARKETS TRENDS IN THE INDUSTRY. THIS INFORMATION IS CONTEMPORANEOUSLY DOCUMENTED IN THE WRITTEN MINUTES. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AR, CA, CO, CT, DC, FL, GA, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NV, NY OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION'S DETERMINATION LETTER AND FORMS 990 ARE AVAILABLE ON ITS WEBSITE. THESE DOCUMENTS, AS WELL AS VARIOUS POLICIES, ARE ALSO MADE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST. THE FOUNDATION NOTIFIES THE PUBLIC OF THIS OPTION IN VARIOUS MAILING AND PUBLICATIONS THROUGHOUT THE YEAR.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

Schedule O (Form 990) 2022		Page 2
Name of the organization THE GREATER NEW ORLEANS FOUNDATION		Employer identification number **-***8921
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-1,365,387.	
BOOK/TAX DIFFERENCE OF INVESTMENT INCOME		
TOTAL TO FORM 990, PART XI, LINE 9	-1,365,387.	
FORM 990, PART XII, LINE 2C		
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.		

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form

2022 Open to Public Inspection

OMB No. 1545-0047

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

Inspection

Employer identification number

501(C)(3)

LINE 12A, I GNOF

THE GREATER NEW ORLE.	ANS FOUNDATION					**-***8921		
Part I Identification of Disregarded Entities. Comple	te if the organization answered "Y	es" on Form 990, Part IV, line 3	33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	ome End-of-yea		Direct c	(f) ontrolling ntity	9
	_							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	on answered "Yes" on Form 99	00, Part IV, line 34,	because it had one	e or more	e related tax-exe	empt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	1	(f) ct controlling entity	1	g) 512(b)(13 rolled ity?
				501(c)(3))			Yes	No
THE ALBERT N AND HATTIE M MCCLURE FUND - 72-6019978, 919 ST. CHARLES AVE, NEW				LINE 12D,				
ORLEANS, LA 70130 NEW ORLEANS COMMUNITY SUPPORT FOUNDATION -	GRANTMAKING	LOUISIANA	501(C)(3)	III-O	GNOF		X	
20-5037341, 919 ST. CHARLES AVE, NEW	-							
ORLEANS, LA 70130	 GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF		x	
GNOF SUPPORT FOUNDATION - 30-0074425				,				
919 ST. CHARLES AVE	1							
NEW ORLEANS, LA 70130	GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF		х	
THE JOHN AND CLARA BRADY FAMILY FOUNDATION -								
72-1486488, 919 ST. CHARLES AVE, NEW	7							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

GRANTMAKING

Schedule R (Form 990) 2022

LOUISIANA

ORLEANS, LA 70130

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	blic charity Direct controlling us (if section entity		(g) n 512(b)(13) ntrolled nization?	
				501(c)(3))		Yes	No	
THE PAT AND KATE BRADY FAMILY FOUNDATION -								
72-1486482, 919 ST. CHARLES AVE, NEW								
ORLEANS, LA 70130	GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	х		
THE FERTEL FOUNDATION - 72-1479255								
919 ST. CHARLES AVE								
NEW ORLEANS, LA 70130	GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	х		
DJR FOUNDATION - 72-1471263								
919 ST. CHARLES AVE	7							
NEW ORLEANS, LA 70130	GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	х		
THE FRANK B STEWART FOUNDATION - 72-1247958								
919 ST. CHARLES AVE	1							
NEW ORLEANS, LA 70130	GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	х		
J. BENNETT JOHNSTON SCIENCE FOUNDATION -				,				
72-1428622, 919 ST. CHARLES AVE, NEW	7							
ORLEANS, LA 70130	GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	х		
LA PHILHARMONIC ORCHESTRA ENDOWMENT TRUST -				,				
31-1615322, 919 ST. CHARLES AVE, NEW	1							
ORLEANS, LA 70130	 GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	x		
JEFFERSON COMMUNITY FOUNDATION - 83-4204994				,				
919 ST. CHARLES AVE	1							
NEW ORLEANS, LA 70130	 GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	x		
GPOA FOUNDATION - 72-0423621				,				
919 ST. CHARLES AVE	1							
NEW ORLEANS, LA 70130	 GRANTMAKING	LOUISIANA	501(C)(3)	LINE 12A, I	GNOF	x		
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Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

	· · · ·		T	1					1	1	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Genera	or Percentage
of related organization		(state or	entity	Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income end-of-year assets Share of end-of-year assets Ves No K-1 (Fo		amount in box	partne	ownership			
		foreign country)		sections 512-514)		assets	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes	lo
										$\perp \perp$	
										+	
-											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	enti	
		country)		,				Yes	No
			GREATER NEW						
			ORLEANS						
CHARITABLE REMAINDER TRUST (5)	INVESTMENT	LA	FOUNDATION	TRUST					х
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
d	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
g	Sale of assets to related organization(s)	1g		Х
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
1	Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		Х
	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		Х
	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NEW ORLEANS COMMUNITY SUPPORT FOUNDATION	С	515,916.	.FMV
(2) GPOA FOUNDATION	L	87,501.	.FMV
(3) THE ALBERT N AND HATTIE M MCCLURE FUND	С	74,779.	.FMV
(4) JEFFERSON COMMUNITY FOUNDATION	В	72,074.	.FMV
<u>(5)</u>			
(6)	120		

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(I	(۱	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec	Share of	Share of	Dispr	opor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	related, unrelated, lexcluded from tax under	501(c)(3) orgs.?	total	end-of-year	allocat	tions?	amount in box 20 of Schedule K-1	partner	ownership
		country)	sections 512-514)	Yes No	income	assets	Yes	No	(Form 1065)	Yes N	0
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							1				

CARRYOVER DATA TO 2023

Name	Employer Identification Number **-**8921
THE GREATER NEW ORLEANS FOUNDATION Based on the information provided with this return, the following are possible carryover amounts to nex	
PASSIVE ACTIVITY LOSS - RHINO RESOURCE PARTNERS LP - PTP	3,494.
PASSIVE ACTIVITY LOSS - MID-CON ENERGY PARTNERS - PTP	
FEDERAL POST-2017 NET OPERATING LOSS - INVESTMENT IN PARTNER	210,895.
FEDERAL CONTRIBUTION - 50% CASH	124,749,092.
CA NET OPERATING LOSS	132,437.
MA NET OPERATING LOSS	1,662.
MD NET OPERATING LOSS	206,026.

Name:	THE CDEATED	MEW C	DILE ANG	FOIINDATTON

- 1	382 Annual Limitation		Section 382 Carryover	A married	Americat	Americat	Ame::::t	Americat	Americat	Ame::::t	Λ
ear	Original	Total	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amoun Used fo
rigi-	Carryover	Amount	12/31/21	0360 101	0360 101	0360 101	0360 101	0360 101	0360 101	0360 101	USEG IC
ted	Amount	Used	12/31/21								
018	19,363.	14,490.	14,490.								
2019	19,363. 86,171.	,	, , ,								
2022	119,851.										
	, , , , , ,										
	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amour
etail	E Amount S Used for B C	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used f
ype	B Good for	0000 101	0000 101	0000 101	0000 101	0000 101	0000 101	0000 101	0000 101	0000 101	
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-*8921

FEIN:

212571 04-01-22

Name: THE GREATER NEW ORLEANS FOUNDATION **-***89

Mairie.	1112 0112111211 11	EM OKLEANS FO	UNDITTION							I LIIN.	- 6921
Type a	and Entity: CON 382 Annual Limitation	TRIBUTION - 5	0% CASH FED Section 382 Carryover			ARRYOVER SCH	IEDULE				
Year Origi- nated	Original Carryover	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
	24,186,529. 26,180,558.										
2017 2018 2019 2020 2020	28,668,754. 35,315,464. 34,584,316.										
2022	31,301,310.										
//											
R											
R											
v											
Detail Type		Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
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Name: THE GREATER NEW ORLEANS FOUNDATION	FEIN:	**-***8921

Type	and Entity: NOL 382 Annual Limitation	MD	Section 382 Carryover		DETAIL C	ARRYOVER SCH	IEDULE				
Year Origi- nated	Original Carryover Amount	Total Amount Used	Amount Used for 12/31/22	Amount Used for							
	86,171.										
A 2011 2022 D E F F G H I J K L M N N N N N N N N N N N N N N N N N N											
w	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Detail Type	S Used for B	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
A B C D E F G H											
X											

	THE CREATER IVE	EW ORLEANS FO	ONDITTION							FEIN:	**-***89
ype ar	nd Entity: NOL	CA			DETAIL C	ARRYOVER SCH	IEDULE				
ection 38	32 Annual Limitation		Section 382 Carryover		Amount	Amount	Amount	Amount	Amount	Amount	Amount
rear Origi- ated	Original Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
2022	132,437.										
	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amoun
etaill	S Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
ype	B —	0000.0.	0000.101	0000.00		5554.151	5554.151	0000.101		5554.151	5554.1
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	HE GREATER NE										**-***89
ype and	Entity: NOL Annual Limitation	MA	Section 382 Carryover		DETAIL C	ARRYOVER SCH	IEDULE				
'ear)rigi- ated	Original Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used fo
2022	1,662.										
 E	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amour
etail S	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
ype B C					l ——						
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EXTENDED TO NOVEMBER 15, 2023

Form	Exempt Organization Business Income Tax Retugand proxy tax under section 6033(e))							OMB No. 1545-0047
			and pro	oxy tax under	section 6033(e))		2022
		For calendar year	2022 or other tax year beginn	ing	, and endin	g		2022
	tment of the Treasury al Revenue Service		o to www.irs.gov/For er SSN numbers on this)(3).	Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed.	Name of	organization (Che	eck box if name char	nged and see instructi	ons.)	DEmp	bloyer identification number
B E	xempt under section	Print THE G	REATER NEW ORLEAN	S FOUNDATION			*	**-***8921
X	501(c)(3) 408(e) 220(e)	IVDE	street, and room or suite	e no. If a P.O. box, s	ee instructions.			up exemption number instructions)
	408A 530(a) 529(a) 529A		own, state or province, co		reign postal code		F	Check box if
	_		of all assets at end of		4	31,145,923.		an amended return.
G	Check organization		01(c) corporation	_	401(a) trust	Other trust	State	college/university
	Check if filing only to	•	im credit from Form 89	941 Clair	n a refund shown c	n Form 2439		
1 (Check if a 501(c)(3)	rganization filir	ng a consolidated retu	rn with a 501(c)(2)	titleholding corpo	ation		
J	Enter the number of	attached Sche	dules A (Form 990-T)					1
	-	·-	ation a subsidiary in ar		or a parent-subsidia	ary controlled group	?	Yes X No
	The books are in car				Т	elephone number	(504)	598-4663
Pa	rt I Total Unr	elated Busi	ness Taxable Inc	ome		·		
1	Total of unrelated	usiness taxab	e income computed fi	rom all unrelated	trades or businesse	es (see		
	instructions)						1	0.
2	Reserved						2	
3	Add lines 1 and 2						3	
4	Charitable contrib	tions (see inst	uctions for limitation r	ules)			4	0.
5	Total unrelated bu	iness taxable	ncome before net ope	erating losses. Sul	otract line 4 from lir	ie 3	5	
6	Deduction for net	perating loss.	See instructions				6	
7	Total of unrelated Subtract line 6 fro		e income before spec	ific deduction and	d section 199A ded	uction.		
8			000, but see instruction					1,000.
9			See instructions					
10	Total deductions						l l	1,000.
11			ome. Subtract line 10 t				····· 10	
••					•	·	11	0.
Pa	rt II Tax Com							
1			ations. Multiply Part I	. line 11 by 21% ((0.21)		1	0.
2			e instructions for tax o					
	Part I, line 11 from		ate schedule or	Schedule D (F	1011		2	
3	Proxy tax. See ins	ructions		-			3	
4	Other tax amounts						4	
5	Alternative minimu	n tax (trusts or					5	
6	Tax on noncompl	ant facility inc	ome. See instructions					
7	Total. Add lines 3	hrough 6 to lin	e 1 or 2, whichever ap	plies			7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2022)

Form 990-T (2022) Page 2

Form 9		,							P	age 2
Part	Ш	Tax and Payments								
1a	Fore	ign tax credit (corporations attach Form 11	18; trusts attach Form 1116)	1a						
b										
С		eral business credit. Attach Form 3800 (see								
d	Cred	lit for prior year minimum tax (attach Form	8801 or 8827)	1d						
е	Tota	I credits. Add lines 1a through 1d					1e			
2		tract line 1e from Part II, line 7					2			0.
3	Othe	er amounts due. Check if from: 🖳 Form 4	255 Form 8611 Form	n 8697	Form 8	866				
		Other (attach_statement)			L	3			
4	Tota	Itax. Add lines 2 and 3 (see instructions).	Check if includes tax pre	eviously d	leferred under					
	sect	ion 1294. Enter tax amount here					4			0.
5	Curr	ent net 965 tax liability paid from Form 965					5			0.
6a	Payr	ments: A 2021 overpayment credited to 20	22	6а		Ī				
b		estimated tax payments. Check if section		\neg						
С										
d		ign organizations: Tax paid or withheld at s								
e		kup withholding (see instructions)								
f		lit for small employer health insurance pren				-				
g g		er credits, adjustments, and payments:				-				
9			Other Tot	 tal 6g						
7	Tota	Il payments. Add lines 6a through 6g					7			
8		nated tax penalty (see instructions). Check					8			
9		due. If line 7 is smaller than the total of line					9			
10		rpayment. If line 7 is larger than the total of		erpaid			10			
11 Dart		r the amount of line 10 you want: Credited Statements Regarding Certain A		ation (s		funded	11			
								ı	., 1	
1		ny time during the 2022 calendar year, did						-	Yes	No
		a financial account (bank, securities, or other								
	FinC	EN Form 114, Report of Foreign Bank and	Financial Accounts. If "Yes," enter t	the name	of the foreign	country				
	here									X
2		ng the tax year, did the organization receive								
	forei	gn trust?								X
		es," see instructions for other forms the org	-							
3	Ente	r the amount of tax-exempt interest receive	ed or accrued during the tax year $_{\dots}$		\$	i				
4	Ente	r available pre-2018 NOL carryovers here	\$ Do no	t include	any post-2017	NOL carr	yover			
	shov	vn on Schedule A (Form 990-T). Don't redu	ce the NOL carryover shown here b	y any dec	duction reporte	ed on Parl	t I, line	6.		
5	Post	-2017 NOL carryovers. Enter the Business	Activity Code and available post-20	17 NOL c	carryovers. Do	n't reduce)			
	the a	amounts shown below by any NOL claimed	I on any Schedule A, Part II, line 17	for the tax	x year. See ins	tructions.				
		Business Activity			ilable post-201			er		
		90000	1	\$	•		9	1,044.		
				\$						
6a	Did 1	he organization change its method of acco	ounting? (see instructions)							Х
b		is "Yes," has the organization described th	7	0-PF. or F	orm 1128? If '	'No."				
Part		Supplemental Information								
Provide		explanation required by Part IV, line 6b. Als	o provide any other additional infor	mation S	See instruction	s				
			o, p. o			-				
		Under penalties of perjury, I declare that I have examined				t of my know	ledge a	nd belief, it is	true,	
Sign	(correct, and complete. Declaration of preparer (other than	taxpayer) is based on all information of which p	reparer has a	any knowledge.	_				
Here			VP OF FI	INANCE A	AND OPERATI			S discuss this r shown belov		with
	;	Signature of officer	Date Title		31 1111111			s)? X Ye		No
		<u> </u>	Preparer's signature	Date	Check	_	PTI			,
		THIN Type preparer 5 hanne	i roparer o orginature	Date			[]	V		
Paid		TOUN C WILES CDA			Seii- e	mployed	n	11222672		
Prepa		JOHN S. WILES, CPA				o FIM		1222673 -***8864	1	
Use (Only	Firm's name LAPORTE, APAC	AODINI DIND. #600		Firm	s EIN		- " " " 8864	ŧ	
			MORIAL BLVD., #600							
		Firm's address METAIRIE, LA 700	JU5- 4 958		Phor	ne no. 50	4-83	5-5522		

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

501(c)(3) Organizations Only

A 1	Name of the organization THE GREATER NEW ORLEANS FOUNDATION	B Employer identification number **-***8921			
<u>C (</u>	Unrelated business activity code (see instructions) 900001	D Sequence:	1 of 1		
<u>E [</u>	Describe the unrelated trade or business INVESTMENT IN PART	NERSH	IPS		
Pa	rt I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
			` ,	.,,,	.,
	Gross receipts or sales				
	Less returns and allowances c Balance	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form	١. ١	71 224		71 224
	1120)). See instructions	4a	71,234.		71,234.
	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
_	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach	_	164 050		164 050
_	statement) SEE STATEMENT 1	5	-164,959.		-164,959.
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled				
^	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
10	organizations (Part VII)	9			+
10	Exploited exempt activity income (Part VIII)	10			+
11	Advertising income (Part IX)	11	353.		353.
12	Other income (see instructions; attach statement) STMT 2 Total. Combine lines 3 through 12	12	-93,372.		-93,372.
13			, <u>, , , , , , , , , , , , , , , , , , </u>		<u> </u>
Pa	Tt II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in			uctions. Deduction	ons must be
1	Compensation of officers, directors, and trustees (Part X)			1	
2	Salaries and wages			2	15,350.
3	Repairs and maintenance				
4	Bad debts				
5	Interest (attach statement). See instructions				
6	Taxes and licenses				
7	Depreciation (attach Form 4562). See instructions		7		
8	Less depreciation claimed in Part III and elsewhere on return		8a	8b	
9	Depletion				
10	Contributions to deferred compensation plans				
11	Employee benefit programs			11	3,454.
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)		7,675.		
15	Total deductions. Add lines 1 through 14			15	26,479.
16	Unrelated business income before net operating loss deduction. S	Subtract	t line 15 from Part I, line 1	3,	
	column (C)				-119,851.
17	Deduction for net operating loss. See instructions				
<u>18</u>	Unrelated business taxable income. Subtract line 17 from line 16	3		18	-119,851.
LHA	For Paperwork Reduction Act Notice, see instructions.			Sched	dule A (Form 990-T) 2022

Part	III Cost of Goods Sold Enter meth	nod of inventory valuati	on		. ago =
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor				
4	Additional section 263A costs (attach statement)	4			
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property	oroduced or acquired f	or resale) apply to the	organization?	Yes No
Part	IV Rent Income (From Real Property and	l Personal Propei	rty Leased with F	Real Property)	
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See inst	ructions.	
	A <u> </u>				
	В 💹				
	c <u> </u>				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns A	through D. Enter here	and on Part I, line 6, c	olumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
-	Total deducations Add line 4 columns Athensumb D. Fin	tau baua anal an Daut I	line C. ealthour (D)		0.
5 Part	Total deductions. Add line 4 columns A through D. En V Unrelated Debt-Financed Income (se		ilile 6, column (b)		<u> </u>
1	Description of debt-financed property (street address,		heck if a dual-use. Se	e instructions	
•	A	only, state, zir codej. c	nicok ii a duai usc. Oc	e mandenona.	
	В				
	c \square				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D).	Enter here and on Par	t I, line 7, column (A)		0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thro				0.
11	Total dividends-received deductions included in line				0.

Part VI Interest, Annu		oyalties, and R	ents fro	m Contro	lled O	rganization	1S (see in	struct	ions)		rage 3
	-				E	xempt Contro	lled Organ	ization	ıS		
Name of controlled organization		2. Employer identification number				al of specified nents made	5. Part of column 4 that is included in the controlling organization's gross income		in the iniza-	connected with	
(1)											
(2)											
(3)											
(4)					L						
7 Tayahla Incomo			 	Controlled Or		1	of oakuma i	0	44	Dodusti	ana diraath
7. Taxable income	7. Taxable Income 8. Net unrelate income (loss (see instruction		9. Total of specified payments made		10. Part of column 9 that is included in the controlling organization's gross income		ne	11. Deductions directly connected with income in column		ed with	
(1)										,	
(2)											
(3)											
(4)											
						Add colum Enter here line 8, c			Ente		s 6 and 11. nd on Part I, lumn (B)
Totals								0.			0.
Part VII Investment	Income	of a Section 50	01(c)(7),	(9), or (17) Orga	nization (s	ee instruct	tions)			
	cription of	income		2. Amou incon		3. Deduction directly connected (attach states	ected (att		asides ateme	nt) and	tal deductions d set-asides cols 3 and 4)
(1)										-	
(2)											
(3)										+-	
(4)				Add amou	ınts in					Add	d amounts in
				column 2.	Enter					colu	umn 5. Enter
				here and or	,						and on Part I, 9, column (B)
Totals				line 9, colu	11111 (A) 0.					lille :	9, Column (B)
	xemnt /	Activity Income	Other	<u>l</u> Than Δdv	- •	na Income	ega inetru	ctione)			
Description of exploite			, 0	THUIT TUT	01 (1011	ig meeme (occ mond	5110113)			
2 Gross unrelated busin	•		iness. Ente	er here and c	n Part I.	. line 10. colum	nn (A)		2		
3 Expenses directly con											
line 10, column (B)		•					•		3		
4 Net income (loss) from											
lines 5 through 7									4		
5 Gross income from ac									5		
6 Expenses attributable									6		
7 Excess exempt expen											
4. Enter here and on F	Part II, line	12							7		

Schedule A (Form 990-T) 2022

Part	IX Advertising Income							
1	Name(s) of periodical(s). Check box if reporting	ng two or	more periodicals on a	consolidated bas	is.			
	A 🔲							
	В							
	c 🗆							
	D							
Enter a	amounts for each periodical listed above in the	correspo	nding column.					
			Α	В	С	D		
2	Gross advertising income							
	Add columns A through D. Enter here and on	Part I, lin	e 11, column (A)			0.		
а								
3	Direct advertising costs by periodical							
а	Add columns A through D. Enter here and on	Part I, lin	e 11, column (B)			0.		
4	Advertising gain (loss). Subtract line 3 from lin	ne						
	2. For any column in line 4 showing a gain,							
	complete lines 5 through 8. For any column ir	า						
	line 4 showing a loss or zero, do not complete	е						
	lines 5 through 7, and enter zero on line 8							
5	Readership costs							
6	Circulation income							
7	Excess readership costs. If line 6 is less than							
	line 5, subtract line 6 from line 5. If line 5 is les	ss						
	than line 6, enter zero							
8	Excess readership costs allowed as a							
	deduction. For each column showing a gain of	on						
	line 4, enter the lesser of line 4 or line 7							
а	Add line 8, columns A through D. Enter the gr	reater of t	he line 8a, columns to	tal or zero here ar	nd on			
	Part II, line 13					0.		
Part	X Compensation of Officers, Di	rectors	, and Trustees (se	ee instructions)				
					3. Percentage	4. Compensation		
	1. Name		2. Title		of time devoted	attributable to		
					to business	unrelated business		
<u>(1)</u>					%			
(2)					%			
(3)					%			
<u>(4)</u>					%			
	Enter here and on Part II, line 1	<u></u>				0.		
Part	XI Supplemental Information (se	e instruct	ions)					

FORM 990-T (A)	INCOME	STATE	STATEMENT 1				
DESCRIPTION						INCOME	
TIFF PRIVATE EQUITY INCOME (LOSS)	PARTNERS 2	006, L	LC -	ORDINARY BUSINESS		-3,9	
TIFF PRIVATE EQUITY (LOSS)	PARTNERS 2	006, L	LC -	OTHER INCOME		ŕ	
TIFF PRIVATE EQUITY INCOME (LOSS)	PARTNERS 2	007, L	LC -	ORDINARY BUSINESS		-3,7	
TIFF PRIVATE EQUITY TIFF PRIVATE EQUITY						5,0	1.
(LOSS) TIFF PRIVATE EQUITY						3	359.
INCOME (LOSS)						-2,4	
TIFF PRIVATE EQUITY TIFF PRIVATE EQUITY							1.
(LOSS) TIFF PRIVATE EQUITY	PARTNERS 2	009, L	LC -	ORDINARY BUSINESS		-2,1	
INCOME (LOSS) TIFF PRIVATE EQUITY	PARTNERS 2	009, L	LC -	OTHER INCOME			8.
(LOSS) TIFF PRIVATE EQUITY	PARTNERS 2	012, L	LC -	ORDINARY BUSINESS		·	156.
INCOME (LOSS) TIFF PRIVATE EQUITY	PARTNERS 2	013, L	LC -	ORDINARY BUSINESS		-3,7	
INCOME (LOSS) TIFF PRIVATE EQUITY	DADMNIEDC 2	012 т	T C	TNMEDECH TNCOME		-7,2	
TIFF PRIVATE EQUITY TIFF PRIVATE EQUITY	PARTNERS 2	013, L	LC -	DIVIDEND INCOME			19. 259.
(LOSS)						-31,5	04.
TIFF PRIVATE EQUITY INCOME (LOSS)						-1,9	
TIFF PRIVATE EQUITY TIFF PRIVATE EQUITY	PARTNERS 2	014, L	LC -	DIVIDEND INCOME			356. -91.
TIFF PRIVATE EQUITY INCOME (LOSS)							1.
TIFF PRIVATE EQUITY (LOSS)						2,6	572.
TIFF PRIVATE EQUITY INCOME (LOSS)						100,7	762.
TIFF PRIVATE EQUITY INCOME (LOSS)							1.
TIFF PRIVATE EQUITY TIFF PRIVATE EQUITY	PARTNERS 2	015, L	LC -	ROYALTIES			L11. L41.
TIFF PRIVATE EQUITY INCOME (LOSS)		,				1	L 47.
TIFF PRIVATE EQUITY (LOSS)	PARTNERS 2	015, L	LC -	OTHER INCOME		-49,8	389.
TIFF REALTY AND RESCINCOME (LOSS)	OURCES II,	LLC -	ORDIN	ARY BUSINESS		,	952.
TIFF REALTY AND RESC	OURCES II,	LLC -	OTHER	INCOME (LOSS)			586.

THE GREATER NEW ORDEAND FOUNDATION	0,721
TIFF REALTY AND RESOURCES III, LLC - ORDINARY BUSINESS	
INCOME (LOSS) TIFF REALTY AND RESOURCES III, LLC - NET RENTAL REAL	-236.
ESTATE INCOME TIFF REALTY AND RESOURCES IV, LLC - ORDINARY BUSINESS	701.
INCOME (LOSS) TIFF REALTY AND RESOURCES IV, LLC - NET RENTAL REAL ESTATE	59,499.
INCOME	15.
TIFF REALTY AND RESOURCES IV, LLC - ROYALTIES	80.
TIFF REALTY AND RESOURCES IV, LLC - OTHER INCOME (LOSS) TIFF REALTY AND RESOURCES 2008, LLC - ORDINARY BUSINESS	-31,600.
INCOME (LOSS)	-88,128.
TIFF REALTY AND RESOURCES 2008, LLC - OTHER INCOME (LOSS) TIFF SPECIAL OPPORTUNITIES FUND, LLC - ORDINARY BUSINESS	-1,872.
INCOME (LOSS)	-25,180.
THE TIFF KEYSTONE FUND, LP - ORDINARY BUSINESS INCOME (LOSS)	15,299.
THE TIFF KEYSTONE FUND, LP - NET RENTAL REAL ESTATE INCOME THE TIFF KEYSTONE FUND, LP - OTHER NET RENTAL INCOME	-65.
(LOSS)	3.
THE TIFF KEYSTONE FUND, LP - INTEREST INCOME	567.
THE TIFF KEYSTONE FUND, LP - DIVIDEND INCOME	7.
THE TIFF KEYSTONE FUND, LP - ROYALTIES	44.
THE TIFF KEYSTONE FUND, LP - OTHER PORTFOLIO INCOME (LOSS)	528.
THE TIFF KEYSTONE FUND, LP - ROYALTIES THE TIFF KEYSTONE FUND, LP - OTHER PORTFOLIO INCOME (LOSS) THE TIFF KEYSTONE FUND, LP - OTHER INCOME (LOSS) SUSTAINABLE ASSET FUND II, LP - ORDINARY BUSINESS INCOME	-22,361.
(LOSS)	-29,229.
RRG GLOBAL PARTNERS FUND, LP - ORDINARY BUSINESS INCOME	
(LOSS)	-44,432.
SOLOMON HESS SBA LOAN FUND LLC - OTHER INCOME (LOSS) RHINO RESOURCE PARTNERS LP - ORDINARY BUSINESS INCOME	77.
(LOSS)	-3,494.
MID-CON ENERGY PARTNERS - ORDINARY BUSINESS INCOME (LOSS) RECOGNIZE PARTNERS I-A LP - ORDINARY BUSINESS INCOME	-10.
(LOSS) LEVEL EQUITY GROWTH PARTNERS V, LP - ORDINARY BUSINESS	-1,218.
INCOME (LOSS)	-340.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	-164,959.
FORM 990-T (A) OTHER INCOME	STATEMENT 2
DESCRIPTION	AMOUNT
CANCELLATION OF DEBT - TIFF PRIVATE EQUITY PARTNERS 2014,	242
CANCELLATION OF DEBT - THE TIFF KEYSTONE FUND, LP	310. 43.
TOTAL TO SCHEDULE A, PART I, LINE 12	353.

FORM 990-T	(A)	OTHER DEDUCTION	ONS	STATEMENT			
DESCRIPTIO	N			AMOUNT			
OVERHEAD				7,	675.		
TOTAL TO S	CHEDULE A, PART II	, LINE 14		7,	675.		
990-т ѕсн	A POST-20	17 NET OPERATING	LOSS DEDUCTION	STATEMENT	4		
990-T SCH	A POST-20	LOSS PREVIOUSLY APPLIED	LOSS DEDUCTION LOSS REMAINING	STATEMENT AVAILABLE THIS YEAR	4		
TAX YEAR		LOSS PREVIOUSLY	LOSS	AVAILABLE			
	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	73.		

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,
1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Schedule D (Form 1120) 2022

Name

Employer identification number

THE GREATER NEW ORLEANS FO	THE GREATER NEW ORLEANS FOUNDATION							
Did the corporation dispose of any investment	ent(s) in a qualified opportur	nity fund during the tax ve	ear?		Yes X No			
If "Yes," attach Form 8949 and see its instr	uctions for additional require	ements for reporting your	gain or loss.					
Part I Short-Term Capital Ga	ains and Losses - Ass	sets Held One Year	or Less					
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to go or loss from Form(s) 89 Part I, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)			
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b								
1b Totals for all transactions reported on Form(s) 8949 with Box A checked								
2 Totals for all transactions reported on								
Form(s) 8949 with Box B checked								
3 Totals for all transactions reported on								
Form(s) 8949 with Box C checked					84.			
4 Short-term capital gain from installment sale	s from Form 6252, line 26 or 37	7		4				
5 Short-term capital gain or (loss) from like-kir	nd exchanges from Form 8824			5				
6 Unused capital loss carryover (attach compu	itation)			6	(
7 Net short-term capital gain or (loss). Combin				7	84.			
Part II Long-Term Capital Ga	ins and Losses - Ass	ets Held More Tha	n One Year					
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)			
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b								
8b Totals for all transactions reported on								
9 Totals for all transactions reported on								
Form(s) 8949 with Box E checked								
10 Totals for all transactions reported on								
Form(s) 8949 with Box F checked					25,347.			
44 Fotos asia fuena Forma 4707 line 7 au 0				11	45,803.			
12 Long-term capital gain from installment sale				12				
				13				
13 Long-term capital gain or (loss) from like-kir	nd exchanges from Form 8824							
13 Long-term capital gain or (loss) from like-kir	•			14				
13 Long-term capital gain or (loss) from like-kir	······································			14 15	71,150.			
 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combin Part III Summary of Parts I ar 	ne lines 8a through 14 in columi	n h			71,150.			
 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combin Part III Summary of Parts I an 16 Enter excess of net short-term capital gain (I 	ne lines 8a through 14 in columi nd II ine 7) over net long-term capita	n h						
 13 Long-term capital gain or (loss) from like-kir 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combin Part III Summary of Parts I and 16 Enter excess of net short-term capital gain (I 17 Net capital gain. Enter excess of net long-term 	ne lines 8a through 14 in column nd II line 7) over net long-term capita m capital gain (line 15) over net	n h	7)	15	71,150. 84. 71,150.			
 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combin Part III Summary of Parts I an 16 Enter excess of net short-term capital gain (I 	ne lines 8a through 14 in column nd II line 7) over net long-term capita m capital gain (line 15) over net n 1120, page 1, line 8, or the ap	n h	7)	15 16	84.			

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Form **8949**

Department of the Treasury

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2022

Attachment

Internal Revenue Service | File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. | Sequential Security Name(s) shown on return | Social security |

Social security number or taxpayer identification no.

-*8921

THE GREATER NEW ORLEANS FOUNDATION

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. ave more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (e) (h) (d) loss. If you enter an amount **Proceeds** Description of property Date sold or Cost or other Gain or (loss). Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. from column (d) & Note below and (Mo., day, yr.) (g) combine the result see Column (e) in Amount of Code(s) with column (g) the instructions adjustment TIFF PRIVATE EQUITY PARTNERS 2014, LLC -5,047. TIFF PRIVATE EQUITY PARTNERS 2015, LLC 2,914. TIFF REALTY AND RESOURCES 1,666. IV, LLC THE TIFF KEYSTONE FUND, LP 551. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) 84.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2022)

С

С

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

THE GREATER NEW ORLEANS FOUNDATION

-*8921

D. III Lenes Terms
broker and may even tell you which box to check.
statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your
Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

Y (F) Lang torm transactions not reported to you an Form 1000 B

(F) Long-term transactions not	t reported to you	on Form 1099-E	3				
Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and	loss. If you in column	nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions.	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result
				see Column (e) in the instructions	Code(s)	(g) Amount of adjustment	with column (g)
TIFF PRIVATE EQUITY							
PARTNERS 2007, LLC							-11.
TIFF PRIVATE EQUITY							
PARTNERS 2008, LLC							3,073.
TIFF PRIVATE EQUITY							
PARTNERS 2014, LLC							-42,338.
THE TIFF KEYSTONE FUND, LP							64,623.
2 Totals. Add the amounts in colur negative amounts). Enter each to Schedule D, line 8b (if Box D above is checked), or line 10 (if E	otal here and incl ove is checked),	ude on your line 9 (if Box E					25,347.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

223012 10-24-22

Form **8949** (2022)

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

Attach to your tax return.

OMB No. 1545-0184

Identifying number

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Form4797 for instructions and the latest information.

Table Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099 8 or 1099 8 (or substitute statement) that you are including on line 2, 10, or 20 16 Enter the total amount of gain that you are including on line 2, 10, and 24 due to the partial dispositions of MACRS assets Enter the total amount of loss that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets Eart I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) 2	гне	GREATER NEW ORLEANS FOUNDAT	ION						**-***8921
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(Form 1040), Part I, line 4	b						Г		
		(Form 1040), Part I, line 4	<u> </u>					18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2022)

					(b) Date acqui	red	(c) Date sold
(a) Description of section 1245, 1250, 1252, 12	254, or 1255	property:			(mo., day, yr		(mo., day, yr.)
A							
B							
<u>C</u>							
D			ı				
These columns relate to the properties on lines 19A through 19D.		Property A	Property	В	Property	С	Property D
Gross sales price (Note: See line 1a before completi	°′						
Cost or other basis plus expense of sale	····· 						
Pepreciation (or depletion) allowed or allowable							
Adjusted basis. Subtract line 22 from line 21							
Total gain. Subtract line 23 from line 20	24						
If section 1245 property:	05-						
a Depreciation allowed or allowable from line 22							
b Enter the smaller of line 24 or 25a							
If section 1250 property: If straight line deprecia was used, enter -0- on line 26g, except for a corporal subject to section 291.							
a Additional depreciation after 1975. See instructions	26 a						
b Applicable percentage multiplied by the small of line 24 or line 26a. See instructions	er 26b						
c Subtract line 26a from line 24. If residential ren property or line 24 isn't more than line 26a, ski lines 26d and 26e	ip						
d Additional depreciation after 1969 and before 1976							
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)							
g Add lines 26b, 26e, and 26f	26g						
If section 1252 property: Skip this section if you did dispose of farmland or if this form is being completed a partnership.	d for						
a Soil, water, and land clearing expenses							
b Line 27a multiplied by applicable percentage							
c Enter the smaller of line 24 or 27b	27c						
If section 1254 property: a Intangible drilling and development costs, expenditur for development of mines and other natural deposits, mining exploration costs, and depletion. See instruct	.						
b Enter the smaller of line 24 or 28a	28b						
 If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instruction 							
b Enter the smaller of line 24 or 29a. See instruction							
ummary of Part III Gains. Complete prope	erty columns	A through D through	n line 29b before	going	to line 30.		
Total gains for all properties. Add property colu	ımne A throi	igh D. line 24				30	
Total gains for all properties. Add property cold	iiiiis A tiiiot	ign D, iine 24				30	
Add property columns A through D, lines 25b,	26a 27c 28	h and 29h Enter he	ere and on line 13	3		31	
Subtract line 31 from line 30. Enter the portion						 	
from other than casualty or theft on Form 4797		•			•	32	
Part IV Recapture Amounts Under Se	ctions 17	9 and 280F(b)(2) When Busir	ness	Use Drops t		or Less
(see instructions)							
					(a) Section 179	n	(b) Section 280F(b)(2)
Section 179 expense deduction or depreciatio	n allowable ii	n prior years		33			
Recomputed depreciation. See instructions				34			
Recapture amount. Subtract line 34 from line 3	3 See the in	etructions for where	to report	35			

Form **4797** (2022)

FORM 4797	PRO	PERTY HELD	MORE THAN	ONE YEAR	ST)	ATEMENT 5
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
TIFF PRIVATE EQUITY PARTNERS 2006, LLC						164.
TIFF PRIVATE EQUITY PARTNERS						104.
2007, LLC TIFF PRIVATE EQUITY PARTNERS						-1,490.
2008, LLC TIFF PRIVATE EQUITY PARTNERS						286.
2013, LLC TIFF PRIVATE EQUITY PARTNERS						111.
2014, LLC TIFF PRIVATE						-65.
EQUITY PARTNERS 2015, LLC TIFF REALTY AND						24,670.
RESOURCES II, LLC TIFF REALTY AND RESOURCES III,						26.
LLC TIFF REALTY AND						684.
RESOURCES IV, LLC TIFF REALTY AND RESOURCES 2008,						14,144.
LLC THE TIFF KEYSTONE						259.
FUND, LP		_				7,014.
TOTAL TO 4797, PAR	RT I, LINE	2				45,803.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,
1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Schedule D (Form 1120) 2022

Name

Employer identification number

	THE GREATER NEW ORLEANS FO		**-***8921				
Did	the corporation dispose of any investm		nity fund during the tax v				
	es," attach Form 8949 and see its instr					100 110	
	art I Short-Term Capital Ga						
See to e	instructions for how to figure the amounts nter on the lines below. form may be easier to complete if you	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to goor loss from Form(s) 89	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the	
	nd off cents to whole dollars.	, , ,		, ,		result with column (g)	
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b						
1b	Totals for all transactions reported on						
	Form(s) 8949 with Box A checked						
2	Totals for all transactions reported on						
	Form(s) 8949 with Box B checked						
3	Totals for all transactions reported on						
	Form(s) 8949 with Box C checked		_			84.	
	Short-term capital gain from installment sale				4		
	Short-term capital gain or (loss) from like-kin				5	,	
	Unused capital loss carryover (attach compu	,			6	()	
	Net short-term capital gain or (loss). Combin				7	84.	
	art II Long-Term Capital Ga	ins and Losses - Ass	sets neid wore Tha	an One Year			
to e This	nter on the lines below. form may be easier to complete if you and off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 89 Part II, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)	
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b						
8b	Totals for all transactions reported on						
	Form(s) 8949 with Box D checked						
9	Totals for all transactions reported on						
	Form(s) 8949 with Box E checked						
10	Totals for all transactions reported on						
	Form(s) 8949 with Box F checked					25,347.	
	Enter gain from Form 4797, line 7 or 9				11	45,803.	
	Long-term capital gain from installment sale				12		
	Long-term capital gain or (loss) from like-kii	nd exchanges from Form 8824			13		
	Capital gain distributions	14					
	Net long-term capital gain or (loss). Combin		n h		15	71,150.	
	art III Summary of Parts I ar				1		
	Enter excess of net short-term capital gain (I				16	84.	
	Net capital gain. Enter excess of net long-ter				17	71,150.	
10	Add lines 16 and 17. Enter here and on Forn	n 1120 nage 1 line 8 or the an	nlicable line on other return	IS.	18	71,234.	
ığ	Note: If losses exceed gains, see Capital Lo	•	phoable line on other return			,	

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment

Attachment Sequence No. **12A**

Name(s) shown on return

Social security number or taxpayer identification no.

-*8921

THE GREATER NEW ORLEANS FOUNDATION

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. ave more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (e) (h) (d) loss. If you enter an amount **Proceeds** Description of property Date sold or Cost or other Gain or (loss). Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. from column (d) & Note below and (Mo., day, yr.) (g) combine the result see Column (e) in Amount of Code(s) with column (g) the instructions adjustment TIFF PRIVATE EQUITY PARTNERS 2014, LLC <5,047.> TIFF PRIVATE EQUITY PARTNERS 2015, LLC 2,914. TIFF REALTY AND RESOURCES 1,666. IV, LLC THE TIFF KEYSTONE FUND, LP 551. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) 84.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2022)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

THE GREATER NEW ORLEANS FOUNDATION

-*8921

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

(F) Long-term transactions no	t reported to you	011 F01111 1099-1					
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	f (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	(g) (g) Amount of		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
MIRE DRIVAME BOILTMY				the metractions	` '	adjustment	(g)
TIFF PRIVATE EQUITY							11
PARTNERS 2007, LLC							<11.
TIFF PRIVATE EQUITY							
PARTNERS 2008, LLC							3,073.
TIFF PRIVATE EQUITY							
PARTNERS 2014, LLC							<42,338.
THE TIFF KEYSTONE FUND, LP							64,623.
2 Totals. Add the amounts in colur	nns (d), (e), (g), a	L and (h) (subtract					
negative amounts). Enter each to	otal here and incl	ude on your					
Schedule D, line 8b (if Box D abo		="					25 247
above is checked), or line 10 (if E	sox F above is cl	пескеа)					25,347.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

223012 10-24-22 Form **8949** (2022)

Form **4797**

Department of the Treasury Internal Revenue Service **Sales of Business Property**

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184
2022

Attachment 27

Name(s) shown on return Identifying number THE GREATER NEW ORLEANS FOUNDATION **-***8921 1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) (a) Description (b) Date acquired (d) Gross sales 2 (C) Date sold basis, plus Subtract (f) from the (mo., dav. vr.) (mo., dav. vr.) price allowable since improvements and sum of (d) and (e) SEE STATEMENT 6 acquisition expense of sale Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 Gain, if any, from line 32, from other than casualty or theft 6 45,803. Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. R Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions 45,803. Ordinary Gains and Losses (see instructions) Part II Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 15 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 Combine lines 10 through 16 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2022)

10 (a) Deceription of coation 1045, 1050, 1050, 1054	0r 10FF	proport: "			(b) Date acqui		(c) Date sold
(a) Description of section 1245, 1250, 1252, 1254,	or 1255	property:			(mo., day, yr		(mo., day, yr.)
<u>A</u>							
В							
C							
D These solumns valets to the averagetics or							
These columns relate to the properties on lines 19A through 19D.		Property A	Property	В	Property	С	Property D
Gross sales price (Note: See line 1a before completing.)	20						
Cost or other basis plus expense of sale	21						
Depreciation (or depletion) allowed or allowable	22						
23 Adjusted basis. Subtract line 22 from line 21 24 Total gain. Subtract line 23 from line 20	24						
25 If section 1245 property:	27						
a Depreciation allowed or allowable from line 22	25a						
b Enter the smaller of line 24 or 25a	25b						
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
a Additional depreciation after 1975. See instructions	26a						
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f	26g						
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
a Soil, water, and land clearing expenses	27a						
b Line 27a multiplied by applicable percentage	27b						
c Enter the smaller of line 24 or 27b	27c						
 a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions 	28a						
b Enter the smaller of line 24 or 28a	28b						
 If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions 	29a						
b Enter the smaller of line 24 or 29a. See instructions	29b						
Summary of Part III Gains. Complete property of	columne	A through D through	line 20h hoforo	going	to line 30		
Garmary Cr. Fart III Gamer Complete property	Coldiffilis	A through b through	1 11110 235 501010	gonie	, to in c oo.		
30 Total gains for all properties. Add property columns	s A throu	ugh D, line 24				30	
Add property columns A through D, lines 25b, 26g,	,	,				31	
Subtract line 31 from line 30. Enter the portion from		•	•		•		
from other than casualty or theft on Form 4797, line Part IV Recapture Amounts Under Section	<u>e 6 </u>	9 and 280F(b)(2)	When Busin	ness	Use Drops	32 to 50°	% or Less
(see instructions)							
					(a) Section 179	n	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation alle	owable i	n prior years		33			
				34			
Recapture amount. Subtract line 34 from line 33. S	ee the ir	nstructions for where	to report	35			

FORM 4797	PRO	PERTY HE	ELD MORE THAN	N ONE YEAR	STA	ATEMENT	6
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS	
TIFF PRIVATE EQUITY PARTNERS 2006, LLC						1	.64.
TIFF PRIVATE EQUITY PARTNERS						1	.04.
2007, LLC TIFF PRIVATE						-1,4	90.
EQUITY PARTNERS 2008, LLC TIFF PRIVATE						2	86.
EQUITY PARTNERS 2013, LLC TIFF PRIVATE						1	11.
EQUITY PARTNERS 2014, LLC TIFF PRIVATE						-	65.
EQUITY PARTNERS 2015, LLC TIFF REALTY AND						24,6	70.
RESOURCES II, LLC TIFF REALTY AND							26.
RESOURCES III, LLC TIFF REALTY AND						6	84.
RESOURCES IV, LLC TIFF REALTY AND						14,1	44.
RESOURCES 2008, LLC THE TIFF KEYSTONE						2	59.
FUND, LP						7,0	14.
TOTAL TO 4797, PAR	RT I, LINE	2				45,8	03.

Department of the Treasury

Internal Revenue Service

Return of U.S. Persons With Respect to Certain Foreign Partnerships

Attach to your tax return.

Go to www.irs.gov/Form8865 for instructions and the latest information.

Information furnished for the foreign partnership's tax year

beginning JAN 1 , 2022, and ending DEC 31

2022

OMB No. 1545-1668

Attachment Sequence No. **865**

THE ORRATES NEW ORLEANS POUNDATION Filer's address (if you aren't filing this form with your fax return) 19 ST CHARLES AVENUE 1	Name of person filing to	his return					File	r's identifica	tion numb	er	
Filer's address of you aren't filing this form with your tax return) 19 9 9 0 1 1 2 1 3 X 4 1 2 2 3 X 4 1 20 20 18 1 1 2 2 3 X 4 1 20 20 18 1 1 2 2 3 X 4 2 20 2 3 X 4 20 20 20 19 1 1 1 1 2 2 3 X 4 2 20 2 3 X 4 20 20 20 19 1 1 1 1 2 2 3 3 X 4 2 20 20 19 1 1 1 1 2 2 3 3 X 4 2 20 20 19 1 1 1 2 2 2 3 X 4 2 20 20 19 1 1 1 2 2 2 3 X 4 2 20 20 19 1 1 1 2 2 2 3 X 4 2 20 20 19 1 1 1 2 2 2 3 X 4 2 20 20 19 1 1 1 2 2 2 3 X 4 2 20 20 19 1 1 1 2 2 2 3 X 4 2 20 20 19 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 2 3 X 4 2 20 10 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2								**_****	*		
9.19 ST CHARLES AVENUE NEW ORLEANS, LA 70130 1 If lier is member of aconsolidated group but not the parent, enter the following information about the parent Name Address Check if any excepted specified foreign financial assets are reported on this form. See instructions F Information about certain other partners (see instructions) A County under whose laws organized about certain other partners (see instructions) 1 Acquainter about a very seed of the certain partners (see instructions) 1 Acquainter about a very seed of the certain partners (see instructions) 1 Acquainter about a very seed of the certain partners (see instructions) 2 Colon (see reductions) 3 County under whose laws organized about seed of the certain partners (see instructions) 3 County under whose laws organized about seed of the certain partners (see instructions) 4 County under whose laws organized about seed of the certain partners (see instructions) 3 Name and address of fore	THE GREATER	NEW ORLEANS FOU	NDATION								
NEW ORLEANS, I.A. 70130 B. Service Name of the District of State of Inabilities: Nonrecourse \$ Outlife of nonrecourse financing \$ Other \$ Ot	Filer's address (if you a	ren't filing this form wi	th your tax re	turn)	A Category o	f filer (see Categories	of Filers in	the instructions	and check	applicabl	e box(es)):
Second Company Dec	919 ST CHARLES	AVENUE			1 [3 X	4]	
E Filer Share of Babilities: Nonrecourse S Qualified nonrecourse financing S Other S If Iffler is a member of a consolidated group but not the parent, enter the following information about the parent: Name	NEW ORLEANS, LA	70130			B Filer's tax y	JAN 1	, 2	022 , and end	ing DEC	31	, 2022
Name Address Check if any excepted specified foreign financial assets are reported on this form. See instructions (3) Address (3) Identification number (3) Address (3) Identification number (3) Address (3) Identification number (3) Ident	C Filer's share of liabil	lities: Nonrecourse \$		Qualified noni	ecourse financir	ng \$					
Address E Check framy excepted specified foreign financial assets are reported on this form. See instructions (1) Name (2) Address (3) Identification number (4) Check applicable bottless (3) Identification number (5) Identification number (6) Identification number (7) Identification number (8) Identification number of agent (1) Identification number (1) Identification number (1) Identification num	D If filer is a member	of a consolidated group	but not the p	parent, enter the following	information abo	out the parent:					
E Check if any excepted specified foreign financial assets are reported on this form. See instructions (3) Identification number (3) Identification number (4) Check applicable boxies) (5) Address (5) Identification number (6) Category 1	Name						EIN				
Findomation about certain other partners (see instructions) (1) Name (2) Address (3) Identification number	Address										
(1) Name (2) Address (3) Identification number (4) Identification number (5) Identification number (6) Identification numb	E Check if any except	ed specified foreign fina	ancial assets a	are reported on this form.	See instructions	S					
G1 Name and address of foreign partnership RRG GLOBAL PARTNERS FUND LP 2(a) EIN (flary) 1-1-1-15 (5) 2(b) Reference ID number 2(a) EIN (flary) 1-1-15 (5) 2(b) Reference ID number 2(a) EIN (flary) 1-1-15 (5) 2(b) Reference ID number 3 Country under whose lews organized CAYMAN ISLANDS 5701 TRUXTUN AVENUE, SUITE 201 BAKERSFIELD, CA 93309 4 Optical Society of Caregory 1 (flary) in the United States of Cayman ISLANDS 5 Proceeds and identification number of agent (if any) in the United States 1 Name, address, and identification number of agent (if any) in the United States 3 Name and address of foreign partnership's agent in country of organization, if any 4 Name and address of foreign partnership's agent in country of organization, if any 4 Name and address of personsy non-causing vine-causing vine-cau	F Information about o	ertain other partners (s	ee instructior	าร)							
G1 Name and address of foreign partnership RRG GLOBAL PARTNERS FUND LP 2(a) EIN (if any) 51.65 2(b) Reference ID number 3 Country under whose laws organized ATMAN ISLANDS 4 Date of organization of 5 Principal place of organization of business of foreign partnership (see instructions) 5 Principal place of organization of activity code number of activity organization organization in the foreign partnership is tax year: 1 Name, address, and identification number of agent (if any) in the United States 2 Check If the foreign partnership must file:	(4) \$1			(0) A		(0) 1.1 .:" .:		(4)	Check appl	cable bo	x(es)
RRG GLOBAL PARTNERS FUND LP TRUXTUN AVENUE, SUITE 201 BAKERSFIELD, CA 93309 4 Organization	(1) N	ame		(2) Address		(3) Identification	number	Category 1	Category	2 Const	ructive owner
RRG GLOBAL PARTNERS FUND LP TRUXTUN AVENUE, SUITE 201 BAKERSFIELD, CA 93309 4 Organization											
RRG GLOBAL PARTNERS FUND LP TRUXTUN AVENUE, SUITE 201 BAKERSFIELD, CA 93309 4 Organization											
2(b) Reference ID number 2 2 2 2 2 2 2 2 2	G1 Name and address	of foreign partnership						1 ` ′	` •,		
BAKERSTIELD, CA 93309 4 Date of organization of Disbiness of Principal business activity code number of activity numbe	RRG GLOBAL PART	NERS FUND LP						**_	***516	5	
BAKERSPIELD, CA 93309 A Date of Organization organizat								2(b) Refe	rence ID r	umber	
A Date of Cogarization S Principal place CAYMAN ISLANDS Sactivity code number T such place Scate	5701 TRUXTUN AV	ENUE, SUITE 201									
A pate of organization S of Principal place Saturdity Code number Tativity Saturdity Satur	BAKERSFIELD, CA	93309						3 Country	under wh	ose law	s organized
Provide the following information for the foreign partnership's tax year: 1 Name, address, and identification number of agent (if any) in the United States 1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: Form 1042									_		
H Provide the following information for the foreign partnership's tax year: 1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: Form 1042	4 Date of organization	5 Principal place of business		6 Principal business activity code number	7 Principal bus activity	siness	8a Fun	ctional ency	8b Exc	nange ra instruc	ate tions)
1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: Form 1042 Form 8804 X Form 1065 Service Center where Form 1065 is filed: E-FILE 3 Name and address of foreign partnership's agent in country of organization, if any 4 Partnership, and the location of such books and records of the foreign departments of the partnership as a darked of persons of the books and records of the foreign allowed under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions 8 It separtnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? 9 Were any special allocations made by the foreign partnership? 9 How is this partnership classified under the law of the country in which it's organized? 9 How is this partnership classified under the law of the country in which it's organized? 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Regulations section 1.1503(d)-1(b)(4)(ii)? 1 Does this partnership is total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.	02/06/2018	CAYMAN ISLANDS		523900	INVESTMENTS	5	USD			1	.000000
Form 1042		<u> </u>		<u> </u>	_						
Service Center where Form 1065 is filed: E-FILE A Name and address of foreign partnership's agent in country of organization, if any and address of persone) with custody of the books and records of the foreign partnership's agent in country of organization, if any and the location of such books and records, if different foreign partnership as and records, if different such as the partnership as and address of persone) with custody of the books and records of the foreign partnership's and the location of such books and records, if different such as the partnership as a set on 721(c) partnership as a set on 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? Were any special allocations made by the foreign partnership? Interest the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions How is this partnership classified under the law of the country in which it's organized? How is this partnership classified under the law of the country in which it's organized? PARTNERSHIP 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Regulations section 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b Interest in the foreign partnership as a section 1.1503(d)-1(b)(4)(iii)? If "No," skip question 10b Interest in Regulations section 1.1503(d)-1(b)(5)(iii)? Does this partnership meet both of the following requirements? The value of the partnership's total receipts for the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.	1 Name, address, and	d identification number	of agent (if ar	ny) in the United States		· · -	·		_		
3 Name and address of foreign partnership's agent in country of organization, if any 4 partnership, and the location of such books and records, if different such books and records if different such such such such such such such such					Fo L	rm 1042	☐ Form 8	804 <u>x</u>	☐ Form 1	065	
A Name and address of foreign partnership's agent in country of organization, if any 4 partnership, and the location of such books and records, if different partnership and the location of such books and records, if different partnership and the location of such books and records, if different partnership and partnership as defined in Regulations section 1.721(c) A 93309 5 During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions							1065 is file	ed:			
5701 TRUXTUN AVENUE, SUITE 201 BAKERSFIELD, CA 93309 5 During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions 6 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? 7 Were any special allocations made by the foreign partnership? 8 Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions 9 How is this partnership classified under the law of the country in which it's organized? PARTNERSHIP 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Regulations section 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? 10 Does this partnership meet both of the following requirements? 1. The partnership's total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.							vith custody	of the books ar	nd records o	f the fore	ian
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8 Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions											
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9 How is this partnership classified under the law of the country in which it's organized? 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Regulations section 1.1503(d)-1(b)(4) or part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? 10 Does this partnership meet both of the following requirements? 11 The partnership's total receipts for the tax year were less than \$250,000. 22 The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.		•				•				1	
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1. The partnership's total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.	• •	, . , . ,							16	ا ن	140
2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.											
If "Yes," don't complete Schedules L, M-1, and M-2.	•		-		than \$1 million)			□ v _^	, [No
, , , , , , , , , , , , , , , , , , ,				ia or ino ian yoar was 1683	, ατατι ψ Γ ΠΠΠΙΟΠ	•			16	o l	140
				ice see the senarate ins	tructions	<u>)</u>				Form	8865 (2022)

Schedule A-1 Certain Partners of Foreign Partnership (see instructions) Name	orm 886	55 (20	122)	THE GREATER NEW ORLEANS	FOUNDA	TION				**_	***8921		Page 2
included in its computation of FDDE Enter the amount of gross receipts derived from all services provided to the foreign partnership that the filer included in its computation of FDDE	b 1	respec Enter	ct to any the amo	transaction with the foreign partner unt of gross receipts derived from a	ship? If " Il sales of	Yes," complete lines 12b, 12 general property to the fore	2c, and 12d. See eign partnership	instructions that the file	sr		nowledge and belief, it is h preparer has any knowledge and belief, it is how belief, it is] No
the Enter the amount of gross receipts derived from all services provided to the foreign partnership that the filer included in its computation of PDDE! 13 Enter the number of foreign partners subject to section 864(c)(6) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership port of receiving a distribution from the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-87													
the partnership or of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership and its partners subject to the disclosure requirements of Regulations section 1,707-8? 14 At any time during the tax year were any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1,707-8? 15 No 16 No 17 No 18				unt of gross receipts derived from a	II services	s provided to the foreign par	rtnership that th	e filer includ	ed in				
requirements of Regulations section 1.707-8? Ves	1	the pa	artnershi	ber of foreign partners subject to se o or of receiving a distribution from	ction 864 the partn	(c)(8) as a result of transferership	rring all or a por	tion of an in	terest in				
Correct, and complete. Declaration of preparer (other than general partner or limited liability company member) is based on all information of which preparer has any knowledge.											Yes] No
Paid Print/Type preparer's name	You're Fil his Form Separately Not With Y	and our	correct, a	nd complete. Declaration of preparer (other	than gene	ral partner or limited liability com					reparer has any	knowledg	
Schedule A Constructive Ownership of Partnership Interest. Check the boxes that apply to the filer. If you check box b, enter the name, address, and U.S. taxpayer identification number (if any) of the person(s) whose interest you constructively own. See instructions. a								Date	Che	ck		Date	
Firm's name											d"		
Phone no. Phone no. Phone no.	-	rer	Firm's na	ıme					Firm's E	IN	ipioyea		
Schedule A Constructive Ownership of Partnership Interest. Check the boxes that apply to the filer. If you check box b, enter the name, address, and U.S. taxpayer identification number (if any) of the person(s) whose interest you constructively own. See instructions. a		Ī	Firm's ac	ldress					_				
box b, enter the name, address, and U.S. taxpayer identification number (if any) of the person(s) whose interest you constructively own. See instructions. a Owns a direct interest Name Address Identification number (if any) Check if Check i	Jilly												
Schedule A-1 Certain Partners of Foreign Partnership (see instructions) Name Address Identification number (if any) Creek is foreign person Schedule A-2 Foreign Partners of Section 721(c) Partnership (see instructions) Name of foreign partner Address Country of organization (if any) U.S. taxpayer identification number (if any) Percentage interest U.S. transferor Capital Profits Oces the partnership have any other foreign person as a direct partner? Yes No Schedule A-3 Affiliation Schedule. List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest.	<u>Jonea</u>			box b , enter the name, add interest you constructively a Owns a direct interest	dress, a	nd U.S. taxpayer ider see instructions.	ntification nu	mber (if a	ny) of ti	ne pers	son(s) who	Check if foreign	
Name Address Identification number (if any) Check if foreign person												person	partner
Name Address Identification number (if any) Check if foreign person													—
Name Address Identification number (if any) Check if foreign person	Sched	lule /	Δ-1	Certain Partners of Foreig	nn Parl	nershin (see instruct	tions)						
Name of foreign partner Name of foreign partner Address Country of organization (if any) U.S. taxpayer identification number (if any) U.S. transferor Capital Profits					9				Iden	ification n	number (if any)		Check if foreign person
Name of foreign partner Name of foreign partner Address Country of organization (if any) U.S. taxpayer identification number (if any) U.S. transferor Capital Profits													
Address organization (if any) identification number (if any) U.S. transferor Capital Profits Oces the partnership have any other foreign person as a direct partner? Schedule A-3 Affiliation Schedule. List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest. Name Address Organization identification number (if any) U.S. transferor Capital Profits Yes No No Schedule A-3 Affiliation Schedule. List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest.	Sched	lule	A-2	Foreign Partners of Secti	on 721								
Opes the partnership have any other foreign person as a direct partner? Schedule A-3 Affiliation Schedule. List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest. Schedule A-3 Address EIN Total ordinary income or loss partnership owns income or loss partnership owns.			n	Address		organization	identification r					-	
Oces the partnership have any other foreign person as a direct partner? Schedule A-3 Affiliation Schedule. List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest. Name Address BIN Total ordinary income or loss partnership owns income or loss partnership owns.											(%	%
Affiliation Schedule. List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest. Name										<u> </u>		%	%
a direct interest or indirectly owns a 10% interest. Name				, , ,					<u></u>	L			_ No
Name Address EIN lota drainary toreig	Sched	lule <i>i</i>	A-3				omestic) in w	hich the f	toreign	partne	rship own	S	
				Name		Address)			Check it foreign partner- ship

Form **8865** (2022)

SCHEDULE O (Form 8865)

Transfer of Property to a Foreign Partnership (Under Section 6038B)

(Rev. October 2021)
Department of the Treasury
Internal Revenue Service

➤ Attach to Form 8865. See the Instructions for Form 8865.

➤ Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Name of transfero		,					Filer's identi	fying numbe	r	
	THE GREAT	ER NEW C	ORLEANS FOUNDATIO	N			**_***	8921		
Name of foreign p	artnership RRG	GLOBAL	PARTNERS FUND LP			EIN (if any	-	Reference	D numb	er (see instr
						-*51	.65			
1a Is the partr	nership a section 7	21(c) partne	ership (as defined in Regu	lations section 1.721(c))-1(b)(14))?	See instructi	ions		Yes	X No
	-		lied to avoid the recognit					Ы	Yes	X No
			considered or anticipated							
			defined in Regulations s	ection 1.482-7(c)(1)?					Yes	X No
Part I T	ransfers Reportab	le Under Se	ction 6038B	1	_					
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis		e) ry period	(f) Section 704 allocation me		Gain re	(g) cognized ransfer
Cash	06/01/22		433,316.							
Stock, notes			,							
receivable										
and payable, and other										
securities										
Inventory										
Inventory										
Tangible										
property used in trade										
or business										
Intangible property					1					
described in					1					
section 197(f)(9)										
Intangible										
property, other										
than intangible property										
described in										
section 197(f)(9)										
Other										
property										
Totals			433,316.							
3 Enter the tr	ansferor's percent	age interest	in the partnership: (a) Be	efore the transfer	1.8279	%	(b) After	the transfer		1.8601 %
Supplemental In	formation Require	d To Be Rep	oorted (see instructions):							
2	5		0 11 00000							
	ispositions Report	table Under					1			
(a) Type of property	(b) Date of original transfer		(c) (d) Date of Manner of disposition		rec	(f) preciation ecapture cognized partnership	(g) Gain alloca to partne		Depre recapture	(h) eciation e allocated eartner
					Бур	a tot ottip	1		P	
							1			
							1			
Part III IS	any transfer repor	ted on this s	schedule subject to gain i	recognition under sectio	n 904(f)(3) c	or section 90	4(f)(5)(F)?	> [Yes	X No
LHA For Paper	work Reduction Ac	t Notice, se	e the Instructions for Fo	rm 8865.				Schedule O (Form 8	865) 10-2021

210661 04-01-22

Department of the Treasury

Internal Revenue Service

Return of U.S. Persons With Respect to Certain Foreign Partnerships

Attach to your tax return.
Go to www.irs.gov/Form8865 for instructions and the latest information.

Information furnished for the foreign partnership's tax year

beginning JAN 1 , 2022, and ending DEC 31 2022

OMB No. 1545-1668

Attachment Sequence No. **865**

Name of person filing t	this return					Filer	's identifica	tion numbe	r	
						*	*_****	*		
THE GREATER	NEW ORLEANS FOU	NDATION								
Filer's address (if you	aren't filing this form wi	th your tax re	turn)	A Category o	f filer (see Categories	of Filers in th	e instructions	and check a	oplicable bo	ox(es)):
919 ST CHARLES	AVENUE			1 [2] 3	X	4		
NEW ORLEANS, LA	70130			B Filer's tax y	JAN 1	, 20	22 , and end	ing DEC	31 ,	2022
C Filer's share of liab	ilities: Nonrecourse \$		Qualified nonr	ecourse financir	ng \$		Other			
D If filer is a member	of a consolidated group	but not the p	parent, enter the following	information abo	out the parent:					
Name						EIN				
Address										
E Check if any except	ted specified foreign fina	ncial assets	are reported on this form.	See instructions	s					
F Information about (certain other partners (s	ee instructior	is)							
							(4)	Check applic	able box(es)
(1) N	Name		(2) Address		(3) Identification	number	Category 1	Category 2	Construct	ive owner
G1 Name and address	of foreign partnership						2(a) EIN	(if any)		
RECOGNIZE PARTN	IERS I-A LP						**_	***8946		
							2(b) Refe	rence ID nu	ımber	
540 MADISON AVE	ENUE 2ND FLOOR									
NEW YORK, NY 1	.0022						3 Country	under who	se laws o	rganized
							CAYMAN :	ISLANDS		
4 Date of organization	5 Principal place of business		6 Principal business activity code number	7 Principal bus	siness	8a Func	tional ncv	8b Exch	ange rate nstruction	ıs)
02/04/2021	CAYMAN ISLANDS			INVESTMENTS	5	USD	,	(000)		0000
H Provide the following	ng information for the fo	reign partnei	ship's tax year:							
1 Name, address, an	d identification number	of agent (if ar	ny) in the United States	2 Check if th	e foreign partners	hip must fi	e:			
				Fo	rm 1042	Form 88	04 X	Form 10	65	
				Service Ce	enter where Form	1065 is filed	i:			
				E-FILE						
3 Name and address	of foreign partnership's	agent in cou	ntry of organization, if any	y 4 Name and a partnership,	ddress of person(s) w and the location of s	rith custody c uch books an	f the books ar d records, if d	nd records of lifferent	the foreign	
******	******				*******					
CAYMAN CORPORAT	E CENTRE									
27 HOSPITAL ROA	AD, GEORGE TOWN,	GRAND								
5 During the tax ye	ear, did the foreign partn	ership pay or	accrue any interest or ro	yalty for which t	he deduction is no	t				
allowed under se	ection 267A? See instruc	ctions						Yes	X	No
If "Yes," enter the	total amount of the dis	allowed dedu	ctions					\$ <u></u>	<u></u>	<u></u>
6 Is the partnership	p a section 721(c) partn	ership, as det	fined in Regulations section	on 1.721(c)-1(b)	(14)?			Yes		
7 Were any special	l allocations made by the	e foreign part	nership?					Yes	X	No
8 Enter the numbe	r of Forms 8858, Inform	ation Return	of U.S. Persons With Res	pect to Foreign	Disregarded Entiti	es				
(FDEs) and Forei	gn Branches (FBs), atta	ched to this r	eturn. See instructions							
			country in which it's orga				EXEMPT 1	PARTNERS	HIP	
10 a Does the filer hav	ve an interest in the fore	ign partnersh	ip, or an interest indirectly	y through the fo	reign partnership,	that's a				
separate unit und	der Regulations section	1.1503(d)-1(b)(4) or part of a combine	ed separate unit	under Regulations	section				
1.1503(d)-1(b)(4	4)(ii)? If "No," skip quest	ion 10b						Yes	Х	No
b If "Yes," does the	separate unit or combi	ned separate	unit have a dual consolida	ated loss, as defi	ned in Regulation	S				
section 1.1503(d								Yes		No
	rship meet both of the fo)					
	nip's total receipts for th									
2. The value of t	he partnership's total as	sets at the er	nd of the tax year was less	than \$1 million	. 🏻			Yes		No
If "Yes," don't cor	mplete Schedules L, M-	1, and M-2.								
LHA For Privacy Ac	ct and Paperwork Redu	ction Act Not	ice, see the separate ins	tructions.					Form 886	5 (2022)

orm 886	65 (20	022)	THE GREATER NEW ORLEANS	FOUNDA	TION					**	-***892	21		Page 2
b 1	respe Enter	ect to any the amo	his Form 8865 claiming a foreign-de transaction with the foreign partners unt of gross receipts derived from al computation of foreign-derived ded	ship? If "\ I sales of	Yes," complete lines 12b, 12 general property to the fore	c, and 12d. Sei ign partnership	e instructio o that the fil	ns Ier			y knowledge and belief, hich preparer has any knowledge if PTIN pployed PTIN person(s) whose person(s) whose number (if any)		□ No	
			unt of gross receipts derived from al computation of FDDEI		intangible property to the fo									
			unt of gross receipts derived from al	l services		tnership that th	ne filer inclu	ıded ir	1					
			ber of foreign partners subject to see p or of receiving a distribution from t	ction 864	(c)(8) as a result of transfer	ring all or a po	rtion of an i	interes	st in					
		-	ring the tax year were any transfers of Regulations section 1.707-8?								Y	es		☐ No
Sign Here (FYou're Fil This Form Separately Not With Yours Tax Return	ling and our	correct, a	nalties of perjury, I declare that I have exam nd complete. Declaration of preparer (other anature of general partner or limited liability	than gener	ral partner or limited liability com					•		any k	nowledg	
	•		preparer's name		er's signature		Date		Chec	ı, İ	PTIN		ite	
Paid									ı	mploye	ed II r			
Prepai Jse	rer	Firm's na	ame					Firr	n's El	N				
Only		Firm's ac	ddress					Pho	one no).				
Sched	ماددا	Λ .	Canatruativa Ovenarahin	of Dort	norobin Interest Ch	ook the hev	oo that a	nnly	+0 +h	o filo	r If you	obo	ol.	
Octica	iuic	Α	box b , enter the name, add interest you constructively a X Owns a direct interest	lress, a	nd U.S. taxpayer ider	tification nu		any)	of th		-			
			Name		Address			Iden	tificatio	n numb	er (if any)	f	Check if foreign person	Check if direct partner
												\perp		
•		• • •	<u> </u>			. \								
Sched	lule	A-1	Certain Partners of Foreig	gn Part	Address	ions)			Identit	ication	number (if a	ny)		Check if foreign person
Sched	ماريا	Δ-2	Foreign Partners of Section	on 791	(c) Partnershin (see	instructions	<u> </u>							
Name of				011 12 1	Country of	U.S. taxpa	ayer	Chec	k if rela	ated to	Per	centaç	ge interes	st
part		9	Address		organization (if any)	identification (if any			3. trans		Capita	1	Pr	ofits
												%		%
												%	<u> </u>	%
oes the Sched			Affiliation Schedule. List	all partr	nerships (foreign or do	mestic) in v	vhich the	fore	ign p	artne	Yes ership o	wns		□ No
			a direct interest or indirect	y owns	a 10% interest. Address				EIN if any)			al ordi		Check if foreign partner-ship
אוו.זאדי	GP/	יית. ד מוזר	n	M A DT. Fr	CORPORATE SERVICE		**	****		ı R	1 1100		.000	ship

Form **8865** (2022)

ROAD TOWN, TORTOLA BRITISH

SCHEDULE O (Form 8865)

(Rev. October 2021)
Department of the Treasury
Internal Revenue Service

Transfer of Property to a Foreign Partnership (Under Section 6038B)

► Attach to Form 8865. See the Instructions for Form 8865.

► Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Name of transfero	r		-					Filer's ident	ifying num	ber	
	THE GREAT	ER NEW C	RLEANS FOUNDAT:	ION				**_***	8921		
Name of foreign p	artnership REC	OGNIZE E	PARTNERS I-A LP				EIN (if any) **-***894	.6	Referenc	e ID num	ber (see instr)
b If "Yes," wa2 Was any in	s the gain deferral tangible property t	method app ransferred c	ership (as defined in Re lied to avoid the recog considered or anticipate s defined in Regulations	nition of ed to be,	gain upon the cont at the time of the tr	ribution of pansfer or at	See instructio property?	ns		Yes Yes Yes	X No X No
	ransfers Reportab				()()					_	
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer		(d) Cost or other basis		e) ry period	(f) Section 704 allocation me			(g) recognized transfer
Cash	12/31/22		560,70	٠.							
Stock, notes receivable and payable, and other securities			,								
Inventory											
Tangible property used in trade or business											
Intangible property described in section 197(f)(9)											
Intangible property, other than intangible property described in section 197(f)(9)											
Other property											
Totals			560,70) .							
	ansferor's percent	age interest	in the partnership: (a)		he transfer	.7800	%	(b) After	the transfe	r	.7800 %
	ormation Require		oorted (see instructions Section 6038B	s):							
(a) Type of property	(b) Date of original transfer		(c) (d) Date of Manner position disposit		(e) Gain recognized by partnership	re red	(f) preciation capture cognized artnership	(g) Gain alloc to partn		recaptu	(h) rreciation ire allocated partner
			schedule subject to gai			904(f)(3) c	r section 904		Schedule (Yes	x No 3865) 10-2021

210661 04-01-22

Department of the Treasury

Internal Revenue Service

Return of U.S. Persons With Respect to Certain Foreign Partnerships

Attach to your tax return.
Go to www.irs.gov/Form8865 for instructions and the latest information.

Information furnished for the foreign partnership's tax year

beginning JAN 1 , 2022, and ending DEC 31 2022

OMB No. 1545-1668

Attachment Sequence No. **865**

Name of person filing this return				Filer'	s identifica	tion numbe	r	
				*	*-*****	*		
THE GREATER NEW ORLEANS FOU	JNDATION							
Filer's address (if you aren't filing this form w	rith your tax return)	A Category of	f filer (see Categories	of Filers in th	e instructions	and check ap	plicable box	((es)):
919 ST CHARLES AVENUE		1 [2	3	X	4		
NEW ORLEANS, LA 70130		B Filer's tax y beginning	rear JAN 1	, 20	22 , and end	ing DEC	31 ,	2022
C Filer's share of liabilities: Nonrecourse \$	Qualified nonrec	course financin	ng \$		Other	\$		
D If filer is a member of a consolidated group	p but not the parent, enter the following in	nformation abo	out the parent:					
Name				EIN				
Address				•				
E Check if any excepted specified foreign fin	nancial assets are reported on this form. So	ee instructions	3					
F Information about certain other partners (see instructions)							
					(4)	Check applica	able box(es)	
(1) Name	(2) Address		(3) Identification	number	Category 1	Category 2	Constructiv	ve owner
G1 Name and address of foreign partnership					2(a) EIN ((if any)		
CRESCENT DIRECT LENDING FUND I	III				**_	***8470		
(CAYMAN) LP					2(b) Refe	rence ID nu	mber	
11100 SANTA MONICA BLVD STE 20	000							
LOS ANGELES, CA 90025					3 Country	under who	se laws or	ganized
					CAYMAN I			
4 Date of organization 5 Principal place of business	6 Principal business activity code number 7	Principal bus activity	iness	8a Funct	tional ncv	8b Excha	ange rate nstructions	s)
01/01/2021 CAYMAN ISLANDS		NVESTING		USD		,		
H Provide the following information for the f	foreign partnership's tax year:							
1 Name, address, and identification number	of agent (if any) in the United States	2 Check if the	e foreign partn <u>ers</u>	hip must fil	e:	_		
		Foi	rm 1042	Form 88	04	☐ Form 106	35	
		Service Ce	nter where Form ¹	1065 is filed	:			
3 Name and address of foreign partnership'	's agent in country of organization, if any	4 Name and ad partnership,	ddress of person(s) w and the location of s	ith custody o uch books an	f the books ar d records, if d	id records of i ifferent	the foreign	
	nership pay or accrue any interest or roya	lty for which th	ne deduction is no	t				i
allowed under section 267A? See instru						Yes	X	No
If "Yes," enter the total amount of the dis	sallowed deductions					\$		
	nership, as defined in Regulations section	1.721(c)-1(b)	(14)?			Yes		No
7 Were any special allocations made by th						X Yes		No
	mation Return of U.S. Persons With Respe	-	-					
	ached to this return. See instructions							
	the law of the country in which it's organi				EXEMPT I	PARTNERS	HIP	
10 a Does the filer have an interest in the fore								
	1.1503(d)-1(b)(4) or part of a combined							
1.1503(d)-1(b)(4)(ii)? If "No," skip ques	tion 10b					Yes	X	No
b If "Yes," does the separate unit or combi	ined separate unit have a dual consolidate	ed loss, as defi	ned in Regulations	3				ı
						Yes		No
11 Does this partnership meet both of the f)					
1. The partnership's total receipts for the	-							ı
	ssets at the end of the tax year was less th	han \$1 million.	· [Yes		No
If "Yes," don't complete Schedules L, M-			J					
LHA For Privacy Act and Paperwork Redu	uction Act Notice, see the separate instru	uctions.					Form 886 5	i (2022)

orm 886	65 (20	022)	THE GREATER NEW ORLEANS	FOUNDA	TION					**	-***8921		Page 2
b	respe Enter	ct to a the an	f this Form 8865 claiming a foreign-de ny transaction with the foreign partner nount of gross receipts derived from a its computation of foreign-derived ded	ship? If " Il sales of	Yes," complete lines 1 general property to the	2b, 12 ne for	2c, and 12d. Se eign partnersh	ee instruction p that the file	ns er		Percentag Capital		□ No
			nount of gross receipts derived from a		intangible property to								
d	Enter	the an	nount of gross receipts derived from a tion of FDDEI	II services	s provided to the forei	gn pa	rtnership that t	he filer inclu	ded in				
			mber of foreign partners subject to se hip or of receiving a distribution from	ction 864	(c)(8) as a result of tr	ansfe	rring all or a po	rtion of an i	nterest in				
			during the tax year were any transfers is of Regulations section 1.707-8?								Yes		ON _
Gign Here of f You're Fil This Form Geparately Not With Y	ling and		penalties of perjury, I declare that I have exam , and complete. Declaration of preparer (other										
ax Return	١.		Signature of general partner or limited liability					Data				Date	
Paid Prepa	rer	Print/Ty	pe preparer's name	Prepai	er's signature			Date		leck L If-employe	J if		
Jse		Firm's	name	•					Firm's	EIN			
Only		Firm's	address						Phone	no.			
Sched	iuie	A	Constructive Ownership box b, enter the name, add interest you constructively a x Owns a direct interest	dress, a	ınd U.S. taxpayer	ider	ntification n		any) of		son(s) who		f Check if direct partner
Sched	مادام	۸ 1	Certain Partners of Forei	nn Dord	marahin (acc inc	+	tions)						
Scried	iuie	A- 1	Name	gii Faii	Addr		шопъј		lde	ntification	number (if any)		Check if foreign person
Sched	ماريا	Λ-2	Foreign Partners of Secti	on 721	(c) Partnershin	(500	instruction	6)					
Name of				011 72 1	Country of	(300	U.S. tax	payer	Check if	related to	Percen	tage inter	est
part		, .	Address		organization (if any)		identificatior (if an		U.S. tra		Capital		Profits
												%	%
												%	%
			have any other foreign person as a di							<u> </u>	Yes		No
Sched	lule	A-3	Affiliation Schedule. List a direct interest or indirect			or de	omestic) in	which the	foreign	partne	ership own	s	
			Name		Addr	ess			EIN (if an		Total o income		Check it foreign partner- ship

Form **8865** (2022)

SCHEDULE O (Form 8865)

(Rev. October 2021)
Department of the Treasury
Internal Revenue Service

Transfer of Property to a Foreign Partnership (Under Section 6038B)

► Attach to Form 8865. See the Instructions for Form 8865.

► Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Name of transfero	r .							fying number	
		ER NEW	ORLEANS FOUNDATIO	ON			**_***		
Name of foreign p	artnership CRE	ESCENT D	RECT LENDING FUN	ID III		EIN (if any		Reference ID number (see	e instr)
		AYMAN) LI				**-***84			
			ership (as defined in Reg					·····= ···= ·	No
	-		olied to avoid the recogni					Yes X I	No
			considered or anticipated					□ Vaa □ □	N.a
	ransfers Reportab		defined in Regulations s	section 1.462-7(c)(1)?				Yes X I	No
raiti ii	· ·	1			1 .	. 1			
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis		e) y period	(f) Section 704 allocation met		d
Cash	06/01/22		1,204,362.						
Stock, notes									
receivable and payable,									
and other									
securities									
Inventory									
Inventory									
Tangible									
property									
used in trade or business									
Intangible property									
described in									
section									
197(f)(9) Intangible									
property, other									
than intangible property									
described in									
section 197(f)(9)					_				
Other					+				
property					+			- 	
,									
Totals			1,204,362.						
	ansferor's nercent	l lage interest	in the partnership: (a) B	•	7.7670	%	(h) After t	the transfer 7.767	0 %
		•	orted (see instructions):		7,7070	70	(5) / 11:01	and deficient to the second	70
••	•	•	,						
Part II D	ispositions Repor	table Under	Section 6038B						
(a)	(b)		(c) (d)	(e)	D	(f) preciation	(g)	(h)	
Type of property	Date of original		Date of Manner of disposition		re	capture	Gain alloca to partne		ed
	transfer			partnership	by p	ognized artnership		to partner	
			schedule subject to gain		on 904(f)(3) o	r section 90		Yes <u>x</u>	No
LHA For Papers	work Reduction Ac	t Notice, se	e the Instructions for Fo	rm 8865.			5	Schedule O (Form 8865) 10)-2021

210661 04-01-22

Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

▶ Go to www.irs.gov/Form926 for instructions and the latest information. ▶ Attach to your income tax return for the year of the transfer or distribution. OMB No. 1545-0026

Attachment Sequence No. **128**

Part I U.S. Transferor Information (see instructions)					
Name of transferor THE GREATER NEW ORLEANS FOUNDATION		Identi	ifying numbe	er (see in:	structions)
		_	*8921		
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign	n corporation?		Yes	Х	No
2 If the transferor was a corporation, complete questions 2a through 2d.					
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under sec	tion 368(c)) by				
five or fewer domestic corporations?			Yes		No
b Did the transferor remain in existence after the transfer?			Yes		No
If not, list the controlling shareholder(s) and their identifying number(s).					
Controlling shareholder		Identifyin	g number		
		0			No
c If the transferor was a member of an affiliated group filing a consolidated return, was it the If not, list the name and employer identification number (EIN) of the parent corporation.	e parent corporation	<i>'</i> ∟	Yes		NO
Name of parent corporation	EI	N of paren	t corporati	on	
d Have basis adjustments under section 367(a)(4) been made?			Yes		No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not tre complete questions 3a through 3d.	eated as such under	section 36	7),		
a List the name and EIN of the transferor's partnership.					
Name of partnership		EIN of pa	rtnership		
					1
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		_	Yes		No
c Is the partner disposing of its entire interest in the partnership?		L	Yes		No
d Is the partner disposing of an interest in a limited partnership that is regularly traded on ar	n established		_		1
securities market?		L	Yes		No
Part II Transferee Foreign Corporation Information (see instructions)					
4 Name of transferee (foreign corporation)		5a Identify	ying numb	er, if a	ny
CDL UNLEVERED III BLOCKER DESIGNATED ACTIVITY COMPANY		**_****			
6 Address (including country)		5b Referer	nce ID num	ber	
2ND FLOOR, BLOCK E IVEAGH COURT, HARCOURT ROAD					
DUBLIN, IRELAND					
7 Country code of country of incorporation or organization EI					
8 Foreign law characterization (see instructions) DESIGNATED ACTIVITY COMPANY					
9 Is the transferee foreign corporation a controlled foreign corporation?			X Yes		No
224531 04-01-22 LHA For Paperwork Reduction Act Notice, see separate instructions.		F	orm 926 (F	Rev. 1	1-2018

Part III Information Section A - Cash	Regarding Tran	sfer of Property (see in	nstructions)			
Type of property	(a) Date of transfer	(b) Description of property	Fair market date of t	value on	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	12/31/2022		1,	205,587.		
10 Was cash the only pro	ainder of Part III and					X Yes No
Type of property	pperty (other that (a) Date of transfer	an intangible property (b) Description of property	Fair market) t value on	(d) (d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities		роско			2000	
Inventory						
Other property (not listed under another category)						
Property with built-in loss						
Totals						
recognition agreemen 12 a Were any assets of a foreign corporation? If "Yes," go to line 12b b Was the transferor a complete (including a branch the series of the series) c Immediately after the transferee foreign corporation of the series of the ser	t was filed? foreign branch (included) domestic corporation at is a foreign disregation ne 12c. If "No," skip transfer, was the dorporation? ne 12d. If "No," skip oss amount included asfer property describes and questions 14a.	_	n disregarded y all of the assomed fore line 13. areholder with under section	entity) transferre	oranch	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subj	ect to Section 367(d)				1
Type of property	(a) Date of transfer	(b) Description of property		(d) i's length price late of transfer	(e) Cost or other basis	(f) Income inclusion fo year of transfer
Property described in sec. 367(d)(4)						
Totals						

Form **926** (Rev. 11-2018)

	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		No No
	1.367(d)-1(c)(3)(ii) for any intangible property? If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in	Yes	☐ No
15	Regulations section 1.367(d)-1(c)(3)(ii) \$\[\] \\$ Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	□ No
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Davi	IV Additional Information Denougling Transfer of Duomaghy/accinetural		
Par	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pai	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before4.371 % (b) After4.371 %		
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 4.371 % (b) After 4.371 % Type of nonrecognition transaction (see instructions) IRC SECTION 351		
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	X No.
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before4.371_% (b) After4.371_% Type of nonrecognition transaction (see instructions) > IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3)		X No X No
16 17 18 a b	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 4.371 % (b) After 4.371 % Type of nonrecognition transaction (see instructions) IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F)	Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before4.371_% (b) After4.371_% Type of nonrecognition transaction (see instructions) \bracetologram IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d)	Yes Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 4.371 % (b) After 4.371 % Type of nonrecognition transaction (see instructions) IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987	Yes Yes Yes	X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 4.371 % (b) After 4.371 % Type of nonrecognition transaction (see instructions) IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification?	Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 4.371 % (b) After 4.371 % Type of nonrecognition transaction (see instructions) IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification? Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)	Yes Yes Yes Yes	X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 4.371 % (b) After 4.371 % Type of nonrecognition transaction (see instructions) ► IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification? Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c.	Yes Yes Yes Yes	X No X No X No X No
116 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 4.371 % (b) After 4.371 % Type of nonrecognition transaction (see instructions) ► IRC SECTION 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification? Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c.	Yes Yes Yes Yes Yes Yes	X No X No X No X No
116 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
116 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

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