

CADDO PARISH COMMISSION

505 TRAVIS STREET, GOVERNMENT PLAZA

PUBLIC NOTICE

APPROPRIATIONS COMMITTEE

November 3rd, 2022

2: 30 p.m.

1. APPROPRIATIONS (NGO) COMMITTEE ROLL CALL:

**Lyndon B. Johnson, Chair**

Mario Chavez

Ken Epperson, Sr.

Stormy Gage-Watts

Todd Hopkins

Ed Lazarus

Roy Burrell

John E. Atkins, President

2. INVOCATION:

3. PLEDGE OF ALLEGIANCE:

Veterans and active military members saluting during recitation of the Pledge of Allegiance would be appropriate, should you wish to do so. All others, please recite with your hands over your hearts, and we **ask that everyone please remember our POW-MIA's** as we say the Pledge of Allegiance.

4. AGENDA ADDITIONS:

5. PUBLIC COMMENTS:

Citizens who wish to address the Committee please fill out a comment card located in the chamber foyer, and return to the Chairman or the Clerk of the Commission. Citizens may also fill out & submit a [COMMENT CARD ONLINE HERE](#) prior to the meeting. Individual comments are limited to 3 minutes

6. NEW BUSINESS:

6.I. Discussion Southern University Foundation

6.II. Discuss Community Foundation Of NWLA

Documents:

[2023 - COMMUNITY FOUNDATION OF NORTH LOUISIANA.PDF](#)

6.III. Additional Discussion Of Appropriations In Current Year Budget And 2023 Budget

7. ADJOURN:



## PARISH OF CADDO, LOUISIANA

### GUIDELINES FOR APPROPRIATION APPLICATIONS

Name of Entity: Community Foundation of North Louisiana

Please review the following guidelines for funding and initial indicating you have read and understand each item prior to applying:

- KG 1. Appropriations are made on an annual basis; **receiving funding one year does not guarantee that the organization will receive funds in the same amount, or at all during the next year.**
- KG 2. Funds are appropriated for specific programs that an organization sponsors and **cannot be used for the day-to-day operating expenses of the organization (i.e. salaries, office expenses, rent).**
- KG 3. The program for which an appropriation is requested must provide services to unskilled poor, low-income persons, unemployed persons or students from those families; alternatively, the program must provide a measurable means of economic development for Caddo Parish.
- KG 4. Funds cannot be used for the following:
  - a. Capital purchases/improvements such as building repairs/renovations, playground equipment (even if for the parish-funded program) of an organization;
  - b. Equipment used in any other program other than the one the Parish is funding;
  - c. To benefit non-Caddo citizens.
  - d. Payments to organizational board members and employees.
- KG 5. Funds cannot be used directly or indirectly in any trade or business carried on by any person or entity other than Grantee.
- KG 6. An organization receiving monies through the Caddo Parish Commission's appropriation process must give two reports detailing the use of those funds:
  - a. A report detailing the use of the funds from January 1st - June 30th of the appropriation year (due July 31st), and
  - b. A report detailing the use of the funds from July 1st - December 31st of the appropriation year (due January 31st of the year following the appropriation).

A subsequent appropriation application will **not** be considered if the July 31st report has not been timely submitted; an approved appropriation will **not** be funded if the January 31st report has not been timely submitted.

These reports **must** include a detailed expense ledger with invoices, receipts cancelled checks and any other documents related to the expenditure of Parish funds, and the Parish reserves the right to audit all organization records related to the appropriation at any time. The organization will also complete an Outcome Report for the program (due January 31st of the year following the appropriation).

**GUIDELINES FOR APPROPRIATION APPLICATIONS (continued)**

- KG 7. No funds will be paid until all required reports have been received and approved by the Parish of Caddo.
- KG 8. Funds must be spent in accordance with the provisions outlined in the Cooperative Endeavor Agreement (CEA). Listing items in the detailed budget does not make them eligible for reimbursement; the items must be covered in the CEA.

I acknowledge that I have read and fully understand the guidelines listed above.

Signature:

Kristina Gustanson

Title:

CEO

Date:

8/15/2022

**SECTION I: INTRODUCTION AND FUNDING PURPOSE**

Each section of this request must be completed in order to be considered for funding.

Select one:

RECURRING REQUEST

NON-RECURRING (ONE-TIME REQUEST)

1. Name of Entity: Community Foundation of North Louisiana

Commission District: Caddo District 3

Address: 401 Edwards Street  
Shreveport, LA 71101

Is this the mailing address of the organization?  Yes  No

If not, please list mailing address: \_\_\_\_\_  
\_\_\_\_\_

Is this the address of the organization's headquarters?  Yes  No

If not, please list headquarter address: \_\_\_\_\_  
\_\_\_\_\_

Does your organization provide services in more than one commission district?  Yes  No

If yes please list other districts served and addresses (if available):

District N/A

District N/A

Address \_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Contact Person: Ms. Kristina B. Gustavson

Title: Chief Executive Officer

Phone Number: 3182210582 Fax: \_\_\_\_\_

Email: gustavson@cfnla.org Past Grant Recipient?  Yes  No

2. Purpose for which Parish funds would be used (Check one and give brief description):

- Economic Development \*
- Education
- Social Welfare

A Behavioral Health Court will divert individuals who need behavioral health assessments and services away from the judicial system so they receive the treatment they need to become productive citizens.

\* Economic Impact Study required with applications for Economic Development (page 12).

3. Amount of this funding request: \$100,000

4. During what time period will the funds be used: 01/01/2023 through 12/31/2023

5. Are audited financial statements available?  Yes  No

Please furnish most recent financial statement period covered:



1/1/2021 through 12/31/2021

If no, who prepares the financial statements for your organization?

\_\_\_\_\_

6. Are you exempt from Federal Income Tax?  Yes  No

Under IRS Code Section: 501c3

7. Have you filed Form 990 (Return of Organization Exempt from Income Tax)?  Yes  No



Date of last time filed: 10/27/2021

8. Semi-annual drawdowns are agreed to be acceptable:  Yes  No

9. Does the organization have any outstanding tax claims (City, Parish, State or Federal)?

Yes  No (If so, please explain claim)

\_\_\_\_\_

10. Are you in good standing with the State of Louisiana?  Yes  No

[Click here to attach a copy of your Certificate of Good Standing.](#)



11. Please click here to attach Outcomes of prior year programs. An Outcome Report template is located at [www.caddo.org](http://www.caddo.org).

12. Click below to attach any other information that you wish to submit in support of your application. (*Optional*)



## SECTION II: PROPOSAL NARRATIVE

The proposal narrative must be formatted as outlined below. Proposals that are not submitted in the following format will not be reviewed. This section shall not exceed three pages, double spaced in 12-font. The application outline must address all of the following items below:

### **A. Description of Project and Soundness of Project**

This summary should provide an overview of entire project(s), including project location and how this project will benefit the Parish. This project must be clearly understood, well planned, and ready to proceed.

### **B. Background and Capacity of Organization**

1. Briefly describe your organization.

(a) How long has the organization been in operation? What is the history of this organization.?

(b) List **key** project staff/volunteers and detail their experience related to this project

2. What key components and strategies will this organization use to complete this project successfully?

### **C. Prior Experience of Organization**

1. Has the organization completed parish projects similar to this request in the past 3 years? If so, please describe.

2. What were the outcomes of the project? How did it benefit the parish?

### **D. Extent of Neighborhood Involvement**

1. Does your event/project need volunteers? If so, how many and how do you attract and maintain the volunteers. What services do the volunteers provide?

2. Describe how a significant number of people with diverse interests in the neighborhood will be involved in and benefit from this project.

### **E. Joint Group Application and Collaboration**

1. Is this a joint application? If yes, list organization and their relevance to the project.

2. Will you partner with any other organization to complete this project? If yes, list the organizations and their relevance to the project.

3. Will your project require contractual work? If so, what type of services will they perform?

**F. Identify Needs and Gaps in Services in Neighborhood**

1. List the priority needs that the organization has identified in the neighborhood and/or parish.
2. Detail any gaps of services to that your organization has identified that relate to this project.
3. Detail and explain project and or organizational goals for the future that extend beyond this funding opportunity.

KG

Initial here stating you have read and understand the requirements for proposal narratives.

**Click here to attach a separate file for the proposal narrative formatted as outlined above.**  
(This can be a Word document, a scanned PDF document, etc.)



## ATTACHMENT A: CONTACT INFORMATION

List the names, addresses of all board members.

Name	Address
Glenn V. Kinsey	401 Edwards Street, Suite 105 Shreveport, LA 71101
Jerry Edwards	401 Edwards Street, Suite 105 Shreveport, LA 71101
C. Dewitt Caruthers	401 Edwards Street, Suite 105 Shreveport, LA 71101
Lisa C. Cronin	401 Edwards Street, Suite 105 Shreveport, LA 71101
Terry C. Davis	401 Edwards Street, Suite 105 Shreveport, LA 71101
Thomas H. Muprhy	401 Edwards Street, Suite 105 Shreveport, LA 71101
Wanda H. Thomas	401 Edwards Street, Suite 105 Shreveport, LA 71101

[Click here to attach a file for any additional contacts not listed above.](#)

## ATTACHMENT B: PROJECT TIMELINE

This summary should provide a written timeline to show benchmarks for project implementation and completion. Describe any recent, relevant and successfully demonstrated experience in undertaking similar projects. Include the knowledge and experience of the proposed day-to-day project team leader.

Date	Milestone
August 2022-December 2022	Request funding from Caddo Parish and City of Shreveport; Secure match funding from CFNLA Project lead: Kristi Gustavson, Community Foundation of North Louisiana, CEO
September 2022-October 2022	Work with judges and prosecutors at Shreveport City Court and Caddo Parish District Court to Design Behavioral Health Court. Create implementation plan and finalize budget.
November 2022 – December 2022	Interview and hire court administrators and case managers
January 2023	Behavioral Health Court begins accepting defendants.
2023	Work with Louisiana Supreme Court to capture data and assess effectiveness of Behavioral Health Court

## ATTACHMENT C: APPROPRIATION BUDGET FORM

Please provide detailed explanation of each line item.

Organization Name Community Foundation of North Louisiana

Budget Year 2023

### FUNDING AMOUNT

Line Item Object <sup>1</sup>	Parish Amount <sup>2</sup>	Other Amounts <sup>3</sup>	In-Kind (Including Food Bank)	Total
Salaries for court admin and 2-3 case managers	75000	175000		250,000.00
Court costs (supplies, equip, etc.)	25000	25000		50,000.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
<b>Additional Line Items Total</b> (from attachment)				0.00
<b>Total</b>	100,000.00	200,000.00	0.00	300000

Click [here](#) to attach a file for any additional funding line items not listed above and for any required detailed listings (see notes below).

<sup>1</sup> If funding tuition for low-income persons to attend your program, please provide a detailed listing of the items covered by the tuition.

<sup>2</sup> Items to be charged to Caddo Parish funds must be listed in detail; a general program name is not acceptable as a budget item.


<sup>3</sup> Provide a detailed listing of the funding source for other amounts.

## AFFIDAVIT

I hereby certify that the information provided in this application and all accompanying forms is true and accurate as of the date of completion.

Signature:	<u>Kristina Gustanson</u>
Title:	<u>Chief Executive Officer</u>
Date:	<u>8/15/2022</u>

## CHECKLIST OF REQUIRED DOCUMENTS

- Guidelines for Appropriation Applications
- Application
- ~~47~~  Proposal Narrative (See application outline on pages 6-7)
- ~~47~~  Attachment A: Contact Information
- Attachment B: Project Timeline
- ~~47~~  Attachment C: Appropriation Budget Form
- Affidavit
- \* Economic Impact Study (required for all applications with Economic Development purpose)
- ~~47~~  Copy of Certificate of Good Standing with State of Louisiana
- Copy of current IRS 501(c)(3) tax exempt statement indicating that the entity requesting funding is not a private foundation 
- Explanation of any changes in your IRS status (if applicable)
- Other supporting documents (if applicable)

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### FOR OFFICIAL USE ONLY

Date Received: <u>8/15/2022</u>	Application Complete: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Saved to File
Date Reviewed: <u>08/15/2022</u>	Reviewed by: <i>Amanda Fulco</i>	<input checked="" type="checkbox"/> Updated Tracking

**THE COMMUNITY FOUNDATION OF  
NORTH LOUISIANA  
AUDITED CONSOLIDATED FINANCIAL STATEMENTS  
DECEMBER 31, 2021 AND 2020**

THE COMMUNITY FOUNDATION OF NORTH LOUISIANA

SHREVEPORT, LOUISIANA

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**AUDITED CONSOLIDATED FINANCIAL STATEMENTS**



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REGIONS TOWER  
333 TEXAS STREET, SUITE 1525 | SHREVEPORT, LOUISIANA 71101  
318.429.1525 (P) | 318.429.2124 (F)

April 21, 2022

The Audit Committee  
The Community Foundation of North Louisiana  
Shreveport, Louisiana

**Independent Auditor's Report**

**Report on the Audit of the Financial Statements**

***Opinion***

We have audited the accompanying financial statements of The Community Foundation of North Louisiana, which comprise the consolidated statements of financial position as of December 31, 2021 and 2020, and the related consolidated statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of The Community Foundation of North Louisiana as of December 31, 2021 and 2020, and the consolidated changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Basis for Opinion***

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards (Government Auditing Standards)*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of The Community Foundation of North Louisiana and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the consolidated financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about The Community Foundation of North Louisiana's ability to continue as a going concern within one year after the date that the consolidated financial statements are available to be issued.

### ***Auditor's Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the consolidated financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of The Community Foundation of North Louisiana's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about The Community Foundation of North Louisiana's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

### ***Supplementary Information***

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The supplementary information on page 24 is presented for purposes of additional analysis and is not a required part of the consolidated financial statements.

Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America and *Government*

*Auditing Standards.* In our opinion, the information on page is fairly stated, in all material respects, in relation to the consolidated financial statements as a whole.

**Other Reporting Required by *Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated April 21, 2022 on our consideration of The Community Foundation of North Louisiana's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of The Community Foundation of North Louisiana's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering The Community Foundation of North Louisiana's internal control over financial reporting and compliance.

*Heard, McElroy & Vestal, LLC*

Shreveport, Louisiana

THE COMMUNITY FOUNDATION OF NORTH LOUISIANACONSOLIDATED STATEMENTS OF FINANCIAL POSITIONDECEMBER 31, 2021 AND 2020

<u>ASSETS</u>	<u>2021</u>	<u>2020</u>
Cash and cash equivalents	135,462	378,024
Prepaid expenses	42,777	32,776
Accounts receivable	192,957	537,006
Investments	181,238,908	156,853,576
Beneficial interest in trusts and estates	1,039,000	983,000
Fixed assets, net	324,451	46,938
Other assets	598,409	1,287,803
Cash surrender value of life insurance	105,202	107,288
	<u>183,677,166</u>	<u>160,226,411</u>
Total assets		
	<u>183,677,166</u>	<u>160,226,411</u>
<u>LIABILITIES AND NET ASSETS</u>		
<u>Liabilities:</u>		
Accounts payable and advance contributions	506,394	330,036
Grants payable	213,097	629,636
Funds held as agency endowments	10,383,849	9,267,070
	<u>11,103,340</u>	<u>10,226,742</u>
Total liabilities		
	<u>11,103,340</u>	<u>10,226,742</u>
<u>Net assets:</u>		
Without donor restrictions:		
Designated for donor advised grants	12,591,211	10,281,895
Designated for operations	1,269,662	1,193,117
Designated for discretionary grants	66,594,522	59,225,477
Designated by board for endowment	1,502,185	1,292,849
Invested in property and equipment, net	324,451	46,938
Total without donor restrictions	82,282,031	72,040,276
With donor restrictions:		
Restricted in perpetuity - endowment	77,052,878	66,558,997
Restricted for specified purpose	12,199,917	10,417,396
Restricted for passage of time	1,039,000	983,000
Total with donor restrictions	90,291,795	77,959,393
	<u>172,573,826</u>	<u>149,999,669</u>
Total net assets		
	<u>172,573,826</u>	<u>149,999,669</u>
Total liabilities and net assets	<u>183,677,166</u>	<u>160,226,411</u>

The accompanying notes are an integral part of the consolidated financial statements.

THE COMMUNITY FOUNDATION OF NORTH LOUISIANA

CONSOLIDATED STATEMENT OF ACTIVITIES

FOR THE YEAR ENDED DECEMBER 31, 2021

	Without Donor Restrictions	With Donor Restrictions	Total
<b><u>Support, revenues, and gains:</u></b>			
Contributions:			
Membership	216,353	-	216,353
Other	4,865,469	2,113,146	6,978,615
Net investment income	11,630,061	12,668,189	24,298,250
Grants	223,589	203,426	427,015
Rental income	100	-	100
Other income	88,827	-	88,827
Total support, revenues and gains	17,024,399	14,984,761	32,009,160
Net assets released from restrictions	3,258,505	(3,258,505)	-
Net assets restricted by donor	(606,146)	606,146	-
<b><u>Total support, revenue, gains, and reclassifications</u></b>	19,676,758	12,332,402	32,009,160
<b><u>Expenses:</u></b>			
Program services:			
Grants	8,084,682	-	8,084,682
Community programs	675,344	-	675,344
Management and general	456,778	-	456,778
Fundraising and development	218,199	-	218,199
Total expenses	9,435,003	-	9,435,003
<b><u>Change in net assets</u></b>	10,241,755	12,332,402	22,574,157
<b><u>Net assets at beginning of period</u></b>	72,040,276	77,959,393	149,999,669
<b><u>Net assets at end of period</u></b>	82,282,031	90,291,795	172,573,826

The accompanying notes are an integral part of the consolidated financial statements.

THE COMMUNITY FOUNDATION OF NORTH LOUISIANA

CONSOLIDATED STATEMENT OF ACTIVITIES

FOR THE YEAR ENDED DECEMBER 31, 2020

	Without Donor Restrictions	With Donor Restrictions	Total
<b><u>Support, revenues, and gains:</u></b>			
Contributions:			
Membership	236,413	-	236,413
Other	3,092,994	5,121,708	8,214,702
Net investment income	6,668,769	5,455,659	12,124,428
Grants	393,011	-	393,011
Rental income	-	6,891	6,891
Other income	156,338	-	156,338
Total support, revenues and gains	10,547,525	10,584,258	21,131,783
Net assets released from restrictions	1,831,422	(1,831,422)	-
Net assets restricted by donor	(2,281,190)	2,281,190	-
<b><u>Total support, revenue, gains, and reclassifications</u></b>	10,097,757	11,034,026	21,131,783
<b><u>Expenses:</u></b>			
Program services:			
Grants	7,420,938	-	7,420,938
Community programs	542,499	-	542,499
Management and general	421,934	-	421,934
Fundraising and development	218,839	-	218,839
Total expenses	8,604,210	-	8,604,210
<b><u>Change in net assets</u></b>	1,493,547	11,034,026	12,527,573
<b><u>Net assets at beginning of period</u></b>	70,546,729	66,925,367	137,472,096
<b><u>Net assets at end of period</u></b>	72,040,276	77,959,393	149,999,669

The accompanying notes are an integral part of the consolidated financial statements.

THE COMMUNITY FOUNDATION OF NORTH LOUISIANACONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSESFOR THE YEAR ENDED DECEMBER 31, 2021

	<u>Program Services</u>				
	<u>Grants</u>	<u>Community Programs</u>	<u>Management and General</u>	<u>Fundraising and Development</u>	<u>Total</u>
Amortization of leasehold improvements	-	-	8,923	-	8,923
Community programs	-	193,024	-	-	193,024
Depreciation	-	-	10,761	-	10,761
Dues and subscriptions	-	4,634	4,119	1,545	10,298
Equipment rental and maintenance	-	13,650	18,200	13,650	45,500
Grants	8,084,682	-	-	-	8,084,682
Health insurance	-	27,772	19,440	8,332	55,544
Insurance	-	-	19,358	-	19,358
Office supplies and expense	-	11,126	11,126	11,126	33,378
Parking	-	-	11,250	-	11,250
Payroll taxes	-	24,050	16,835	7,215	48,100
Postage	-	1,660	1,660	1,660	4,980
Printing	-	6,613	13,225	13,225	33,063
Professional fees	-	-	49,141	-	49,141
Public relations	-	25,930	-	32,102	58,032
Rent	-	26,507	35,342	26,507	88,356
Retirement plan expense	-	13,094	9,167	3,929	26,190
Salaries	-	314,121	219,884	94,236	628,241
Seminars and travel	-	4,518	3,389	3,389	11,296
Special events	-	6,079	-	-	6,079
Telephone	-	2,566	428	1,283	4,277
Other	-	-	4,530	-	4,530
	<u>8,084,682</u>	<u>675,344</u>	<u>456,778</u>	<u>218,199</u>	<u>9,435,003</u>

The accompanying notes are an integral part of the consolidated financial statements.

THE COMMUNITY FOUNDATION OF NORTH LOUISIANACONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSESFOR THE YEAR ENDED DECEMBER 31, 2020

	<u>Program Services</u>				
	<u>Grants</u>	<u>Community Programs</u>	<u>Management and General</u>	<u>Fundraising and Development</u>	<u>Total</u>
Amortization of leasehold improvements	-	-	-	-	-
Community programs	-	93,190	-	-	93,190
Depreciation	-	-	13,054	-	13,054
Dues and subscriptions	-	2,790	2,480	930	6,200
Equipment rental and maintenance	-	13,621	18,161	13,621	45,403
Grants	7,420,938	-	-	-	7,420,938
Health insurance	-	26,960	18,872	8,088	53,920
Insurance	-	-	16,576	-	16,576
Office supplies and expense	-	9,543	9,544	9,544	28,631
Parking	-	-	10,382	-	10,382
Payroll taxes	-	22,057	15,440	6,617	44,114
Postage	-	1,488	1,487	1,488	4,463
Printing	-	5,428	10,854	10,854	27,136
Professional fees	-	-	45,719	-	45,719
Public relations	-	29,735	-	45,858	75,593
Rent	-	28,179	37,572	28,179	93,930
Retirement plan expense	-	14,178	9,924	4,253	28,355
Salaries	-	288,882	202,217	86,665	577,764
Seminars and travel	-	1,154	865	865	2,884
Special events	-	2,224	-	-	2,224
Telephone	-	2,387	398	1,194	3,979
Other	-	683	8,389	683	9,755
	<u>7,420,938</u>	<u>542,499</u>	<u>421,934</u>	<u>218,839</u>	<u>8,604,210</u>

The accompanying notes are an integral part of the consolidated financial statements.

THE COMMUNITY FOUNDATION OF NORTH LOUISIANA

CONSOLIDATED STATEMENTS OF CASH FLOWS

FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020

	<u>2021</u>	<u>2020</u>
<b><u>Cash flows from operating activities:</u></b>		
Change in net assets	22,574,157	12,527,573
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:		
Depreciation	10,761	13,054
Amortization of leasehold improvements	8,923	-
Realized and unrealized (gain) on investments	(19,549,641)	(9,120,767)
(Increase) in interest in charitable remainder trusts and estates	(56,000)	(42,000)
(Increase) decrease in prepaid expenses and other assets	(10,001)	18,968
(Increase) decrease in accounts receivable	344,049	(496,142)
Decrease in cash surrender value of life insurance	2,086	810
(Increase) decrease in other assets	689,394	(1,287,803)
Increase in accounts payable and advance dues	176,358	53,546
(Decrease) in grants payable	(416,539)	(150,788)
Increase in funds held as agency endowments	<u>1,116,779</u>	<u>415,061</u>
Net cash provided by operating activities	4,890,326	1,931,512
<b><u>Cash flows from investing activities:</u></b>		
Proceeds from sale of investments	8,863,324	23,040,798
Purchase of investments	(13,698,985)	(24,809,934)
Leasehold improvements	(214,143)	-
Purchase of equipment and furnishings	<u>(83,084)</u>	<u>(23,693)</u>
Net cash (used) by investing activities	(5,132,888)	(1,792,829)
<b><u>Net (decrease) increase in cash and cash equivalents</u></b>	(242,562)	138,683
<b><u>Cash and cash equivalents at beginning of year</u></b>	<u>378,024</u>	<u>239,341</u>
<b><u>Cash and cash equivalents at end of year</u></b>	<u><u>135,462</u></u>	<u><u>378,024</u></u>

The accompanying notes are an integral part of the consolidated financial statements.

THE COMMUNITY FOUNDATION OF NORTH LOUISIANA

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

DECEMBER 31, 2021 AND 2020

**1. Nature of Operations**

The consolidated financial statements include The Community Foundation of North Louisiana (the Foundation), CFNLA Properties, LLC, CFNLA Properties II, LLC, and its supporting organization, the Annie Lowe Stiles Trust (the Trust). All significant intercompany accounts and transactions have been eliminated in consolidation.

The Foundation (formerly The Community Foundation of Shreveport-Bossier) is a public nonprofit organization which was organized on June 26, 1961, to serve the needs of North Louisiana including the following parishes: Bienville, Bossier, Caddo, Claiborne, DeSoto, Jackson, Lincoln, Morehouse, Natchitoches, Ouachita, Red River, Sabine, Union and Webster. Grants are made by the Foundation for charitable, scientific, literary, educational, and civic purposes.

The Trust is being administered by the trustees for the benefit of the Foundation which is both the income and principal beneficiary of the Trust. The trustees are directed to deliver the net income annually to the Foundation for its public, charitable, and educational uses. The trustees have full discretion to distribute any amount of principal to the Foundation and in the event the principal of the Trust should become inadequate to justify its continuance, they may terminate it by delivering its remaining property to the Foundation. The net income from the Trust's real estate (royalties, rentals, and timber sales) is distributed to the Foundation quarterly. Such distributions are eliminated in consolidation.

CFNLA Properties, LLC and CFNLA Properties II, LLC (collectively, the Companies) were formed during 2014 and 2019, respectively. The Foundation is the sole member of each company.

**2. Summary of Significant Accounting Policies**

The significant accounting policies followed are described below to enhance the usefulness of the financial statements to the reader.

- (a)** Financial Statement Presentation – The accompanying consolidated financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (“GAAP”). The Financial Accounting Standards Board (“FASB”) has established the Accounting Standards Codification (“ASC”) as the source of authoritative accounting principles to be applied in the preparation of financial statements in accordance with GAAP. Net assets and revenues, expenses, gains, and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

*Net Assets Without Donor Restrictions* – Net assets available for general use and not subject to donor restrictions. Funds designated for donor advised grants are available for distribution or restriction upon recommendation by the donor which is followed by Foundation Board approval. The Board of Directors has designated, from net assets without donor restrictions, net assets for endowment, operations, and discretionary grants. The Foundation's policy is to designate unrestricted donor gifts at the discretion of the Board of Directors. Net assets without donor restriction also include the investment in property and equipment net of accumulated depreciation.

## 2. Summary of Significant Accounting Policies (Continued)

*Net Assets With Donor Restrictions* – Net assets that are contributions and endowment investment earnings subject to donor-imposed restrictions. The Foundation may report contributions restricted by donors as increases in net assets without donor restrictions if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor restricted contributions are reported as increases in net assets with donor restrictions, depending on the nature of the restrictions. Donors may make recommendations of donor advised funds to restricted funds held by the foundation. These transfers are shown on the statement of activities as net assets restricted by donor. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions. As of December 31, 2021 and 2020, the Foundation’s net assets with donor restrictions are restricted for funding various community educational and philanthropic programs specified by the donors.

### (b) *Cash and Cash Equivalents*

The Foundation considers all highly liquid financial instruments purchased with original maturities of three months or less, which are not held within our investment portfolios, to be cash and cash equivalents. Cash and highly liquid financial instruments included in our investment portfolios are excluded from this definition.

### (c) *Income Taxes*

The Foundation, Trust and Companies are nonprofit organizations and are exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. The Internal Revenue Service has further determined that the Trust is a supporting organization as described in Section 509(a)(3) of the Internal Revenue Code. The Companies have been deemed disregarded entities and all transactions have been recorded by the Foundation. Therefore, no provision for income taxes has been made in the financial statements, but the Foundation is required to file an annual information tax return. Any penalties related to late filing or other requirements would be recognized as penalties expense in the Foundation’s accounting records.

The Foundation and Trust file U.S. federal Form 990 for informational purposes. The Foundation’s federal income tax returns are subject to examination by the Internal Revenue Service, generally for three years after they were filed.

### (d) *Investments*

The Foundation records investments at fair value, based on quoted market prices, where available. Mineral interests are valued using a multiple of earnings or discounted estimated cash flow methodology. Alternative investments consist of those investments which are not valued based upon a quoted market price and include non-marketable hedge funds, real estate funds, and private equity assets. These funds invest in various partnership interests, managed accounts, and other vehicles to generate investment return. These funds are reported at estimated fair value as measured by their net asset value as reported by fund managers. That amount represents the Foundation’s proportionate interest in the capital of the invested funds. Increases and decreases in market value are recognized in the periods in which they occur. Upon disposition, the cost of the specific investment is used to compute the realized gain or loss to be recognized. Net investment return/(loss) is reported in the statement of activities and consists of interest and dividend income, realized and unrealized gains and losses, less external and direct internal investment expenses. Cost and market values are disclosed in Note 3.

## 2. Summary of Significant Accounting Policies (Continued)

### (e) **Fixed Assets, Depreciation, and Amortization**

Fixed assets are recorded at cost, or if donated, at the fair market value at the date of donation. Depreciation is provided over the estimated useful lives of the assets on a straight-line basis. Amortization of leasehold improvements is provided on a straight-line basis over the remaining term of the lease or the useful life of the improvement, whichever is shorter.

### (f) **Support and Revenue Recognition**

Revenue is recognized when earned. Contributions are recognized when cash, securities or other assets, an unconditional promise to give, or notification of a beneficial interest is received. Conditional promises to give are not recognized until the conditions on which they depend have been substantially met.

### (g) **Functional Allocation of Expenses**

The costs of program services have been summarized on a functional basis in the consolidated statements of activities. The consolidated statements of functional expenses present the natural classification detail of expense by function. Accordingly, certain costs have been allocated among the community programs, management and general, and fundraising expenses. Certain administrative costs associated with the grant process are not included under grants on the consolidated statement of functional expenses and have been more appropriately reflected under community programs.

### (h) **Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimated.

### (i) **Concentrations of Credit and Market Risk**

Financial instruments that potentially expose the Organization to concentrations of credit and market risk consist primarily of cash equivalents and investments. Cash equivalents are maintained at high-quality financial institutions and credit exposure is limited at any one institution. The Organization has not experienced any losses on its cash equivalents. The Organization's investments do not represent significant concentrations of market risk in as much as the Organization's investment portfolio is adequately diversified among issuers, industries, and geographic regions.

Contributions from a few individual donors represented 31% and 30% of total contributions for the years ended December 31, 2021 and 2020, respectively.

### (j) **Reclassification**

Certain prior year amounts have been reclassified to conform with current year presentation.

### (k) **Accounting Guidance/Principles Not Yet Adopted**

In February 2016, the FASB issued ASU No. 2016-02, "Leases" (Topic 842). Under the new guidance, lessees will be required to recognize the following for all leases (with the exception of short-term leases) at the commencement date:

- A lease liability, which is a lessee's obligation to make lease payments arising from a lease, measured on a discounted basis; and

## 2. Summary of Significant Accounting Policies (Continued)

- A right-of-use asset, which is an asset that represents the lessee's right to use, or control the use of, a specified asset for the lease term.

Additional qualitative and quantitative disclosures will be required so that users can understand more about the nature of an entity's leasing activities. Also, the new lease guidance simplified the accounting for sale and leaseback transactions primarily because lessees must recognize lease assets and lease liabilities. Lessees will no longer be provided with a source of off-balance sheet financing.

ASU 2016-02 will be effective for fiscal years beginning after December 15, 2021 and interim periods within fiscal years beginning after December 15, 2022. Lessees (for capital and operating leases) and lessors (for sales-type, direct financing, and operating leases) must apply a modified retrospective transition approach for leases existing at, or entered into after, the beginning of the earliest comparative period presented in the financial statements. The modified retrospective approach would not require any transition accounting for leases that expired before the earliest comparative period presented. The Foundation is currently evaluating the potential impact of adopting this guidance on their financial statements.

## 3. Investments

Major classifications of investments at December 31, 2021 and 2020 follow:

	2021		2020	
	Cost	Fair Value	Cost	Fair Value
Trusts (excluding Stiles)	13,390,531	18,501,791	12,948,545	17,181,018
Stiles trust	2,766,344	8,220,830	2,806,373	5,691,628
Long-term pool	93,237,525	124,559,059	85,673,758	107,840,790
Intermediate Pool	838,640	884,676	-	-
Short-term pool	13,721,337	13,700,287	12,716,849	12,798,790
Other pools	10,147,966	14,424,618	10,274,940	12,344,594
Other	1,093,352	947,647	1,093,352	996,756
Total investments	<u>135,195,695</u>	<u>181,238,908</u>	<u>125,513,817</u>	<u>156,853,576</u>

Investments-other pools are funds established by donors in an amount over \$250,000 whereby the donor is allowed to recommend a financial advisor. The performance of these funds is monitored by the Foundation Board and Investment Committee.

Investments-trusts, investments pools, and investments-other are presented below with their respective costs and fair values at December 31:

	2021		2020	
	Cost	Fair Value	Cost	Fair Value
Cash and cash equivalents	16,603,979	16,603,979	14,322,877	14,322,877
Fixed income	29,218,786	28,945,475	22,378,545	23,263,367
Equity	57,557,598	82,366,541	57,974,064	73,500,862
Hedge funds	14,041,982	17,383,225	13,532,991	15,833,529
Real estate and mineral interests	3,783,104	12,839,140	4,218,697	10,161,128
Other	13,990,246	23,100,548	13,086,643	19,771,813
	<u>135,195,695</u>	<u>181,238,908</u>	<u>125,513,817</u>	<u>156,853,576</u>

### 3. Investments (Continued)

The Foundation adopted FASB Codification topic 820, “Fair Value Measurement” (FASB ASC 820), as of January 1, 2008. FASB ASC 820 requires disclosures that stratify balance sheet amounts measured at fair value based on the inputs used to derive fair value measurements. These strata include:

- Level 1 valuations, where the valuation is based on quoted market prices for identical assets or liabilities traded in active markets (which include exchanges and over-the-counter markets with sufficient volume),
- Level 2 valuations, where the valuation is based on quoted market prices for similar instruments traded in active markets, quoted prices for identical or similar instruments in markets that are not active and model-based valuation techniques for which all significant assumptions are observable in the market, and
- Level 3 valuations, where the valuation is generated from model-based techniques that use significant assumptions not observable in the market, but observable based on Foundation-specific data. These unobservable assumptions reflect the Foundation’s own estimates for assumptions that market participants would use in pricing the asset or liability. Valuation techniques typically include option pricing models, discounted cash flow models and similar techniques, but may also include the use of market prices of assets or liabilities that are not directly comparable to the subject asset or liability.

Fair values of assets and liabilities measured on a recurring basis at December 31, 2021 and 2020 are as follows:

	Level 1	Level 2	Level 3	Total Fair Value
<b>December 31, 2021:</b>				
Cash and cash equivalents	16,603,979	-	-	16,603,979
Fixed income	28,945,475	-	-	28,945,475
Equity	82,366,541	-	-	82,366,541
Hedge funds	-	-	789,997	789,997
Real estate and mineral interests	-	10,601,892	-	10,601,892
Other	-	3,000	306,866	309,866
Total assets in the fair value hierarchy	127,915,995	10,604,892	1,096,863	139,617,750
Investments measured at net asset value	-	-	-	41,621,158
Total investments	<u>127,915,995</u>	<u>10,604,892</u>	<u>1,096,863</u>	<u>181,238,908</u>

**3. Investments (Continued)**

	Level 1	Level 2	Level 3	Total Fair Value
<b>December 31, 2020:</b>				
Cash and cash equivalents	14,322,877	-	-	14,322,877
Fixed income	23,263,367	-	-	23,263,367
Equity	73,500,862	-	-	73,500,862
Hedge funds	-	-	744,269	744,269
Real estate and mineral interests	-	7,837,363	-	7,837,363
Other	-	3,000	308,902	311,902
Total assets in the fair value hierarchy	111,087,106	7,840,363	1,053,171	119,980,640
Investments measured at net asset value	-	-	-	36,872,936
Total investments	<u>111,087,106</u>	<u>7,840,363</u>	<u>1,053,171</u>	<u>156,853,576</u>

Investments measured at fair value on a recurring basis using significant unobservable inputs (Level 3):

	Hedge Funds	Other	Total
<b>Balance-December 31, 2019</b>	679,568	314,072	993,640
Gains (losses) realized and unrealized	<u>64,701</u>	<u>(5,170)</u>	<u>59,531</u>
<b>Balance-December 31, 2020</b>	744,269	308,902	1,053,171
Gains (losses) realized and unrealized	<u>45,728</u>	<u>(2,036)</u>	<u>43,692</u>
<b>Balance-December 31, 2021</b>	<u>789,997</u>	<u>306,866</u>	<u>1,096,863</u>

### 3. Investments (Continued)

The following table summarizes investments measured at fair value based on net asset value (NAVs) per share as of December 31, 2021 and 2020, respectively.

	NAV in Funds	Amount Unfunded Commitments	Redemption Terms	Redemption Restrictions
<b>December 31, 2021:</b>				
Hedge funds				
Multi-strategy fund	-	-	Quarterly	(a)
Multi-strategy fund	8,325,710	-	Quarterly	N/A*
Multi-strategy fund	8,267,518	-	Quarterly	(b)
Emerging markets fund	1,991,030	-	Monthly	(c)
International fund	6,222,405	-	Monthly	(d)
Real estate-illiquid funds				
Real estate	2,237,248	554,223	N/A	N/A*
Natural resources	5,094,963	1,431,917	N/A	N/A*
Private equity funds				
Distressed, buyout, and venture capital and energy	2,581,951	3,569,486	N/A	N/A*
Energy	1,539,487	83,872	N/A	N/A*
Real estate	4,078,059	3,000,000	N/A	N/A*
Debt	1,282,787	1,800,214	N/A	N/A*
	<u>41,621,158</u>	<u>10,439,712</u>		
<b>December 31, 2020:</b>				
Hedge funds				
Multi-strategy fund	5,965	-	Quarterly	(a)
Multi-strategy fund	7,836,095	-	Quarterly	N/A*
Multi-strategy fund	7,247,200	-	Quarterly	(b)
Emerging markets fund	2,225,025	-	Monthly	(c)
International fund	5,868,756	-	Monthly	(d)
Real estate-illiquid funds				
Real estate	2,323,765	569,725	N/A	N/A*
Natural resources	4,235,764	1,699,472	N/A	N/A*
Private equity funds				
Distressed, buyout, and venture capital and energy	1,795,077	1,244,506	N/A	N/A*
Energy	1,320,989	102,010	N/A	N/A*
Real estate	3,086,171	980,600	N/A	N/A*
Debt	928,129	2,084,440	N/A	N/A*
	<u>36,872,936</u>	<u>6,680,753</u>		

### 3. Investments (Continued)

\*These funds are in a private equity or partnership structure with no ability to redeem.

- (a) 10% may be redeemed each year; full redemption on a rolling two-year lock-up.
- (b) Up to 25% may be redeemed quarterly.
- (c) This class includes emerging market index funds, a comingled actively managed fund that invests only in emerging market public equities. This class may invest in derivatives.
- (d) This class includes a comingled fund that invests in large and mid-cap value public equities. This account has no short positions.

### 4. Fixed Assets

A summary of fixed assets at December 31, 2021 and 2020 is as follows:

	<u>2021</u>	<u>2020</u>
Equipment and furnishings	279,140	208,392
Leasehold improvements	556,305	342,161
Construction in Progress	-	19,847
<u>Less-accumulated depreciation and amortization</u>	<u>(510,994)</u>	<u>(523,462)</u>
Total fixed assets	<u><u>324,451</u></u>	<u><u>46,938</u></u>

### 5. Agency Endowment Funds

FASB ASC 958 establishes standards for transactions in which a community foundation accepts a contribution from a donor and agrees to transfer those assets, the return on investment of those assets or both to another entity that is specified by the donor. FASB ASC 958 specifically requires that if a not-for-profit organization (NPO) establishes a fund at a community foundation with its own funds and specifies itself as the beneficiary of that fund, the community foundation must account for the transfer of such assets as a liability. The Foundation refers to such funds as agency endowments.

The Foundation maintains variance power and legal ownership of agency endowment funds and as such continues to report the funds as assets of the Foundation. However, in accordance with FASB ASC 958, a liability has been established for the fair value of the funds, which is generally equivalent to the present value of future payments expected to be made to the NPOs.

At December 31, 2021 and 2020, the Foundation was the owner of forty-six agency endowment funds with a combined value of \$10,383,849 and \$9,267,070, respectively. The following table summarizes activity in such funds during the years ended December 31, 2021 and 2020:

	<u>2021</u>	<u>2020</u>
<u>Agency endowment fund balances at beginning of year</u>	9,267,070	8,852,009
Contributions	85,729	56,682
Net investment income	1,452,642	774,963
Grants	(334,660)	(332,169)
Administrative expenses	(86,008)	(83,948)
Other expenses	<u>(924)</u>	<u>(467)</u>
<u>Agency endowment fund balances at end of year</u>	<u><u>10,383,849</u></u>	<u><u>9,267,070</u></u>

## 6. Endowed Net Assets

The Foundation has established prudent investment and spending policies with the objective of maintaining the purchasing power of its endowed assets in perpetuity and to provide a stable level of support to the beneficiaries. To achieve this objective, the Foundation's asset allocation strategy is reviewed periodically and adjusted to target a total return that covers inflation, administrative expenses, and spending allocations, while minimizing volatility.

A spending rate is determined by the Foundation's Board of Directors. The rate is currently 4.0%. This determination is made with consideration given to market conditions and the spending levels of peer institutions. The spending rate approved by the Board is applied to the twelve-quarter moving average market value of the pooled assets by fund. Effective July 1, 2010, the Louisiana legislature enacted Act No. 168 ("Act") to implement the Uniform Prudent Management of Institutional Funds Act ("UPMIFA") as the standard for the management and investment of institutional funds in Louisiana. The Act permits an institution to appropriate for expenditure or accumulate so much of an endowment fund as the institution determines is prudent for the uses, benefits, purposes, and duration for which the endowment fund was established, subject to the intent of the donor as expressed in the gift instrument. The Foundation's spending policy dictates that no portion of the corpus (original amount of donation) of the endowed assets shall be allocated for spending.

The Foundation classifies as net assets with donor restrictions the original value of gifts donated for permanent endowment, any subsequent gifts to such endowments, and accumulations subsequently made at the direction of the applicable donor instrument. During 2020, certain donors amended their donor instruments to endow funds previously held by the Foundation as donor advised funds, which were classified as funds without donor restrictions.

Endowment funds net asset composition as of December 31, 2021 and 2020:

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Endowment net assets, December 31, 2019	159,463	57,009,745	57,169,208
Contributions	-	3,598,103	3,598,103
Net investment income	212,571	4,708,554	4,921,125
Appropriation of endowment assets for expenditure	(8,081)	(1,489,271)	(1,497,352)
Net assets restricted by donor	-	2,281,190	2,281,190
Net assets transferred	<u>928,896</u>	<u>450,676</u>	<u>1,379,572</u>
Endowment net assets, December 31, 2020	1,292,849	66,558,997	67,851,846
Contributions	12,589	1,003,733	1,016,322
Net investment income	205,013	11,201,104	11,406,117
Appropriation of endowment assets for expenditure	<u>(8,266)</u>	<u>(1,710,956)</u>	<u>(1,719,222)</u>
Endowment net assets, December 31, 2021	<u>1,502,185</u>	<u>77,052,878</u>	<u>78,555,063</u>

**6. Endowed Net Assets (Continued)**

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below corpus. These deficiencies could result from unfavorable market fluctuations. Subsequent gains that restore the fair value of the assets of the endowment funds to corpus will be classified as an increase in net assets with donor restrictions or an increase in net assets without donor restrictions as applicable. There were no reported deficiencies in endowed net assets as of December 31, 2021 and 2020.

**7. Liquidity and Availability**

The Foundation manages its cash available to meet general expenditures and grants following two guiding principles:

- Operating within a prudent range of financial soundness and stability, and
- Maintaining adequate liquid assets.

**General Expenditures**

General expenditures include management and general expenses, fundraising expenses, and some program expenses.

Financial assets at December 31, 2021 and 2020 designated by the board for operating purposes:

	<u>2021</u>	<u>2020</u>
Cash and cash equivalents	74,731	67,087
Investments - short term pool	1,429,711	1,276,768
Total	<u>1,504,442</u>	<u>1,343,855</u>

In addition to these funds available for general expenditures, the Foundation's Board of Directors has chosen to charge an administrative fee to all funds based on the funds' average quarterly market value over the preceding twelve quarters or the number of quarters in existence to cover general expenditures required to operate the Foundation. The administrative fee rate is 1% for all funds with the exception of scholarship funds established after February 19, 2004, which incur fees at a rate of 1.5%. The fees are assessed on a quarterly basis. Administrative fees of \$1,418,711 for 2021 and \$1,339,489 for 2020 were charged to specific funds. Such administrative fee income (Operating Fund) and administrative fee expense (other funds) is netted in the presentation of the consolidated statement of activities. Estimated administrative fees available for general expenditures during 2022 are \$1,504,616.

The Foundation manages its cash available for grant purposes by examining the purpose for which the fund was established, whether the fund is endowed or not. Most funds that are not endowed are invested in the Foundation's short-term pool which includes an allocation to money market funds and an allocation to high quality fixed-income securities with maturities ranging from approximately one year to approximately five years. Funds held in the short-term pool are subject to withdrawal at any time. Capital preservation and liquidity are paramount.

For those funds that are endowed, or the fund operates according to our spending policy for granting, the funds are generally invested in the Foundation's long-term pool. The amount available for granting is determined on an annual basis. This amount is calculated according to the Foundation's spending policy, which is currently 4% of the funds' average quarterly market value over the preceding twelve quarters. In order to protect the value of an endowment and not consume principal, no grant distributions are made that will cause the fund value to dip below the amounts contributed to the fund. Funds calculated as available for granting during 2020 and 2021 were

**7. Liquidity and Availability (Continued)**

\$4,505,820 and \$4,730,790, respectively. Amounts available for granting and to cover the administrative fees charged by the Foundation are transferred to the short-term pool so that they are readily available. In addition, an estimated amount of \$5,547,890 will be available for granting during 2022, at the Board's discretion. The board endowed \$1,249,028 and \$1,076,346 for operating expenditures at December 31, 2021 and 2020, respectively.

**8. Functional Expenses**

The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Therefore, expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include dues and subscriptions, equipment rental and maintenance, health insurance, office supplies, payroll taxes, postage, printing, rent, retirement plan expense, salaries, seminars and travel, and telephone, all of which are allocated on the basis of estimates of time and effort or other reasonable bases.

**9. Leases**

The Foundation leases office space under an operating lease expiring May 31, 2026. Future minimum lease requirements are presented below:

2022	94,244
2022	96,311
2023	98,379
2024	100,446
2025	42,211
Thereafter	-
	431,591

Lease expense recorded for the years ended December 31, 2021 and 2020 was \$88,356 and \$93,930, respectively.

**10. Retirement Plan**

Effective January 1, 2003, the assets of the 401(k) plan were rolled into a new 403(b) retirement plan. The 403(b) plan covers employees who have completed one year of eligibility service and are at least twenty-one years old. The Foundation matches employee contributions up to 6% of eligible wages.

Participants are fully vested in employer contributions after three years of service. The Foundation contributed \$26,190 and \$28,355 to the 403(b) plan for the years ended December 31, 2021 and 2020, respectively.

Also, effective January 1, 2003, the Foundation implemented a tax-deferred annuity plan. Participation in this plan is voluntary and the Foundation makes no contributions. Employees may begin participating in this plan on the first of the month following employment at the Foundation.

**11. Condensed Financial Statements of Annie Lowe Stiles Trust**

Financial information pertaining only to the Annie Lowe Stiles Trust follows for the years ended December 31, 2021 and 2020:

	<u>2021</u>	<u>2020</u>
Assets:		
Investments	<u>8,220,830</u>	<u>5,691,628</u>
Total assets	<u><u>8,220,830</u></u>	<u><u>5,691,628</u></u>
Net assets with donor restrictions	<u><u>8,220,830</u></u>	<u><u>5,691,628</u></u>

Statement of Activities

	<u>2021</u>		
	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Revenues, gains, and other support:			
Net investment income	<u>-</u>	<u>3,578,317</u>	<u>3,578,317</u>
Total revenues, gains, and other support:	<u>-</u>	<u>3,578,317</u>	<u>3,578,317</u>
Net assets released from restrictions	<u>1,049,115</u>	<u>(1,049,115)</u>	<u>-</u>
Total revenues, gains, other support, and reclassifications	<u>1,049,115</u>	<u>2,529,202</u>	<u>3,578,317</u>
Distributions	<u>(1,049,115)</u>	<u>-</u>	<u>(1,049,115)</u>
Changes in net assets	<u>-</u>	<u>2,529,202</u>	<u>2,529,202</u>
Net assets at beginning of year	<u>-</u>	<u>5,691,628</u>	<u>5,691,628</u>
Net assets at end of year	<u><u>-</u></u>	<u><u>8,220,830</u></u>	<u><u>8,220,830</u></u>

**11. Condensed Financial Statements of Annie Lowe Stiles Trust (Continued)**Statement of Activities

	2020		
	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Revenues, gains, and other support:			
Net investment income	-	1,610,257	1,610,257
Total revenues, gains, and other support:	-	1,610,257	1,610,257
Net assets released from restrictions	<u>942,080</u>	<u>(942,080)</u>	<u>-</u>
Total revenues, gains, other support, and reclassifications	942,080	668,177	1,610,257
Distributions	<u>(942,080)</u>	<u>-</u>	<u>(942,080)</u>
Changes in net assets	-	668,177	668,177
Net assets at beginning of year	<u>-</u>	<u>5,023,451</u>	<u>5,023,451</u>
Net assets at end of year	<u>-</u>	<u>5,691,628</u>	<u>5,691,628</u>

The distributions of \$1,049,115 and \$942,080 from the Trust to the Foundation for the years ended December 31, 2021 and 2020, respectively, were eliminated in consolidation.

**12. Interest in Estate of Carolyn Querbes Nelson**

The Foundation was named as one of two residual legatees in the Last Will and Testament of Carolyn Querbes Nelson. Ms. Nelson died on May 1, 2013. At the conclusion of the succession, after all debt and taxes have been paid, a judgment of possession will be rendered by the court. During 2021 and 2020, respectively, \$-0- and \$-0- was received by the Foundation.

**13. Lyndon Erroll Dawson, Jr. Succession**

The Foundation was the residual legatee of the Succession of Lyndon Erroll Dawson, Jr. Cash and other properties were distributed to the Foundation following the termination of the estate during 2020. During 2021 and 2020, respectively, \$15,860 and \$2,850,283 was received by the Foundation.

**14. Uncertainties Arising Due to Pandemic**

The World Health Organization declared the coronavirus outbreak a pandemic in March 2020. Actions taken around the world to help mitigate the spread of the coronavirus included restrictions on travel, quarantines in certain areas, and forced closures for certain types of public places and businesses. The coronavirus and actions taken to mitigate it have had, and are expected to continue to have, an adverse impact on the economies and financial markets of substantially all countries around the world, including the geographical area in which the Foundation operates. While the disruption currently is expected to be temporary, there is considerable uncertainty about its duration. Although the pandemic could negatively affect the Foundation, the amount of that impact and its duration cannot be reasonably estimated at this time.

**15. Subsequent Events**

The Foundation is required to evaluate events or transactions that may occur after the balance sheet date for potential recognition or disclosure in the financial statements. The Foundation performed such an evaluation through April 21, 2022, the date which the financial statements were available to be issued noting no such issues.

EXTENDED TO NOVEMBER 15, 2021

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Form **990**

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

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the **2020** calendar year, or tax year beginning and ending

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE COMMUNITY FOUNDATION OF NORTH LOUISIANA</b>		<b>D</b> Employer identification number <b>72-6022365</b>
	Doing business as <b>THE COMMUNITY FOUNDATION</b>		<b>E</b> Telephone number <b>(318) 221-0582</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>35,823,848.</b>
	<b>401 EDWARDS STREET</b>		<b>105</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>SHREVEPORT, LA 71101-5508</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>F</b> Name and address of principal officer: <b>KRISTI GUSTAVSON</b> <b>SAME AS C ABOVE</b>			
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: ▶ <b>WWW.CFNLA.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: <b>1961</b> <b>M</b> State of legal domicile: <b>LA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO STRENGTHEN THE COMMUNITY THROUGH PHILANTHROPY</b>
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>3</b> <b>7</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b> <b>7</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a) <b>5</b> <b>10</b>
	<b>6</b> Total number of volunteers (estimate if necessary) <b>6</b> <b>7</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <b>7a</b> <b>-8,559.</b> <b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 <b>7b</b> <b>0.</b>
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) <b>5,719,195.</b> <b>Prior Year</b> <b>9,842,888.</b> <b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) <b>0.</b> <b>0.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>5,608,440.</b> <b>6,012,332.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>233,791.</b> <b>433,886.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>11,561,426.</b> <b>16,289,106.</b>
	<b>Expenses</b>
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <b>0.</b> <b>0.</b>	
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>682,193.</b> <b>704,153.</b>	
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>0.</b> <b>0.</b>	
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>218,839.</b>	
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>627,145.</b> <b>563,534.</b>	
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>9,064,095.</b> <b>9,020,794.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 <b>2,497,331.</b> <b>7,268,312.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) <b>142,357,569.</b> <b>Beginning of Current Year</b> <b>154,534,783.</b> <b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26) <b>9,908,923.</b> <b>10,226,742.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 <b>132,448,646.</b> <b>144,308,041.</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer	Date			
	<b>PAIGE CARLISLE, CFO</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>AIMEE P. MCFARLAND</b>	Preparer's signature <b>AIMEE P. MCFARLAND</b>	Date <b>10/27/21</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P01492592</b>
	Firm's name ▶ <b>HEARD, MCELROY &amp; VESTAL, LLC</b>	Firm's EIN ▶ <b>72-0398470</b>	Phone no. <b>318-429-1525</b>		
	Firm's address ▶ <b>333 TEXAS STREET, SUITE 1525 SHREVEPORT, LA 71101</b>				

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

THE COMMUNITY FOUNDATION OF NORTH LOUISIANA

Form 990 (2020)

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: TO STRENGTHEN THE COMMUNITY THROUGH PHILANTHROPY

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 7,753,107. including grants of \$ 7,753,107. ) (Revenue \$ ) COMMUNITY FOUNDATION OF NORTH LOUISIANA SERVES AS A POWERFUL CATALYST FOR PROMOTING CHARITABLE GIVING AND EFFECTING POSITIVE CHANGE IN OUR AREA. WE FUND A VARIETY OF PROGRAMS THAT ADDRESS CRITICAL NEEDS IN OUR COMMUNITY, INLCUDING POVERTY, HEALTH, AND EDUCATION. THE FOUNDATION IS A STEWARD OF THE PHILANTHROPIC INTERESTS OF PAST DONORS, REMAINS FLEXIBLE TO RESPOND TO CHANGING NEEDS IN OUR REGION, AND IS COMMITTED TO CREATING A MORE VIBRANT NORTH LOUISIANA FOR GENERATIONS TO COME.

4b (Code: ) (Expenses \$ 193,925. including grants of \$ ) (Revenue \$ ) GIVE FOR GOOD IS A 24-HOUR ONLINE GIVING CHALLENGE THAT RAISES UNRESTRICTED DOLLARS FOR NONPROFITS IN NORTH LOUISIANA. THE EVENT ENCOURAGES COMMUNITY MEMBERS FROM ALL BACKGROUNDS TO BECOME INVOLVED IN PHILANTHROPY AND EDUCATES PARTICIPANTS ON THE VITAL SERVICES THAT AREA NONPROFITS PROVIDE. SINCE ITS CREATION IN 2014, GIVE FOR GOOD HAS RAISED OVER \$14 MILLION FOR NORTH LOUISIANA CHARITIES.

4c (Code: ) (Expenses \$ 24,000. including grants of \$ ) (Revenue \$ ) TO HELP DRIVE CHANGE IN OUR AREA, THE COMMUNITY FOUNDATION HAS BEEN TRACKING DATA AND PUBLISHING AN ANNUAL REPORT CARD, "COMMUNITY COUNTS", SINCE 2008. DATA FOR THE SHREVEPORT-BOSSIER METROPOLITAN STATISTICAL AREA (MSA) IS COLLECTED AND TRACKED IN SIX CATEGORIES: POPULATION, ECONOMICS, POVERTY, EDUCATION, HEALTH, AND COMMUNITY. THIS DATA GUIDES THE FOUNDATION'S GRANTMAKING AND WE ENCOURAGE ALL TO USE THE REPORT TO START COMMUNITY DISCUSSIONS, AS A ROADMAP FOR SOCIAL CAPITAL INVESTMENT, OR AS A CALL TO ACTION FOR PHILANTHROPY AND VOLUNTEERISM.

4d Other program services (Describe on Schedule O.) (Expenses \$ 324,574. including grants of \$ ) (Revenue \$ )

4e Total program service expenses 8,295,606.

THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Form 990 (2020)

72-6022365 Page 3

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Form 990 (2020)

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	X	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**Part 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

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Form 990 (2020)

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, filed for the calendar year ending with or within the year covered by this return		
	2a		10
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	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 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

Form 990 (2020)

**THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

Form 990 (2020)

**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.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	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?		<b>X</b>
<b>3</b>	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?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Did the organization have members or stockholders?	<b>X</b>	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		<b>X</b>
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<b>X</b>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	<b>X</b>	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		<b>X</b>

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		<b>X</b>
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>X</b>	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>X</b>	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>X</b>	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>X</b>	
<b>13</b>	Did the organization have a written whistleblower policy?	<b>X</b>	
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>X</b>	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	<b>X</b>	
<b>15b</b>	Other officers or key employees of the organization	<b>X</b>	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<b>X</b>
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **PAIGE CARLISLE - (318) 221-0582**  
**401 EDWARDS STREET, SUITE 105, SHREVEPORT, LA 71101**





**THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

Form 990 (2020)

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>	942,080.				
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	109,902.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	8,790,906.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 146,102.				
	<b>h Total.</b> Add lines 1a-1f .....			9,842,888.			
<b>Program Service Revenue</b>	<b>2 a</b> _____	<b>Business Code</b>					
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....						
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		2,493,143.		-8,559.	2,501,702.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....		331,822.			331,822.	
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real	6,891.			
			(ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>	13,133.				
	<b>c</b> Rental income or (loss)	<b>6c</b>	-6,242.				
	<b>d</b> Net rental income or (loss) .....			-6,242.		-6,242.	
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	23,040,798.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	19,521,609.				
	<b>c</b> Gain or (loss) .....	<b>7c</b>	3,519,189.				
<b>d</b> Net gain or (loss) .....			3,519,189.		3,519,189.		
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> OTHER INCOME	<b>Business Code</b>	900099	108,306.	108,306.		
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			108,306.			
<b>12 Total revenue.</b> See instructions .....			16,289,106.	108,306.	-8,559.	6,346,471.	

**THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

Form 990 (2020)

**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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,683,402.	7,683,402.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	69,705.	69,705.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	249,700.	124,850.	87,395.	37,455.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	328,064.	164,032.	114,822.	49,210.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	28,355.	14,178.	9,924.	4,253.
<b>9</b> Other employee benefits	53,920.	26,960.	18,872.	8,088.
<b>10</b> Payroll taxes	44,114.	22,057.	15,440.	6,617.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	45,719.		45,719.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	28,631.	9,543.	9,544.	9,544.
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	93,930.	28,179.	37,572.	28,179.
<b>17</b> Travel	2,884.	1,154.	865.	865.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	13,054.		13,054.	
<b>23</b> Insurance	16,576.		16,576.	
<b>24</b> 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 O.)				
<b>a</b> <b>COMMUNITY PROGRAMS</b>	93,190.	93,190.		
<b>b</b> <b>EXPENSES-AGENCY FUNDS</b>	84,415.		84,415.	
<b>c</b> <b>PUBLIC RELATIONS</b>	75,593.	29,735.		45,858.
<b>d</b> <b>EQUIPMENT RENTAL AND MA</b>	45,403.	13,621.	18,161.	13,621.
<b>e</b> All other expenses	64,139.	15,000.	33,990.	15,149.
<b>25</b> Total functional expenses. Add lines 1 through 24e	9,020,794.	8,295,606.	506,349.	218,839.
<b>26</b> 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)

THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Form 990 (2020)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	239,342.	<b>1</b>	378,024.
	<b>2</b> Savings and temporary cash investments .....	11,371,086.	<b>2</b>	13,903,253.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	40,864.	<b>4</b>	537,006.
	<b>5</b> Loans and other receivables from 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	18,061.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	51,744.	<b>9</b>	32,776.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 570,400.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 523,462.	36,299.	<b>10c</b> 46,938.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	362,309.	<b>12</b>	996,757.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	130,255,925.	<b>15</b>	138,621,968.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	142,357,569.	<b>16</b>	154,534,783.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	276,490.	<b>17</b>	330,036.
	<b>18</b> Grants payable .....	780,424.	<b>18</b>	629,636.
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	8,852,009.	<b>25</b>	9,267,070.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	9,908,923.	<b>26</b>	10,226,742.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	70,546,729.	<b>27</b>	72,040,276.
	<b>28</b> Net assets with donor restrictions .....	61,901,917.	<b>28</b>	72,267,765.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	132,448,646.	<b>32</b>	144,308,041.
<b>33</b> Total liabilities and net assets/fund balances .....	142,357,569.	<b>33</b>	154,534,783.	

Form 990 (2020)

**THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

Form 990 (2020)

72-6022365 Page **12**

**Part XI Reconciliation of Net Assets**

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

1 Total revenue (must equal Part VIII, column (A), line 12) .....	<b>1</b>	16,289,106.
2 Total expenses (must equal Part IX, column (A), line 25) .....	<b>2</b>	9,020,794.
3 Revenue less expenses. Subtract line 2 from line 1 .....	<b>3</b>	7,268,312.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .....	<b>4</b>	132,448,646.
5 Net unrealized gains (losses) on investments .....	<b>5</b>	4,964,142.
6 Donated services and use of facilities .....	<b>6</b>	
7 Investment expenses .....	<b>7</b>	
8 Prior period adjustments .....	<b>8</b>	
9 Other changes in net assets or fund balances (explain on Schedule O) .....	<b>9</b>	-373,059.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) .....	<b>10</b>	144,308,041.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	<b>2a</b>		<b>X</b>
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant? .....	<b>2b</b>	<b>X</b>	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....	<b>2c</b>	<b>X</b>	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....	<b>3a</b>		<b>X</b>
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 .....	<b>3b</b>		

Form **990** (2020)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

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 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF NORTH LOUISIANA** Employer identification number **72-6022365**

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	8614744.	4824553.	8439536.	5719195.	9842888.	37440916.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	8614744.	4824553.	8439536.	5719195.	9842888.	37440916.
<b>5</b> 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) .....						5830478.
<b>6 Public support.</b> Subtract line 5 from line 4.						31610438.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	8614744.	4824553.	8439536.	5719195.	9842888.	37440916.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	2344107.	3052703.	1909505.	4268552.	2819015.	14393882.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	125,918.	53,549.	29,929.	74,159.	108,306.	391,861.
<b>11 Total support.</b> Add lines 7 through 10						52226659.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	60.53 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	53.66 %
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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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.)

Section A. Public Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in 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 assets (Explain in Part VI.); 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2019 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2019 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on 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**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in line 11a above?		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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? <i>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.</i>		
<b>2</b> 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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described in 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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? <i>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.</i>		
<b>b</b> Did the activities described in 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? <i>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.</i>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> 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? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

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.

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2020		
a	From 2015		
b	From 2016		
c	From 2017		
d	From 2018		
e	From 2019		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016		
b	Excess from 2017		
c	Excess from 2018		
d	Excess from 2019		
e	Excess from 2020		

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**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.)

Multiple horizontal lines for supplemental information.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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)(4), (5), or (6) organizations: Complete Part III.

Name of organization THE COMMUNITY FOUNDATION OF NORTH LOUISIANA
Employer identification number 72-6022365

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political campaign activity expenditures \$
3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$
2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
4a Was a correction made? Yes No
b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$
4 Did the filing organization file Form 1120-POL for this year? Yes No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

THE COMMUNITY FOUNDATION OF NORTH

Schedule C (Form 990 or 990-EZ) 2020 LOUISIANA

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b)	0.													
<b>d</b>	Other exempt purpose expenditures														
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d)	0.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	0.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f)	0.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0-														
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0-														
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

THE COMMUNITY FOUNDATION OF NORTH

Schedule C (Form 990 or 990-EZ) 2020 LOUISIANA

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
<b>1</b> 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>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

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

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	<b>3</b>	

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

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
<b>a</b> Current year .....	<b>2a</b>
<b>b</b> Carryover from last year .....	<b>2b</b>
<b>c</b> Total .....	<b>2c</b>
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions) .....	<b>5</b>

**Part IV Supplemental Information**

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

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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

2020

Open to Public Inspection

Name of the organization THE COMMUNITY FOUNDATION OF NORTH LOUISIANA Employer identification number 72-6022365

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple questions (1-9) regarding conservation easements, including purpose, monitoring, and reporting requirements. Includes a small table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, and 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with questions 1a, 1b, and 2 regarding the reporting of art and historical treasures. Includes fields for revenue and asset values.

THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Schedule D (Form 990) 2020

72-6022365 Page 2

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	8,852,010.	8,023,634.	8,610,800.	7,889,521.	6,945,679.
b Contributions	56,682.	76,231.	54,144.	255,249.	666,537.
c Net investment earnings, gains, and losses	774,963.	1,153,260.	-268,202.	940,992.	620,247.
d Grants or scholarships	332,169.	318,872.	293,752.	275,490.	271,323.
e Other expenditures for facilities and programs				123,885.	
f Administrative expenses	84,415.	82,243.	79,356.	75,587.	71,619.
g End of year balance	9,267,071.	8,852,010.	8,023,634.	8,610,800.	7,889,521.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  100 %
  - c Term endowment  \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No |
|---|-----|----|
| (i) Unrelated organizations   |     | X  |
| (ii) Related organizations  |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b  |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		342,161.	342,161.	0.
d Equipment				
e Other		228,239.	181,301.	46,938.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				46,938.

Schedule D (Form 990) 2020

**THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

Schedule D (Form 990) 2020

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) CASH VALUE LIFE INSURANCE	107,288.
(2) REMAINDER INTEREST IN CRT	983,000.
(3) INVESTMENTS-POOLS	119,354,116.
(4) INVESTMENTS-TRUSTS (EXCLUDING STILES)	16,907,822.
(5) DAWSON PROPERTIES	1,269,742.
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	138,621,968.

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(2) FUNDS HELD AS AGENCY ENDOWMENTS	9,267,070.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	9,267,070.

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 ...

THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Schedule D (Form 990) 2020

72-6022365 Page 4

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	21,131,783.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	4,964,142.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	1,652,257.	
e	Add lines 2a through 2d	2e		6,616,399.
3	Subtract line 2e from line 1	3		14,515,384.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	1,773,722.	
c	Add lines 4a and 4b	4c		1,773,722.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		16,289,106.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	8,604,210.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1	3		8,604,210.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	416,584.	
c	Add lines 4a and 4b	4c		416,584.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		9,020,794.

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE FOUNDATION, TRUST, AND COMPANY ARE NONPROFIT ORGANIZATIONS AND ARE EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE INTERNAL REVENUE SERVICE HAS FURTHER DETERMINED THAT THE TRUST IS A SUPPORTING ORGANIZATION AS DESCRIBED IN SECTION 509(A)(3) OF THE INTERNAL REVENUE CODE. THE COMPANY HAS BEEN DEEMED A DISREGARDED ENTITY AND ALL TRANSACTIONS HAVE BEEN RECORDED BY THE FOUNDATION. THEREFORE, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS, BUT THE FOUNDATION IS REQUIRED TO FILE AN ANNUAL INFORMATION TAX RETURN. ANY PENALTIES RELATED TO LATE FILING OR OTHER REQUIREMENTS WOULD BE RECOGNIZED AS PENALTIES EXPENSE IN THE FOUNDATION'S ACCOUNTING RECORDS.

THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Schedule D (Form 990) 2020

**Part XIII** Supplemental Information (continued)

THE FOUNDATION FILES U.S. FEDERAL FORM 990 FOR INFORMATIONAL PURPOSES.

THE FOUNDATION'S FEDERAL INCOME TAX RETURNS ARE SUBJECT TO EXAMINATION BY  
THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS AFTER THEY WERE  
FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	42,000.
STILES TRUST INCOME	1,610,257.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,652,257.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

REVENUE FROM AGENCY FUNDS	831,645.
STILES DISTRIBUTIONS	942,080.
ROUNDING	-3.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	1,773,722.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

ROUNDING	
EXPENSES FROM AGENCY FUNDS	416,584.







THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Schedule F (Form 990) 2020

72-6022365 Page 4

**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  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  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  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  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)* .....  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  No

Schedule F (Form 990) 2020

THE COMMUNITY FOUNDATION OF NORTH

Schedule F (Form 990) 2020

LOUISIANA

72-6022365

Page 5

**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.

FORM 990, SCHEDULE F, PART I, LINE 3(F)

AMOUNT OF THE INVESTMENTS' BOOK VALUE IS \$15,089,000 WHICH HAS ALREADY BEEN ADJUSTED BY \$195,000 OF INVESTMENT EXPENSES AND A \$2,650,000 TRANSFERS IN AND \$303,235 OF TRANSFERS OUT DURING 2020.

Multiple horizontal lines for supplemental information.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
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](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

**Employer identification number  
72-6022365**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
ACLU FOUNDATION OF LOUISIANA P. O. BOX 56157 NEW ORLEANS, LA 70156	72-0717944	501(C)3	10,000.	0.			FOR GENERAL SUPPORT
ALLIANCE FOR EDUCATION 400 EDWARDS STREET SHREVEPORT, LA 71101	72-1466587	501(C)3	61,957.	0.			FOR GENERAL SUPPORT, TEACHER MINI GRANTS
AMERICAN RED CROSS OF NORTH LOUISIANA - 805 BROOK HOLLOW DRIVE - SHREVEPORT, LA 71105	53-0196605	501(C)3	6,520.	0.			GIVE FOR GOOD GRANT
BERNSTEIN DEVELOPMENT INC. 1706 HOLLYWOOD AVE. SHREVEPORT, LA 71108	71-1037209	501(C)3	19,646.	0.			PROGRAM SUPPORT
BEYOND BELIEF FOUNDATION INC. 1533 MARSHALL ST. SHREVEPORT, LA 71101	83-3203817	501(C)3	6,118.	0.			GIVE FOR GOOD GRANT
BIOMEDICAL RESEARCH FOUNDATION OF NORTHWEST LOUISIANA - 2031 KINGS HIGHWAY - SHREVEPORT, LA 71103	58-1711612	501(C)3	185,166.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT; FOR THE CENTER FOR MOLECULAR IMAGING AND THERAPY

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ \_\_\_\_\_
- 3** Enter total number of other organizations listed in the line 1 table ..... ▶ \_\_\_\_\_

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

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**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**

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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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B'NAI ZION CONGREGATION 245 SOUTHFIELD ROAD SHREVEPORT, LA 71105	13-1663143	501(C)3	7,400.	0.			IN MEMORY OF DR. IKE MUSLOW, ABRY CAHN, JR., DONALD ZADECK, AND LEONARD SELBER; GENERAL
BOSSIER ARTS COUNCIL 630 BARKSDALE BLVD. BOSSIER CITY, LA 71111	72-0895929	501(C)3	6,079.	0.			FOR GENERAL OPERATING SUPPORT AND GIVE FOR GOOD GRANT
BOY SCOUTS OF AMERICA, NORWELA COUNCIL - 3508 BEVERLY PLACE - SHREVEPORT, LA 71104	72-0423629	501(C)3	13,750.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
BOSSIER PARISH SCHOOL BOARD P. O. BOX 2000 BENTON, LA 71006	72-6000185	170(C)(1)	10,000.	0.			PPE AND DISINFECTING SUPPLIES
C. E. BYRD HIGH SCHOOL ALUMNI ASSOCIATION - 3201 LINE AVENUE - SHREVEPORT, LA 71104	72-1077857	501(C)3	10,846.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
BOYS AND GIRLS CLUBS OF NORTH CENTRAL LOUISIANA - P. O. BOX 1844 - RUSTON, LA 71273	72-1375839	501(C)3	12,674.	0.			COVID-19 RESPONSE; GIVE FOR GOOD; GENERAL SUPPORT
CADDO COUNCIL ON AGING 1700 BUCKNER ST., STE. 240 SHREVEPORT, LA 71101	72-0715821	501(C)3	95,089.	0.			FOR GENERAL SUPPORT; FOR MEALS ON WHEELS PROGRAM; GIVE FOR GOOD GRANT
CADDO LAKE INSTITUTE 400 EDWARDS STREET, SUITE 200 SHREVEPORT, LA 71101	20-3622669	501(C)3	32,103.	0.			FOR GENERAL SUPPORT AND GIVE FOR GOOD GRANT
BROADMOOR UNITED METHODIST CHURCH 3715 YOUREE DRIVE SHREVEPORT, LA 71105	72-0464884	501(C)3	6,125.	0.			GENERAL SUPPORT

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CAPTAIN SHREVE HIGH SCHOOL ACADEMIC FOUNDATION - 6115 EAST KINGS HIGHWAY - SHREVEPORT, LA 71105	20-0216249	501(C)3	12,384.	0.			GIVE FOR GOOD GRANT
CARE PREGNANCY CENTER P. O. BOX 5087 SHREVEPORT, LA 71135	58-2010775	501(C)3	5,996.	0.			GIVE FOR GOOD GRANT
CAREER COMPASS OF LOUISIANA 5441 JONES CREEK ROAD, SUITE H BATON ROUGE, LA 70817	20-4511965	501(C)3	80,519.	0.			SERVICES FOR BOSSIER AND CADDO PARISH SCHOOLS
CATHOLIC CHARITIES OF NORTH LOUISIANA - 331 EAST 71ST STREET - SHREVEPORT, LA 71106	32-0315500	501(C)3	86,911.	0.			FOR FAMILY STRENGTHENING PROGRAM; GIVE FOR GOOD GRANT; GENERAL SUPPORT
CENTENARY COLLEGE OF LOUISIANA P.O. BOX 41188 SHREVEPORT, LA 71134	72-0408915	501(C)3	13,960.	0.			FOR RECONCILIATION DINNER; TO PROVIDE SCHOLARSHIPS AND NEED-BASED GRANT-IN-AID;
CHILDREN AND ARTHRITIS, INC. 2751 ALBERT L. BICKNELL DRIVE, SUIT SHREVEPORT, LA 71103	72-1170530	501(C)3	9,034.	0.			GIVE FOR GOOD GRANT
CHIMP HAVEN, INC. 13600 CHIMPANZEE PLACE KEITHVILLE, LA 71047	74-2766663	501(C)3	22,805.	0.			GIVE FOR GOOD GRANT; IN MEMORY OF BILL ROBINSON
CHRIST FIT GYM 1658 BENTON ROAD BOSSIER CITY, LA 71111	46-0777336	501(C)3	7,482.	0.			GIVE FOR GOOD GRANT
CHRISTIAN SERVICE PROGRAM INSTITUTE - P. O. BOX 21 - SHREVEPORT, LA 71161	72-0954139	501(C)3	86,003.	0.			FOR GENERAL SUPPORT; CHRISTIAN SERVICE HOSPITALITY HOUSE; GIVE FOR GOOD GRANT

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CITY OF RUSTON PO BOX 2069 RUSTON, LA 71273	72-6001168	170(C)(1)	28,572.	0.			DEBRIS REMOVAL AND DISPOSAL SERVICES POST TORNADO
CITY OF SHREVEPORT P.O. BOX 31109 SHREVEPORT, LA 71130	76-2001236	170(C)(1)	15,000.	0.			THE WEST POINT EVENT; FOR THE PUBLIC WORKS DEPARTMENT FOR INFRARED THERMOMETERS, SANITIZING
COMMON GROUND COMMUNITY, INC. 4830 LINE AVENUE, #117 SHREVEPORT, LA 71106	20-0747912	501(C)3	165,358.	0.			GENERAL SUPPORT; GIVE FOR GOOD GRANT; TO HELP COVER THE COST TO FINISH THE RENOVATIONS TO THE "TWO
COMMUNITY RENEWAL INTERNATIONAL P. O. BOX 4678 SHREVEPORT, LA 71134	72-1213057	501(C)3	116,489.	0.			FOR GENERAL OPERATING SUPPORT; GIVE FOR GOOD GRANT; TO HELP COMBAT THE CHALLENGES PRESENTED BY
COMMUNITY SUPPORT PROGRAMS INC. 2924 KNIGHT STREET, BUILDING 3, SUI SHREVEPORT, LA 71105	72-1161354	501(C)3	8,147.	0.			GIVE FOR GOOD GRANT
COUNCIL ON ALCOHOLISM & DRUG ABUSE OF NORTHWEST LOUISIANA - 2000 FAIRFIELD AVE. - SHREVEPORT, LA 71104	72-0544581	501(C)3	96,851.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
COMMUNITY FOUNDATION OF SOUTHWEST LOUISIANA - 1625 RYAN STREET, SUITE C - LAKE CHARLES, LA 70601	72-1508036	501(C)3	21,367.	0.			EXPENSES RELATED TO HURRICANE LAURA
DRESS FOR SUCCESS SHREVEPORT-BOSSIER - 1520 NORTH HEARNE AVENUE, SUITE 108 - SHREVEPORT, LA 71107	87-0718643	501(C)3	6,975.	0.			FOR GENERAL OPERATING SUPPORT; GIVE FOR GOOD
DUKE UNIVERSITY BOX 90581 DURHAM, NC 27708	56-0532129	501(C)3	11,000.	0.			FOR THE ANNUAL FUND FOR UNRESTRICTED USE; GENERAL SUPPORT

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EVERY WARRIOR NETWORK 110 ARCHER AVENUE SHREVEPORT, LA 71105	47-3884301	501(C)3	6,108.	0.			GIVE FOR GOOD GRANT
FILM PRIZE FOUNDATION 401 MARKET ST., SUITE 860 SHREVEPORT, LA 71101	35-2433985	501(C)3	156,155.	0.			FOR GENERAL OPERATING SUPPORT; GIVE FOR GOOD GRANT
D.A.R.T. (DOMESTIC ABUSE RESISTANCE TEAM) - 108 W. ALABAMA AVE. - RUSTON, LA 71270	72-1273159	501(C)3	6,587.	0.			GIVE FOR GOOD
DAVID RAINES COMMUNITY HEALTH CENTER, INC. - 3041 MARTIN LUTHER KING JR. DRIVE - SHREVEPORT, LA 71107	58-2000630	501(C)3	30,421.	0.			AYUDA CORONA; GIVE FOR GOOD; FOR DAVID RAINES SCHOOL-BASED HEALTH CENTERS
FOOD BANK OF NORTHWEST LOUISIANA 2307 TEXAS AVENUE SHREVEPORT, LA 71103	72-1328890	501(C)3	398,438.	0.			FOR GENERAL SUPPORT; FOR THE "BUILD TODAY FEED TOMORROW" CAPITAL CAMPAIGN; FOR EMERGENCY
FRIENDS OF THE LOUISIANA STATE EXHIBIT MUSEUM INC. - P. O. BOX 38356 - SHREVEPORT, LA 71133	72-0960820	501(C)3	52,289.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
FRIENDS OF THE SPRING STREET HISTORICAL MUSEUM - 6121 FERN AVE., UNIT 108 - SHREVEPORT, LA 71105	26-0786366	501(C)3	5,356.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD
EASTER SEALS LOUISIANA, INC. 935 GRAVER STREET, SUITE 720 NEW ORLEANS, LA 70112	72-0694376	501(C)3	55,561.	0.			EXIT NELA; GIVE FOR GOOD GRANT
GINGERBREAD HOUSE BOSSIER/CADDO CHILDREN'S ADVOCACY CENTER - 1700 BUCKNER ST., STE. 101 - SHREVEPORT, LA 71101	72-1390471	501(C)3	88,049.	0.			FOR GENERAL SUPPORT; FOR THE CHILD ADVOCACY PROGRAM; GIVE FOR GOOD GRANT

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GIRLS ON THE RUN OF SHREVEPORT 900 PIERREMONT ROAD, SUITE 206 SHREVEPORT, LA 71106	46-3746451	501(C)3	6,174.	0.			GIVE FOR GOOD GRANT
GOODWILL INDUSTRIES OF NORTH LOUISIANA INC. - 800 W. 70TH STREET - SHREVEPORT, LA 71106	72-0460816	501(C)3	173,760.	0.			FOR JOB PLACEMENT PROGRAM; FOR GENERAL SUPPORT; FOR EXIT-NELA; TO HELP ADDRESS COVID-19
EVERGREEN PRESBYTERIAN MINISTRIES INC. - 2101 HIGHWAY 80 - HAUGHTON, LA 71037	72-0537029	501(C)3	17,085.	0.			EVERGREENCARES; GIVE FOR GOOD
FOUNDATION FOR THE CHARLOTTE JEWISH COMMUNITY - 220 NORTH TYRON STREET - CHARLOTTE, NC 28202	31-1501858	501(C)3	119,489.	0.			FOR THE MORTIMER AND JOSEPHINE COHEN FUND
HERBERT S. FORD MEMORIAL MUSEUM P. O. BOX 157 HOMER, LA 71040	23-7080353	501(C)3	11,338.	0.			GIVE FOR GOOD GRANT
FRONTLINE INCIDENT RESPONSE SOLUTIONS AND TRAINING - P. O. BOX 5310 - SHREVEPORT, LA 71135	81-0947861	501(C)3	10,000.	0.			GENERAL OPERATING SUPPORT
HIGHLAND CENTER MINISTRIES, LLC 520 OLIVE STREET SHREVEPORT, LA 71104	27-2489481	501(C)3	6,473.	0.			FOR COMMUNITY CENTER MEALS; GIVE FOR GOOD
HIGHLAND CLUB, INC. 1700 TULANE AVENUE SHREVEPORT, LA 71103	72-1306960	501(C)3	12,000.	0.			FOR A NEW SECURITY FENCE AND OTHER IMPROVEMENTS.
HOLY ANGELS RESIDENTIAL FACILITY 10450 ELLERBE ROAD SHREVEPORT, LA 71106	72-0628035	501(C)3	334,184.	0.			FOR THE SENSORY PROGRAM; THE ANGEL RUN; FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT; GENERAL

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HOPE CONNECTIONS, INC. 762 AUSTIN PLACE SHREVEPORT, LA 71101	72-1476208	501(C)3	20,218.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
HUMANE SOCIETY OF NW LOUISIANA 2544 LINWOOD AVE SHREVEPORT, LA 71103	72-1396136	501(C)3	35,190.	0.			CHOP, CHOP, SNIP, SNIP OH WHAT A RELIEF IT IS; GIVE FOR GOOD GRANT
JUNIOR ACHIEVEMENT OF NORTH LOUISIANA, INC. - 3825 GILBERT DRIVE - SHREVEPORT, LA 71104	72-0595081	501(C)3	28,152.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
FULLER CENTER FOR HOUSING OF NORTHWEST LOUISIANA, INC. - PO BOX 3173 - SHREVEPORT, LA 71133	20-8226010	501(C)3	22,584.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD
LITERACY VOLUNTEERS AT CENTENARY COLLEGE - 2911 CENTENARY BLVD - SHREVEPORT, LA 71134	72-1124343	501(C)3	11,879.	0.			GENERAL OPERATING SUPPORT; GIVE FOR GOOD GRANT
LITTLE THEATRE OF SHREVEPORT 812 MARGARET PLACE SHREVEPORT, LA 71134	72-0363143	501(C)3	46,240.	0.			FOR GENERAL OPERATING SUPPORT; GIVE FOR GOOD GRANT
LOUISIANA ASSOCIATION FOR THE BLIND - 1750 CLAIBORNE AVENUE - SHREVEPORT, LA 71103	72-0408981	501(C)3	8,888.	0.			OLDER BLIND PROGRAM; GIVE FOR GOOD GRANT
GEAUX 4 KIDS, INC. 1513 DOCTORS DRIVE, SUITE 100-B BOSSIER CITY, LA 71111	47-4414443	501(C)3	10,962.	0.			GIVE FOR GOOD
LOUISIANA ENDOWMENT FOR THE HUMANITIES - 938 LAFAYETTE ST., SUITE 300 - NEW ORLEANS, LA 70113	72-0795568	501(C)3	75,907.	0.			FOR GENERAL SUPPORT FOR SERVICES PROVIDED IN NORTHWEST LOUISIANA; DEEPENING AND SUSTAINING

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LOUISIANA TECH CHRISTIAN STUDENT CENTER - 2300 WOODWARD AVE. - RUSTON, LA 71270	81-4732932	501(C)3	12,000.	0.			FOR GENERAL SUPPORT
LOUISIANA TECH UNIVERSITY FOUNDATION - P. O. BOX 3183 - RUSTON, LA 71272-3183	72-6021176	501(C)3	16,155.	0.			THE TWELFTH GATE CORPORATION FOUNDATION INC.; GIVE FOR GOOD GRANT
LSU HEALTH SCIENCES FOUNDATION IN SHREVEPORT - 920 PIERREMONT ROAD, SUITE 407 - SHREVEPORT, LA 71106	72-1402222	501(C)3	140,745.	0.			FOR THE BENEFIT OF THE MOLLIE E. WEBB SPEECH AND HEARING CENTER; FOR THE CENTER FOR MEDICAL
LSU IN SHREVEPORT FOUNDATION, INC. ONE UNIVERSITY PLACE ADMINISTRATION BUILDING, 272 - SHREVEPORT, LA 71115	72-1031108	501(C)3	105,247.	0.			FOR THE SPRING STREET MUSEUM; FOR GENERAL SUPPORT; FOR LAPREP AND ITS ASSOCIATED PROGRAMS;
MAIN STREET HOMER 503 SOUTH MAIN STREET HOMER, LA 71040	46-5171565	501(C)3	7,079.	0.			GIVE FOR GOOD GRANT
MARTIN LUTHER KING HEALTH CENTER & PHARMACY - 865 OLIVE STREET - SHREVEPORT, LA 71104	72-1079721	501(C)3	146,656.	0.			FOR GENERAL SUPPORT; PHARMACY EXPENSES; FOR HEALTHY COMMUNITIES HEALTHY TOMORROWS; GIVE
MARY'S HOUSE OF LOUISIANA, INC. 906 MARGARET PLACE SHREVEPORT, LA 71101	47-2593937	501(C)3	5,420.	0.			GIVE FOR GOOD GRANT
MCNEILL STREET PUMPING STATION PRESERVATION SOCIETY - P. O. BOX 957 - SHREVEPORT, LA 71163	72-1441269	501(C)3	7,981.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
MILITARY RELIGIOUS FREEDOM FOUNDATION, INC. - 13170-B CENTRAL AVENUE, S.E., SUITE 255 - ALBUQUERQUE, NM 87123	20-3967302	501(C)3	10,000.	0.			FOR GENERAL SUPPORT

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MT. CANAAN BAPTIST CHURCH 1666 ALSTON STREET SHREVEPORT, LA 71101	72-0997356	501(C)3	17,754.	0.			FOR GENERAL SUPPORT
NATURE CONSERVANCY P. O. BOX 4125 BATON ROUGE, LA 70821	53-0242652	501(C)3	10,000.	0.			FOR GENERAL SUPPORT
NINNA'S ROAD TO RESCUE 6 STERLING RANCH NORTH HAUGHTON, LA 71037	45-4728067	501(C)3	21,475.	0.			GIVE FOR GOOD GRANT
NOEL MEMORIAL UNITED METHODIST CHURCH - 520 HERNDON STREET - SHREVEPORT, LA 71101	13-5562279	501(C)3	22,476.	0.			FOR GENERAL SUPPORT; FOR THE NOEL COMMUNITY ARTS PROGRAM; GIVE FOR GOOD
GRAMBLING UNIVERSITY FOUNDATION INC. - P. O. BOX 587 - GRAMBLING, LA 71245	05-0624523	501(C)3	8,955.	0.			GIVE FOR GOOD GRANT
NORTH LOUISIANA ECONOMIC PARTNERSHIP - 415 TEXAS STREET, SUITE 320 - SHREVEPORT, LA 71101	72-0936419	501(C)3	36,042.	0.			FOR GENERAL SUPPORT
NORTH LOUISIANA FARM FRESH CORPORATION - 220 EAST MISSISSIPPI AVENUE - RUSTON, LA 71270	27-3907068	501(C)3	5,234.	0.			GIVE FOR GOOD GRANT
NORTHWEST LOUISIANA WAR VETERANS HOME FUND, INC. - 4300 OLD BROWNLEE RD. - BOSSIER CITY, LA 71111	20-5051228	501(C)3	9,140.	0.			FOR GENERAL SUPPORT
HEART OF HOPE MINISTRIES-A SANCTUARY FOR WOMEN - 10420 HEART OF HOPE WAY - KEITHVILLE, LA 71047	41-2187038	501(C)3	9,106.	0.			GIVE FOR GOOD

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OAKWOOD HOME FOR WOMEN, INC. 1700 HIGHLAND SHREVEPORT, LA 71101	23-7368054	501(C)3	23,229.	0.			GIVE FOR GOOD GRANT; GENERAL SUPPORT; HOUSE IMPROVEMENTS
HIGHLAND RESTORATION ASSOCIATION 520 OLIVE STREET SHREVEPORT, LA 71104	72-0865871	501(C)3	6,808.	0.			GIVE FOR GOOD GRANT; HIGHLAND PLANNING PROJECT TO PROVIDE FUNDING FOR 2 SCHOLARSHIP ON THE CLTCC SABINE VALLY CAMPUS (\$4,000 PER STUDENT) TO
LCTCS FOUNDATION 265 SOUTH FOSTER DRIVE BATON ROUGE, LA 70806	20-5432053	501(C)3	16,000.	0.			
PET SAVERS 632 DUDLEY DRIVE SHREVEPORT, LA 71104	42-1645998	501(C)3	10,596.	0.			GIVE FOR GOOD GRANT
PRAISE ACADEMY AT LAKESIDE 1446 YALE AVE. SHREVEPORT, LA 71103	81-3602868	501(C)3	89,233.	0.			GIVE FOR GOOD
PRINCETON UNIVERSITY BOX 5357 PRINCETON, NJ 08543	21-0634501	501(C)3	10,000.	0.			FOR THE ANNUAL FUND FOR UNRESTRICTED USE
PROVIDENCE HOUSE 814 COTTON ST. SHREVEPORT, LA 71101	72-1205164	501(C)3	274,538.	0.			FOR GENERAL SUPPORT; TO HELP FAMILIES
PUBLIC AFFAIRS RESEARCH COUNCIL OF LOUISIANA - P. O. BOX 14776 - BATON ROUGE, LA 70898	72-0436118	501(C)3	6,260.	0.			FOR GENERAL SUPPORT; TO SUPPORT A HEALTHY POLICY RESEARCH POSITION; FOR JUDGE WIENER DUES
RED RIVER FILM SOCIETY INC 617 TEXAS STREET SHREVEPORT, LA 71101	42-1562125	501(C)3	78,280.	0.			FOR GENERAL SUPPORT; DIALOGUES ON FAITH, DIVERSITY, THE ARTS AND SOCIAL CHANGE; GIVE FOR

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RED RIVER REVEL INC. 101 CROCKETT STREET, SUITE C SHREVEPORT, LA 71101	72-0953274	501(C)3	10,950.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD
RED RIVER STEM, INC. 820 CLYDE FANT PARKWAY SHREVEPORT, LA 71101	83-1184822	501(C)3	91,843.	0.			FAMILY PASSES, THE SCIENCE MUSEUM, INTERACTIVE CADDO SWAMP EXHIBIT, GIVE FOR GOOD,
RENESTING PROJECT, INC. 1303 DRIFTWOOD DR. BOSSIER CITY, LA 71111	45-3958008	501(C)3	29,570.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
RENZI EDUCATION AND ART CENTER 435 EGAN STREET SHREVEPORT, LA 71101	72-1431506	501(C)3	23,262.	0.			FOR AFTER SCHOOL PROGRAM; GIVE FOR GOOD GRANT
LIFESHARE BLOOD CENTER 8910 LINWOOD AVE. SHREVEPORT, LA 71106	72-0511367	501(C)3	36,472.	0.			GENERAL SUPPORT OF SERVICES IN NORTH LOUISIANA, CONVALESCENT PLASMA FOR COVID-19
ROBINSON'S RESCUE 2515 LINE AVENUE SHREVEPORT, LA 71104	42-1717278	501(C)3	56,462.	0.			GIVE FOR GOOD GRANT; FOR GENERAL SUPPORT; FOR LOW-COST OR SUBSIDIZED SPAY-NEUTER INCENTIVE
LOUISIANA G.U.M.B.O., INC. 2840 MILITARY HIGHWAY PINEVILLE, LA 71360	72-1281183	501(C)3	5,944.	0.			GIVE FOR GOOD GRANT
ROSS LYNN CHARITABLE FOUNDATION, INC. - P. O. BOX 905 - RUSTON, LA 71273	47-1023395	501(C)3	29,064.	0.			GIVE FOR GOOD GRANT
ROTARY CLUB OF SHREVEPORT FOUNDATION - P. O. BOX 380 - SHREVEPORT, LA 71162-0380	72-1465321	501(C)3	6,374.	0.			FOR GENERAL SUPPORT; TO SUPPORT SCHOLARSHIPS AT CENTENARY COLLEGE; GIVE FOR GOOD GRANT

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA WILDLIFE AND FISHERIES FOUNDATION - P. O. BOX 80378 - BATON ROUGE, LA 70898	72-1314968	501(C)3	9,500.	0.			GENERAL SUPPORT
RUSTON GIRLS SOFTBALL ASSOCIATION 207 NORTH SERVICE ROAD, EAST BOX 17 RUSTON, LA 71270	72-1244261	501(C)3	5,500.	0.			FOR GENERAL OPERATING SUPPORT
SAMARITAN COUNSELING CENTER 1525 STEPHENS AVE. SHREVEPORT, LA 71101	72-1014069	501(C)3	37,483.	0.			GIVE FOR GOOD GRANT
SHREVEPORT BOSSIER ANIMAL RESCUE, INC. - 431 KINGS HIGHWAY - SHREVEPORT, LA 71104	46-2460128	501(C)3	5,687.	0.			GIVE FOR GOOD GRANT
SHREVEPORT GREEN 3625 SOUTHERN AVE SHREVEPORT, LA 71104	72-0970610	501(C)3	22,283.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT; MOBILE MARKET DOORSTEP DELIVERY; QUERBES PARK TENNIS
LSU HEALTH SHREVEPORT P. O. BOX 33932 SHREVEPORT, LA 71130	72-0702002	501(C)3	10,000.	0.			UTILIZING AUTOSAMPLING FOR WASTEWATER-BASED SURVEILLANCE IN SHREVEPORT
SHREVEPORT METROPOLITAN BALLET 1520 NORTH HEARNE AVENUE, SUITE 118 SHREVEPORT, LA 71107	23-7431965	501(C)3	24,535.	0.			AILEY II VISIT TO TRANSFORMATION ZONE SCHOOLS, GENERAL OPERATING SUPPORT, GIVE
SHREVEPORT OPERA 212 TEXAS ST., STE. 101 SHREVEPORT, LA 71101	72-6021455	501(C)3	51,325.	0.			FOR GENERAL SUPPORT; FOR SHREVEPORT OPERA XPRESS (SOX); GIVE FOR GOOD GRANT
SHREVEPORT REGIONAL ARTS COUNCIL 801 CROCKETT STREET SHREVEPORT, LA 71101	72-0805661	501(C)3	46,875.	0.			FOR GENERAL SUPPORT; FOR ARTBREAK AT ARTSPACE; SUNDAYS IN THE PARK; GIVE FOR GOOD GRANT

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SHREVEPORT SYMPHONY GUILD, INC. 3112 ALEXANDER STREET SHREVEPORT, LA 71104	72-1511687	501(C)3	6,662.	0.			FOR THE NENA PLANT WIDEMAN PIANO COMPETITION; GIVE FOR GOOD GRANT
SHREVEPORT SYMPHONY ORCHESTRA, INC. - P. O. BOX 205 - SHREVEPORT, LA 71162	72-6001334	501(C)3	147,981.	0.			GENERAL SUPPORT, GIVE FOR GOOD, MUSICAL DISCOVERY SERIES, DRIVE-IN CONCERTS, AND THE SIMONE
SHREVEPORT-BOSSIER RESCUE MISSION P. O. BOX 3949 SHREVEPORT, LA 71133	23-7050551	501(C)3	48,594.	0.			FOR GENERAL SUPPORT; FOR FOOD, SHELTER, EDUCATION AND CLOTHING; GIVE FOR GOOD GRANT
SHRINERS HOSPITAL FOR CHILDREN 3100 SAMFORD AVE. SHREVEPORT, LA 71103	36-2193608	501(C)3	26,427.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
SOCIETY OF ST. VINCENT DE PAUL, DIOCESAN COUNCIL OF SHREVEPORT - P. O. BOX 3911 - SHREVEPORT, LA 71133	71-1413771	501(C)3	36,256.	0.			GIVE FOR GOOD GRANT
MAKING A NEW WAY 1732 SPENCER CIRCLE SHREVEPORT, LA 71006	83-3679193	501(C)3	7,427.	0.			GIVE FOR GOOD
SOUTHFIELD SCHOOL 1100 SOUTHFIELD ROAD SHREVEPORT, LA 71106	72-0439760	501(C)3	92,321.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT; IN MEMORY OF JAMES PATRICK BEAIRD, JR.
ST. LUKE'S EPISCOPAL MOBILE MEDICAL MINISTRY, INC. - P. O. BOX 53074 - SHREVEPORT, LA 71135	45-3786377	501(C)3	37,235.	0.			MEDICAL AND ENVIRONMENTAL ASSISTANCE FOR THE HOMELESS POPULATION IN THE SHREVEPORT BOSSIER
STAGE CENTER 4830 LINE AVENUE, SUITE 353 SHREVEPORT, LA 71106	45-5123865	501(C)3	27,111.	0.			GIVE FOR GOOD GRANT

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STEP FORWARD NLA 401 EDWARDS STREET, SUITE 125 SHREVEPORT, LA 71101	81-3564548	501(C)3	97,068.	0.			GIVE FOR GOOD GRANT; GENERAL SUPPORT
THE ARC CADD0-BOSSIER 351 JORDAN STREET SHREVEPORT, LA 71101-4897	72-0482891	501(C)3	104,851.	0.			GIVE FOR GOOD GRANT; FOR THE GOLDMAN SCHOOL AND CHILD DEVELOPMENT CENTER; THE GREAT PROGRAM; IN
THE BETTY AND LEONARD PHILLIPS DEAF ACTION CENTER OF NORTHWEST LOUISIANA, - 601 JORDAN STREET - SHREVEPORT, LA 71101	72-0934321	501(C)3	9,785.	0.			GIVE FOR GOOD GRANT; GENERAL SUPPORT
THE BRIDGE ALZHEIMER'S & DEMENTIA RESOURCE CENTER - P. O. BOX 4038 - SHREVEPORT, LA 71104	20-5619478	501(C)3	35,730.	0.			FOR GENERAL SUPPORT; FOR ALZHEIMER'S PATIENTS AND THEIR CAREGIVERS; HOLISTIC SUPPORT CENTER
NORTHWEST LOUISIANA YOUTH GOLF AND EDUCATION FOUNDATION - 2200 MILAM STREET - SHREVEPORT, LA 71103	41-2063016	501(C)3	6,000.	0.			TO SUPPORT THE TUTORIAL PROGRAM AT JERRY TIM BROOKS GOLF COURSE
THE GLEN RETIREMENT SYSTEM 403 E. FLOURNOY LUCAS SHREVEPORT, LA 71115	72-0428013	501(C)3	14,947.	0.			GIVE FOR GOOD GRANT; GENERAL SUPPORT
THE HUB: URBAN MINISTRIES 4110 YOUREE DRIVE SHREVEPORT, LA 71105	26-4794709	501(C)3	31,761.	0.			THE LOVEWELL CENTER; GIVE FOR GOOD GRANT
THE PHILADELPHIA CENTER 2020 CENTENARY BLVD. SHREVEPORT, LA 71104-2437	72-1204252	501(C)3	58,199.	0.			FOR GENERAL SUPPORT; FOR NORTHWEST LOUISIANA REGION 7 HIV RESOURCE CENTER; GIVE FOR GOOD
THE SALVATION ARMY 200 E. STONER AVE. SHREVEPORT, LA 71101	58-0660607	501(C)3	117,920.	0.			GENERAL SUPPORT, COVID-19 EMERGENCY RESPONSE, MERKLE CENTER OF HOPE SHELTER, THE SALVATION

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SHREVEPORT BAR FOUNDATION 625 TEXAS STREET SHREVEPORT, LA 71111	72-1115393	501(C)3	66,212.	0.			FOR LEGAL REPRESENTATION FOR VICTIMS OF DOMESTIC VIOLENCE PROGRAM; FOR THE PRO BONO PROJECT; GIVE
THE STRAND THEATRE OF SHREVEPORT CORPORATION - 619 LOUISIANA AVENUE STE 200 - SHREVEPORT, LA 71101	72-0800065	501(C)3	48,724.	0.			FOR GENERAL SUPPORT TO ONLY BE USED FOR PURPOSES STATED IN THE DESIGNATED AGENCY ENDOWMENT FUND
THINKFIRST OF ARK-LA-TEX, INC. 960 SHERIDAN AVE., SUITE A SHREVEPORT, LA 71104	72-1326847	501(C)3	11,765.	0.			FOR GENERAL SUPPORT SERVICES IN LOUISIANA AND THE ARK-LA-TEX; GIVE FOR GOOD GRANT
OCHSNER CLINIC FOUNDATION 1514 JEFFERSON HIGHWAY #BH-240 NEW ORLEANS, LA 70121	72-0502505	501(C)3	10,000.	0.			MASKING FOR COMMUNITY HEALTH
UNION PARISH SCHOOL BOAD PO BOX 308 FARMERVILLE, LA 71241	72-6001418	170(C)(1)	12,000.	0.			FOR UNION PARISH HIGH SCHOOL JUNIOR NATIONAL HONORS; THE UNION PARISH HIGH SCHOOL BAND
ONE GREAT RIVER OF LOUISIANA, INC. P. O. BOX 44349 SHREVEPORT, LA 71134	72-0981860	501(C)3	5,826.	0.			GIVE FOR GOOD
UNITED WAY OF NORTHWEST LOUISIANA 402 EDWARDS STREET SHREVEPORT, LA 71101	72-0503930	501(C)3	20,773.	0.			FOR GENERAL SUPPORT
ONE HUNDRED MEN OF SHREVEPORT 4137 WALLER DRIVE SHREVEPORT, LA 71119	72-1264003	501(C)3	10,500.	0.			OHMOS COVID-19 PROJECT, FOR COVID TESTING OUTREACH
VOLUNTEERS FOR YOUTH JUSTICE 900 JORDAN STREET SHREVEPORT, LA 71101	72-1057695	501(C)3	258,644.	0.			GUMBO GLADIATORS, GENERAL SUPPORT, VYJ COVID 19 RESPONSE TASK FORCE, TRUANCY ASSESSMENT

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VOLUNTEERS OF AMERICA OF NORTH LOUISIANA - 360 JORDAN STREET - SHREVEPORT, LA 71101	72-0506820	501(C)3	714,856.	0.			CHERISH THE CHILDREN, GENERAL SUPPORT OF SERVICES FOR FAMILIES AND CHILDREN, GENERAL SUPPORT
WOODY'S HOME INC. 442 JORDAN STREET SHREVEPORT, LA 71101	83-0367619	501(C)3	16,964.	0.			FOOD AND DRINK SUPPLIES; GIVE FOR GOOD GRANT
PLANT A SEED IN OUR YOUTH FOUNDATION - 1518 COX STREET - BOSSIER CITY, LA 71111	72-1496381	501(C)3	19,000.	0.			GIVE FOR GOOD; YOUTH DEVELOPMENT PROGRAM
YMCA OF NORTHWEST LOUISIANA 400 MCNEILL STREET SHREVEPORT, LA 71101	72-0408997	501(C)3	181,760.	0.			GENERAL SUPPORT, EQUIPMENT UPGRADE FOR THE DOWNTOWN YMCA, SWIM FOR LIFE, GIVE FOR GOOD
PROJECT RECLAIM OF MINDEN, INC. PO BOX 444 MINDEN, LA 71058	47-1151633	501(C)3	5,100.	0.			FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT
YOUTH ENRICHMENT PROGRAM 4700 LINE AVENUE, STE. 207 SHREVEPORT, LA 71106-1533	58-1727972	501(C)3	14,484.	0.			FOR YEP PLUS; FOR SCHOLARSHIPS FOR CHILDREN PARTICIPATING IN THE YOUTH ENRICHMENT PROGRAM;
YWCA OF NORTHWEST LOUISIANA 850-B OLIVE STREET SHREVEPORT, LA 71104	72-0423896	501(C)3	16,254.	0.			GIVE FOR GOOD GRANT; PARENT EDUCATION AND SUPPORT
RANDALL'S ISLAND PARK ALLIANCE, INC. - 24 WEST 61ST STREET, 4TH FLOOR - NEW YORK, NY 10023	13-3787630	501(C)3	10,000.	0.			UNRESTRICTED USE
SANCTUARY ARTS SCHOOL 5860 S. LAKESHORE DRIVE, SUITE 6 SHREVEPORT, LA 71119	83-3011785	501(C)3	5,565.	0.			GENERAL SUPPORT; GIVE FOR GOOD

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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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHREVE MEMORIAL LIBRARY 885 BERT KOUNS INDUSTRIAL LOOP SHREVEPORT, LA 71118	72-6001326	170(C)(1)	50,000.	0.			WIDE AREA WI-FI NETWORK
SOUTHEASTERN COUNCIL OF FOUNDATIONS - 100 PEACHTREE STREET, SUITE 2080 - ATLANTA, GA 30303	56-0995114	501(C)3	5,150.	0.			ANNUAL DUES
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE. MONTGOMERY, AL 36104	63-0598743	501(C)3	10,000.	0.			GENERAL SUPPORT
SOUTH HIGHLANDS FOUNDATION INC. 831 ERIE SHREVEPORT, LA 71106	20-0193920	501(C)3	6,244.	0.			GIVE FOR GOOD
ST. MARK'S CATHEDRAL 908 RUTHERFORD SHREVEPORT, LA 71104	72-0876874	501(C)3	9,027.	0.			ST. MARK'S CATHEDRAL SCHOOL; GIVE FOR GOOD; GENERAL SUPPORT
TEAMS (TRAINING, EDUCATION AND MEDIATION FOR STUDENTS) - 1545 LINE AVENUE, SUITE 228 - SHREVEPORT, LA 71101	80-0204842	501(C)3	12,366.	0.			EDUCATION FOR ALL: GRADES K-12; GIVE FOR GOOD
THEATRE OF THE PERFORMING ARTS OF SHREVEPORT - 4005 LAKESHORE DRIVE - SHREVEPORT, LA 71109	72-0808937	501(C)3	18,750.	0.			GENERAL OPERATING SUPPORT
TOWN OF HAYNESVILLE 1711 MAIN STREET HAYNESVILLE, LA 71038	72-6000510	170(C)(1)	15,000.	0.			NEEDS AND IMPROVEMENTS
TRINITY UNITED METHODIST CHURCH 1000 WOODWARD AVENUE RUSTON, LA 71270	72-0562030	501(C)3	30,000.	0.			GENERAL SUPPORT

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**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(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
SCHOLARSHIP FOR STUDENTS	43	69,705.	0.		

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART II, LINE 1, COLUMN (H):**

**NAME OF ORGANIZATION OR GOVERNMENT: B'NAI ZION CONGREGATION**

**(H) PURPOSE OF GRANT OR ASSISTANCE: IN MEMORY OF DR. IKE MUSLOW, ABRY**

**CAHN, JR., DONALD ZADECK, AND LEONARD SELBER; GENERAL SUPPORT**

**NAME OF ORGANIZATION OR GOVERNMENT: CENTENARY COLLEGE OF LOUISIANA**

**(H) PURPOSE OF GRANT OR ASSISTANCE: FOR RECONCILIATION DINNER; TO**

**PROVIDE SCHOLARSHIPS AND NEED-BASED GRANT-IN-AID; BEAST FEAST; GIVE FOR**

**GOOD; GENERAL SUPORT**

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**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: CITY OF SHREVEPORT

(H) PURPOSE OF GRANT OR ASSISTANCE: THE WEST POINT EVENT; FOR THE PUBLIC WORKS DEPARTMENT FOR INFRARED THERMOMETERS, SANITIZING EQUIPMENT, AND SANITIZING SUPPLIES; FOR THE PURCHASE OF BODY CAMERAS FOR THE POLICE.

NAME OF ORGANIZATION OR GOVERNMENT: COMMON GROUND COMMUNITY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT; GIVE FOR GOOD GRANT; TO HELP COVER THE COST TO FINISH THE RENOVATIONS TO THE "TWO STORY" AND "OLD SANCTUARY" OF THE COMMUNITY CENTER AND/OR FOR ANY NEEDED EQUIPMENT OR FURNISHINGS.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY RENEWAL INTERNATIONAL

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL OPERATING SUPPORT; GIVE FOR GOOD GRANT; TO HELP COMBAT THE CHALLENGES PRESENTED BY COVID-19.

NAME OF ORGANIZATION OR GOVERNMENT: FOOD BANK OF NORTHWEST LOUISIANA

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT; FOR THE "BUILD TODAY FEED TOMORROW" CAPITAL CAMPAIGN; FOR EMERGENCY FOOD AND MEAL DISTRIBUTION; TO HELP FEED CHILDREN OF CADDO PARISH DURING THE COVID-19 EMERGENCY; PRODUCE DISTRIBUTION PROGRAM; GIVE FOR GOOD GRANT

NAME OF ORGANIZATION OR GOVERNMENT:

GOODWILL INDUSTRIES OF NORTH LOUISIANA INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR JOB PLACEMENT PROGRAM; FOR GENERAL SUPPORT; FOR EXIT-NELA; TO HELP ADDRESS COVID-19 RELATED UNEMPLOYMENT CHALLENGES; GIVE FOR GOOD GRANT

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**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: HOLY ANGELS RESIDENTIAL FACILITY

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE SENSORY PROGRAM; THE ANGEL  
RUN; FOR GENERAL SUPPORT; GIVE FOR GOOD GRANT; GENERAL SUPPORT OF HOLY  
ANGEL'S TASTE OF SHREVEPORT

NAME OF ORGANIZATION OR GOVERNMENT:

LOUISIANA ENDOWMENT FOR THE HUMANITIES

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT FOR SERVICES  
PROVIDED IN NORTHWEST LOUISIANA; DEEPENING AND SUSTAINING IMPACTS; AND  
FOR PRIME TIME FULL CIRCLE PRESCHOOL PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT:

LSU HEALTH SCIENCES FOUNDATION IN SHREVEPORT

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE BENEFIT OF THE MOLLIE E.  
WEBB SPEECH AND HEARING CENTER; FOR THE CENTER FOR MEDICAL EDUCATION AND  
WELLNESS; GIVE FOR GOOD GRANT; FOR THE FEIST-WEILLER CANCER CENTER IN  
MEMORY OF DONALD ZADECK; THE NEW BUILDING; EAT RIGHT AND MOVE -  
DECREASING CARDIOVASCULAR RISK FACTORS IN THE BLACK POPULATION DURING  
COVID-19.

NAME OF ORGANIZATION OR GOVERNMENT: LSU IN SHREVEPORT FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE SPRING STREET MUSEUM; FOR  
GENERAL SUPPORT; FOR LAPREP AND ITS ASSOCIATED PROGRAMS; GIVE FOR GOOD  
GRANT; FOR RED RIVER RADIO FOR LOCAL/REGIONAL NEWS; CULTURAL AFFAIRS AND  
COMMUNITY CONNECTIONS PROGRAMMING

NAME OF ORGANIZATION OR GOVERNMENT:

MARTIN LUTHER KING HEALTH CENTER & PHARMACY

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(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT; PHARMACY  
EXPENSES; FOR HEALTHY COMMUNITIES HEALTHY TOMORROWS; GIVE FOR GOOD GRANT

NAME OF ORGANIZATION OR GOVERNMENT: LCTCS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FUNDING FOR 2 SCHOLARSHIP  
ON THE CLTCC SABINE VALLY CAMPUS (\$4,000 PER STUDENT) TO STUDENTS  
TRAINING FOR CAREERS IN THE WELDING, ELECTRICIAN TECHNOLOGY AND PATIENT  
CARE TECHNOLOGY PROGRAMS, AND THE CLTCC NATCHITOCHE CAMPUS FOR 2  
SCHOLARSHIPS (\$4,000 PER STUDENT) TO STUDENTS PURSING CAREERS IN THE  
INDUSTRIAL MANUFACTURING TECHNOLOGY, WELDING AND CDL TRAINING PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: RED RIVER FILM SOCIETY INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT; DIALOGUES ON  
FAITH, DIVERSITY, THE ARTS AND SOCIAL CHANGE; GIVE FOR GOOD GRANT; ART  
AND INDIE FILM CENTER PROGRAMMING; IN MEMORY OF BILL ROBINSON

NAME OF ORGANIZATION OR GOVERNMENT: RED RIVER STEM, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FAMILY PASSES, THE SCIENCE MUSEUM,  
INTERACTIVE CADDO SWAMP EXHIBIT, GIVE FOR GOOD, GENERAL SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: LIFESHARE BLOOD CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT OF SERVICES IN NORTH  
LOUISIANA, CONVALESCENT PLASMA FOR COVID-19 PATIENTS; GIVE FOR GOOD;  
COVID-19 EMERGENCY RESPONSE

NAME OF ORGANIZATION OR GOVERNMENT: ROBINSON'S RESCUE

(H) PURPOSE OF GRANT OR ASSISTANCE: GIVE FOR GOOD GRANT; FOR GENERAL  
SUPPORT; FOR LOW-COST OR SUBSIDIZED SPAY-NEUTER INCENTIVE PROGRAMS OF

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DOGS AND CATS; IN MEMORY OF BILL ROBINSON

NAME OF ORGANIZATION OR GOVERNMENT: SHREVEPORT GREEN

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT; GIVE FOR GOOD  
GRANT; MOBILE MARKET DOORSTEP DELIVERY; QUERBES PARK TENNIS CENTER; THE  
QUERBES PARK FOUNDATION

NAME OF ORGANIZATION OR GOVERNMENT: SHREVEPORT METROPOLITAN BALLET

(H) PURPOSE OF GRANT OR ASSISTANCE: AILEY II VISIT TO TRANSFORMATION  
ZONE SCHOOLS, GENERAL OPERATING SUPPORT, GIVE FOR GOOD 2020, 2020  
VIRTUAL/HYBRID "NUTCRACKER"

NAME OF ORGANIZATION OR GOVERNMENT: SHREVEPORT SYMPHONY ORCHESTRA, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT, GIVE FOR GOOD,  
MUSICAL DISCOVERY SERIES, DRIVE-IN CONCERTS, AND THE SIMONE DINNERSTEIN  
PLAYS BACH CONCERT, THE CONCERT SEASON FUND DRIVE

NAME OF ORGANIZATION OR GOVERNMENT:

ST. LUKE'S EPISCOPAL MOBILE MEDICAL MINISTRY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MEDICAL AND ENVIRONMENTAL ASSISTANCE  
FOR THE HOMELESS POPULATION IN THE SHREVEPORT BOSSIER CITY AREA IMPACTED  
BY THE COVID-19 VIRUS, HEALTH CARE SERVICES FOR THE MEDICALLY UNDERSERVED  
IN NORTHWEST LA, GIVE FOR GOOD

NAME OF ORGANIZATION OR GOVERNMENT: THE ARC CADDO-BOSSIER

(H) PURPOSE OF GRANT OR ASSISTANCE: GIVE FOR GOOD GRANT; FOR THE GOLDMAN  
SCHOOL AND CHILD DEVELOPMENT CENTER; THE GREAT PROGRAM; IN MEMORY OF BILL  
CAWTHORNE; THE HAP HOUSE PROGRAM

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**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

THE BRIDGE ALZHEIMER'S & DEMENTIA RESOURCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT; FOR ALZHEIMER'S PATIENTS AND THEIR CAREGIVERS; HOLISTIC SUPPORT CENTER FOR INDIVIDUALS WITH DEMENTIA/ALZHEIMER'S AND THEIR CAREGIVERS; GIVE FOR GOOD GRANT

NAME OF ORGANIZATION OR GOVERNMENT: THE PHILADELPHIA CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT; FOR NORTHWEST LOUISIANA REGION 7 HIV RESOURCE CENTER; GIVE FOR GOOD GRANT; SYRINGE SERVICE PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT: THE SALVATION ARMY

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT, COVID-19 EMERGENCY RESPONSE, MERKLE CENTER OF HOPE SHELTER, THE SALVATION ARMY BOYS AND GIRLS CLUB, GIVE FOR GOOD, GENERAL SUPPORT, BOYS & GIRLS CLUB COVID-19 RESPONSE, THE BOYS AND GIRLS CLUB

NAME OF ORGANIZATION OR GOVERNMENT: SHREVEPORT BAR FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR LEGAL REPRESENTATION FOR VICTIMS OF DOMESTIC VIOLENCE PROGRAM; FOR THE PRO BONO PROJECT; GIVE FOR GOOD GRANT

NAME OF ORGANIZATION OR GOVERNMENT:

THE STRAND THEATRE OF SHREVEPORT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL SUPPORT TO ONLY BE USED FOR PURPOSES STATED IN THE DESIGNATED AGENCY ENDOWMENT FUND AGREEMENT DATED APRIL 6, 2016; GENERAL OPERATING SUPPORT; GIVE FOR GOOD GRANT

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NAME OF ORGANIZATION OR GOVERNMENT: VOLUNTEERS FOR YOUTH JUSTICE

(H) PURPOSE OF GRANT OR ASSISTANCE: GUMBO GLADIATORS, GENERAL SUPPORT,  
VYJ COVID 19 RESPONSE TASK FORCE, TRUANCY ASSESSMENT SERVICE CENTER  
(TASC), GIVE FOR GOOD, TBRI PRACTITIONER CERTIFICATION TRAINING

NAME OF ORGANIZATION OR GOVERNMENT:

VOLUNTEERS OF AMERICA OF NORTH LOUISIANA

(H) PURPOSE OF GRANT OR ASSISTANCE: CHERISH THE CHILDREN, GENERAL  
SUPPORT OF SERVICES FOR FAMILIES AND CHILDREN, GENERAL SUPPORT  
COMMUNITIES IN SCHOOLS/LIGHTHOUSE EXPANSION, CIS AND THE LIGHTHOUSE, GIVE  
FOR GOOD

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH ENRICHMENT PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR YEP PLUS; FOR SCHOLARSHIPS FOR  
CHILDREN PARTICIPATING IN THE YOUTH ENRICHMENT PROGRAM; GIVE FOR GOOD  
GRANT

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2020**

Open to Public Inspection

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.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization **THE COMMUNITY FOUNDATION OF NORTH LOUISIANA** Employer identification number **72-6022365**

**Part I Questions Regarding Compensation**

**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.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> 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 .....

**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? .....

**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.

- |  |  |
|--|--|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input type="checkbox"/> Approval by the board or compensation committee |

**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:

- a** Receive a severance payment or change-of-control payment? ..... **4a**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? ..... **4b**
- c** Participate in or receive payment from an equity-based compensation arrangement? ..... **4c**
- 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:

- a** The organization? ..... **5a**
- b** Any related organization? ..... **5b**
- 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:

- a** The organization? ..... **6a**
- b** Any related organization? ..... **6b**
- 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 .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2020

**THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

72-6022365

Schedule J (Form 990) 2020

**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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KRISTI GUSTAVSON CEO	(i)	145,700.	0.	0.	0.	8,742.	154,442.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ 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](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **THE COMMUNITY FOUNDATION OF NORTH LOUISIANA** Employer identification number **72-6022365**

**Part 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 determining noncash contribution amounts
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 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	5	146,102.	MARKET PRICE OF STOC
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - 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 organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

THE COMMUNITY FOUNDATION OF NORTH

Schedule M (Form 990) 2020

LOUISIANA

72-6022365

Page 2

**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:

PUBLICLY TRADED SECURITIES ARE RECEIVED AND SOLD THROUGH THE LOCAL RAYMOND JAMES OFFICE.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization <b>THE COMMUNITY FOUNDATION OF NORTH LOUISIANA</b>	Employer identification number <b>72-6022365</b>
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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES INCLUDE SUPPORT OF NONPROFITS THROUGH NETWORKING

OPPORTUNITIES, PUBLIC EVENTS AND WORKSHOPS. WE SERVE AS A

PHILANTHROPIC EXPERT AND HUB AS WELL AS A CONVENER THAT BRINGS TOGETHER

EXPERTS TO IDENTIFY PROBLEMS AND DEVELOP COMMON AGENDAS TO EFFECT REAL

AND LASTING CHANGE. WE WORK WITH DONORS TO UNDERSTAND AND IMPLEMENT

HIS OR HER PERSONAL VISION FOR A BETTER AND BRIGHTER COMMUNITY AND

PROVIDE A LASTING LEGACY THAT TRANSCENDS GENERATIONS.

EXPENSES \$ 324,574. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

THE DIRECTORS SHALL CONSTITUTE MEMBERS OF THE FOUNDATION, ACCORDING TO

ARTICLE VIII OF THE ARTICLES OF INCORPORATION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PRESENTED TO THE BOARD MEMBERS TO REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS OVERSEES THE POLICIES OF THE ORGANIZATION AND

ENFORCES COMPLIANCE WITH THEM.

FORM 990, PART VI, SECTION B, LINE 15:

OUR BOARD IS MADE AWARE OF COMPARABILITY DATA FROM OTHER FOUNDATIONS ACROSS

THE NATION. THE BOARD OF DIRECTORS APPROVES THE BUDGET ANNUALLY, TYPICALLY

IN DECEMBER. SALARIES OF ALL EMPLOYEES ARE DISCUSSED AND APPROVED BY THE

BOARD OF DIRECTORS. DOCUMENTED AUTHORIZATION OF SALARIES IS MAINTAINED IN

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization THE COMMUNITY FOUNDATION OF NORTH LOUISIANA	Employer identification number 72-6022365
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EACH EMPLOYEE'S FILE.

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION MAKES ITS FORM 1023, 990, AND 990-T AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST. THE FORM 990 AND AUDIT REPORT ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND THROUGH GUIDESTAR.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE BY REQUEST. AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE.

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

AGENCY ENDOWMENT FUND CONTRIBUTIONS, INVESTMENT	
INCOME, EXPENSES	-415,061.
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	42,000.
ROUNDING	2.
TOTAL TO FORM 990, PART XI, LINE 9	-373,059.

FORM 990, PART XI, LINE 2C:

THE FOUNDATION HAS AN AUDIT COMMITTEE THAT MEETS AT LEAST TWICE ANNUALLY PRECEDING AND UPON COMPLETION OF THE AUDIT. THIS COMMITTEE REVIEWS THE ANNUAL AUDITED FINANCIAL STATEMENTS AND OVERSEES THE SELECTION OF AN INDEPENDENT ACCOUNTANT.

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF NORTH LOUISIANA** Employer identification number **72-6022365**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CFNLA PROPERTIES LLC - 47-2540019 401 EDWARDS ST., STE. 105 SHREVEPORT, LA 71101	HOLD PROPERTIES RECEIVED	LOUISIANA	122,221.	270,289.	
CFNLA PROPERTIES II, LLC - 83-1898167 401 EDWARDS ST., STE. 105 SHREVEPORT, LA 71101	HOLD PROPERTIES RECEIVED	LOUISIANA	124,772.	1,269,741.	

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
ANNIE LOWES STILES TRUST - 58-1759035 333 TEXAS STREET, LASH30202J SHREVEPORT, LA 71101	TO SUPPORT THE CHARITABLE AND EDUCATIONAL PROGRAMS OF THE COMMUNITY FOUND.	LOUISIANA	501(C)(3)	LINE 12B, II			X

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

Schedule R (Form 990) 2020



**THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA**

Schedule R (Form 990) 2020

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**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?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**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) ANNIE LOWE STILES TRUST	C	942,080.	
(2)			
(3)			
(4)			
(5)			
(6)			



THE COMMUNITY FOUNDATION OF NORTH  
LOUISIANA

Schedule R (Form 990) 2020

72-6022365 Page 5

**Part VII** Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for providing supplemental information.

EXTENDED TO NOVEMBER 15, 2021

Form **990-T**

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No. 1545-0047

**2020**

For calendar year 2020 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

▶ **Go to [www.irs.gov/Form990T](http://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).**

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

<p><b>A</b> <input type="checkbox"/> Check box if address changed.</p> <p><b>B</b> Exempt under section  <input checked="" type="checkbox"/> 501(c)(3) )  <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)  <input type="checkbox"/> 408A <input type="checkbox"/> 530(a)  <input type="checkbox"/> 529(a) <input type="checkbox"/> 529S</p>	<p>Print or Type</p>	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>THE COMMUNITY FOUNDATION OF NORTH LOUISIANA</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>401 EDWARDS STREET, NO. 105</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>SHREVEPORT, LA 71101-5508</b></p> <p><b>C</b> Book value of all assets at end of year ..... ▶ <b>154,534,783.</b></p>	<p><b>D</b> Employer identification number <b>72-6022365</b></p> <p><b>E</b> Group exemption number (see instructions)</p> <p><b>F</b> <input type="checkbox"/> Check box if an amended return.</p>
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**G** Check organization type ▶  501(c) corporation  501(c) trust  401(a) trust  Other trust  Applicable reinsurance entity

**H** Check if filing only to ▶  Claim credit from Form 8941  Claim a refund shown on Form 2439

**I** Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ..... ▶

**J** Enter the number of attached Schedules A (Form 990-T) ..... ▶ **1**

**K** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation. ▶

**L** The books are in care of ▶ **PAIGE CARLISLE** Telephone number ▶ **(318) 221-0582**

**Part I Total Unrelated Business Taxable Income**

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	1	- 8,559.
2 Reserved .....	2	
3 Add lines 1 and 2 .....	3	- 8,559.
4 Charitable contributions (see instructions for limitation rules) .....	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	5	- 8,559.
6 Deduction for net operating loss. See instructions .....	6	0.
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	7	- 8,559.
8 Specific deduction (generally \$1,000, but see instructions for exceptions) .....	8	1,000.
9 <b>Trusts.</b> Section 199A deduction. See instructions .....	9	
10 <b>Total deductions.</b> Add lines 8 and 9 .....	10	1,000.
11 <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	11	0.

**Part II Tax Computation**

1 <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	1	0.
2 <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	2	
3 <b>Proxy tax.</b> See instructions .....	3	
4 Other tax amounts. See instructions .....	4	
5 Alternative minimum tax (trusts only) .....	5	
6 <b>Tax on noncompliant facility income.</b> See instructions .....	6	
7 <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2020)

<b>Part III Tax and Payments</b>			
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) .....	<b>1a</b>		
b Other credits (see instructions) .....	<b>1b</b>		
c General business credit. Attach Form 3800 (see instructions) .....	<b>1c</b>		
d Credit for prior year minimum tax (attach Form 8801 or 8827) .....	<b>1d</b>		
e <b>Total credits.</b> Add lines 1a through 1d .....		<b>1e</b>	
2 Subtract line 1e from Part II, line 7 .....		<b>2</b>	0.
3 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement) .....		<b>3</b>	
4 <b>Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here .....		<b>4</b>	0.
5 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 .....		<b>5</b>	0.
6a Payments: A 2019 overpayment credited to 2020 .....	<b>6a</b>		
b 2020 estimated tax payments. Check if section 643(g) election applies .....	<b>6b</b>		
c Tax deposited with Form 8868 .....	<b>6c</b>		
d Foreign organizations: Tax paid or withheld at source (see instructions) .....	<b>6d</b>		
e Backup withholding (see instructions) .....	<b>6e</b>		
f Credit for small employer health insurance premiums (attach Form 8941) .....	<b>6f</b>		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 .....	<b>6g</b>		
<input type="checkbox"/> Form 4136 .....			
7 <b>Total payments.</b> Add lines 6a through 6g .....		<b>7</b>	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached .....		<b>8</b>	
9 <b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .....		<b>9</b>	
10 <b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid .....		<b>10</b>	
11 Enter the amount of line 10 you want: <b>Credited to 2021 estimated tax</b> .....		<b>11</b>	

<b>Part IV Statements Regarding Certain Activities and Other Information</b> (see instructions)			
1 At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here .....		Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? .....			X
3 Enter the amount of tax-exempt interest received or accrued during the tax year .....			
4a Did the organization change its method of accounting? (see instructions) .....			X
b If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V .....			

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer _____ Date _____	Title _____ CFO	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	AIMEE P. MCFARLAND	AIMEE P. MCFARLAND	10/27/21	P01492592
	Firm's name	Firm's EIN		
	HEARD, MCELROY & VESTAL, LLC	72-0398470		
	Firm's address	Phone no.		
	333 TEXAS STREET, SUITE 1525 SHREVEPORT, LA 71101	318-429-1525		

**SCHEDULE A  
(Form 990-T)**

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

OMB No. 1545-0047

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990T](http://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).

Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> Name of the organization <b>THE COMMUNITY FOUNDATION OF NORTH LOUISIANA</b>	<b>B</b> Employer identification number <b>72-6022365</b>
<b>C</b> Unrelated business activity code (see instructions) ▶ <b>900099</b>	<b>D</b> Sequence: <b>1</b> of <b>1</b>

**E Describe the unrelated trade or business ▶ INVESTMENT IN PARTNERSHIPS**

<b>Part I</b> Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances			
<b>c</b> Balance ▶	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8)	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>		
<b>4 a</b> Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions)	<b>4a</b> 323.		323.
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	<b>4b</b> -15,810.		-15,810.
<b>c</b> Capital loss deduction for trusts	<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) <b>STATEMENT 1</b>	<b>5</b> 178,331.		178,331.
<b>6</b> Rent income (Part IV)	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V)	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI)	<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII)	<b>10</b>		
<b>11</b> Advertising income (Part IX)	<b>11</b>		
<b>12</b> Other income (see instructions; attach statement)	<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b> 162,844.		162,844.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income

<b>1</b> Compensation of officers, directors, and trustees (Part X)	<b>1</b>		
<b>2</b> Salaries and wages	<b>2</b>		
<b>3</b> Repairs and maintenance	<b>3</b>		
<b>4</b> Bad debts	<b>4</b>		
<b>5</b> Interest (attach statement) (see instructions) <b>SEE STATEMENT 2</b>	<b>5</b>		731.
<b>6</b> Taxes and licenses	<b>6</b>		
<b>7</b> Depreciation (attach Form 4562) (see instructions)	<b>7</b>		
<b>8</b> Less depreciation claimed in Part III and elsewhere on return	<b>8a</b>		
<b>9</b> Depletion	<b>9</b>		35,456.
<b>10</b> Contributions to deferred compensation plans	<b>10</b>		
<b>11</b> Employee benefit programs	<b>11</b>		
<b>12</b> Excess exempt expenses (Part VIII)	<b>12</b>		
<b>13</b> Excess readership costs (Part IX)	<b>13</b>		
<b>14</b> Other deductions (attach statement) <b>SEE STATEMENT 3</b>	<b>14</b>		135,216.
<b>15 Total deductions.</b> Add lines 1 through 14	<b>15</b>		171,403.
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	<b>16</b>		-8,559.
<b>17</b> Deduction for net operating loss (see instructions)	<b>17</b>		0.
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16	<b>18</b>		-8,559.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold Enter method of inventory valuation

Table with 8 rows for Cost of Goods Sold. Rows include: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold. Row 9 is a checkbox question: 'Do the rules of section 263A... apply to the organization?' with Yes/No options.

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

Table for Rent Income. Row 1: Description of property with checkboxes A, B, C, D. Rows 2-4: Grid for rent received or accrued from personal property (a), real and personal property (b), and total rents (c) across columns A, B, C, D. Row 3: Total rents received or accrued. Row 4: Deductions directly connected with the income. Row 5: Total deductions. Total values are shown as 0.

Part V Unrelated Debt-Financed Income (see instructions)

Table for Unrelated Debt-Financed Income. Row 1: Description of debt-financed property with checkboxes A, B, C, D. Rows 2-8: Grid for gross income from or allocable to debt-financed property (2), deductions (3a, 3b, 3c), amount of average acquisition debt (4), average adjusted basis (5), and percentage calculation (6). Row 7: Gross income reportable. Row 8: Total gross income. Row 9: Allocable deductions. Row 10: Total allocable deductions. Row 11: Total dividends-received deductions. Total values are shown as 0.

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

		Exempt Controlled Organizations			
1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)	
<b>Totals</b>			0.	0.	

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
<b>Totals</b>		0.		0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) .....	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	4
5	Gross income from activity that is not unrelated business income .....	5
6	Expenses attributable to income entered on line 5 .....	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	7

**Part IX Advertising Income**

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A
- B
- C
- D

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
Add columns A through D. Enter here and on Part I, line 11, column (A)				0.
a				
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				0.
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete 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 less than line 6, enter zero				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13				0.

**Part X Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			0.

**Part XI Supplemental Information** (see instructions)

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THE COMMUNITY FOUNDATION OF NORTH LOUISI

72-6022365

FORM 990-T (A)

INCOME (LOSS) FROM PARTNERSHIPS

STATEMENT 1

<u>DESCRIPTION</u>	<u>NET INCOME OR (LOSS)</u>
AMBERBROOK VI, LLC - ORDINARY BUSINESS INCOME (LOSS)	-1,511.
AMBERBROOK VI, LLC - NET RENTAL REAL ESTATE INCOME	-7.
AMBERBROOK VI, LLC - INTEREST INCOME	18.
AMBERBROOK VI, LLC - DIVIDEND INCOME	12.
AMBERBROOK VI, LLC - ROYALTIES	25.
AMBERBROOK VI, LLC - OTHER PORTFOLIO INCOME (LOSS)	97.
AMBERBROOK VI, LLC - OTHER INCOME (LOSS)	39.
RCP SECONDARY OPPORTUNITY FUND III, LP - ORDINARY BUSINESS INCOME (LOSS)	48,187.
NGP NATURAL RESOURCES XI, LP - ORDINARY BUSINESS INCOME (LOSS)	144,066.
NGP NATURAL RESOURCES XI, LP - OTHER NET RENTAL INCOME (LOSS)	22.
NGP NATURAL RESOURCES XI, LP - INTEREST INCOME	575.
NGP NATURAL RESOURCES XI, LP - ROYALTIES	5,328.
NGP NATURAL RESOURCES XI, LP - OTHER PORTFOLIO INCOME (LOSS)	478.
NGP NATURAL RESOURCES XI, LP - OTHER INCOME (LOSS)	9.
WCP REAL ESTATE FUND III, LP - ORDINARY BUSINESS INCOME (LOSS)	-18,705.
WCP REAL ESTATE FUND III, LP - NET RENTAL REAL ESTATE INCOME	863.
THACKERAY PARTNERS REALTY FUND V, LP - NET RENTAL REAL ESTATE INCOME	-1,165.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	<u>178,331.</u>

FORM 990-T (A)

INTEREST PAID

STATEMENT 2

<u>DESCRIPTION</u>	<u>AMOUNT</u>
AMBERBROOK UBTI FOOTNOTE	159.
NGP UBTI FOOTNOTE	572.
TOTAL TO SCHEDULE A, PART II, LINE 5	<u>731.</u>

THE COMMUNITY FOUNDATION OF NORTH LOUISI

72-6022365

FORM 990-T (A)

OTHER DEDUCTIONS

STATEMENT 3

DESCRIPTION

AMOUNT

OTHER DEDUCTIONS - AMBERBROOK UBTI FOOTNOTE

366.

OTHER DEDUCTIONS - NGP UBTI FOOTNOTE

134,797.

OTHER DEDUCTIONS

53.

TOTAL TO SCHEDULE A, PART II, LINE 14

135,216.



State of  
Louisiana  
Secretary of State



COMMERCIAL DIVISION  
225.925.4704

Fax Numbers  
225.932.5317 (Admin.  
Services)  
225.932.5314 (Corporations)  
225.932.5318 (UCC)

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Name	Type	City	Status
THE COMMUNITY FOUNDATION OF NORTH LOUISIANA	Non-Profit Corporation	SHREVEPORT	Active

Previous Names

THE COMMUNITY FOUNDATION OF SHREVEPORT-BOSSIER (Changed: 2/2/2010)

THE SHREVEPORT-BOSSIER FOUNDATION (Changed: 9/26/1980)

Business: THE COMMUNITY FOUNDATION OF NORTH LOUISIANA

Charter Number: 03103640N

Registration Date: 6/29/1961

Domicile Address

401 EDWARDS, STE. 105  
SHREVEPORT, LA 71101

Mailing Address

401 EDWARDS, STE. 105  
SHREVEPORT, LA 71101

Status

Status: **Active**

Annual Report Status: **In Good Standing**

File Date: 6/29/1961

Last Report Filed: 5/31/2022

Type: Non-Profit Corporation

Registered Agent(s)

Agent: WILLIAM C. KALMBACH

Address 1: 333 TEXAS STREET

Address 2: SUITE 1700  
City, State, Zip: SHREVEPORT, LA 71101  
Appointment Date: 2/2/2010

Officer(s)

Additional Officers: No

Officer: GLENN KINSEY  
Title: Director  
Address 1: 401 EDWARDS ST., STE. 1805  
City, State, Zip: SHREVEPORT, LA 71101

Officer: JERRY EDWARDS  
Title: Director  
Address 1: 3105 FAIRFIELD  
City, State, Zip: SHREVEPORT, LA 71104

Officer: THOMAS MURPHY  
Title: Director  
Address 1: 400 TRAVIS STREET, SUITE 1910  
City, State, Zip: SHREVEPORT, LA 71101

Officer: TERRY DAVIS  
Title: Director  
Address 1: 1046 ONTARIO  
City, State, Zip: SHREVEPORT, LA 71106

Officer: LISA CRONIN  
Title: Director  
Address 1: 2786 CAPILANO CIRCLE  
City, State, Zip: SHREVEPORT, LA 71106

Officer: WITT CARUTHERS  
Title: Director  
Address 1: 330 MARSHALL STREET, SUITE 1414  
City, State, Zip: SHREVEPORT, LA 71101

Officer: WANDA THOMAS  
Title: Director  
Address 1: 140 WATERS EDGE DRIVE  
City, State, Zip: SHREVEPORT, LA 71106

Amendments on File (10)

Description	Date
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Amendment	1/9/1962
Amendment	2/9/1977
Amendment	11/18/1977
Amendment	2/23/1978
Name Change	9/26/1980
Amendment	12/29/1986
Restated Articles	10/10/1997
Restated Articles	12/18/2002
Name Change	2/2/2010
Restated Articles	2/2/2010



## **2022 Caddo Parish Commission Grant Request: Section II, Proposal Narrative**

### **A. Description of Project and Soundness of Project:**

Community Foundation of North Louisiana (CFNLA) requests \$100,000 from the Parish of Caddo to be used for a Behavioral Health Diversion Court. The Behavioral Health Court will strive to reduce recidivism of individuals in the criminal justice system that have mental illness. Providing community protection with cost effective, integrated continuum of care through the utilization of community resources. It will use the law as a therapeutic agent to improve the quality of lives within the community. This will be done by holding the defendant accountable and helping restore them to be a productive family member, community-member, and law-abiding citizens by breaking the cycle of criminal behavior through effective, long-term behavioral health treatment and intensive court supervision.

Modeled after the successful Behavioral Health Court in Alexandria, Louisiana, the Caddo BHC will be a non-sanctioned court with a budget not exceeding \$300,000 in year 1 of its existence (2023). The BHC will be a non-sanctioned court but will work in cooperation with the Louisiana Supreme Court, the Caddo Parish District Court, and the Shreveport City Court. (If funding is awarded cooperation agreements will be sought and signed by both local courts.) BHC will connect individuals with mental health issues, either diagnosed or not yet diagnosed, to local services. The services will be provided by preexisting providers and will not be provided in-house. This ensures the cost of the Court stays low and that defendants have the freedom to choose their own providers. The BHC is specifically aimed to reduce the number of defendants with mental health issues who frequently encounter the judicial system, at great cost to the community, for misdemeanors and other non-violent crimes. Rather than jailing these defendants, the BHC aims to better their lives and set them on a path to healing.

The Behavioral Health Court program is a special Court program given the responsibility to handle cases involving offenders with mental health diagnosis through supervision and treatment. (Some defendants may not have been diagnosed prior to the program and will go through an assessment with a mental health provider at the outset. BHC will also aid defendants in signing up for Medicare, Medicaid, or other insurance where necessary.) The program could include such things as: Judicial and Probation supervision, drug testing, counseling, medication, educational opportunities, behavioral health treatment and the use of sanctions and incentives. The Judge is much more involved in supervising Behavioral

Health Court clients than is customary for individuals who are simply placed in a standard probationary or diversionary program.

Defendants submitting themselves to BHC will be required to: attend Court on date served; adhere to treatment plans; attend recommended treatment(s); take prescribed medications as directed; comply with requested drug screening; make contact with the Court on address changes / phone number changes; and attend all required meetings. Failure to follow through with responsibilities produces consequences. There are many sanctions the Judge may choose, including: verbal reprimands, community service, increase in the number of meetings defendants are required to attend, a written assignment, fines, appropriate jail time, or dismissal from the program, which would result in scheduling a revocation hearing. Discharge from the program is only a last resort for people who clearly cannot or will not comply with the structure of the Behavioral Health Court Program. Incentives could be provided to individuals who have demonstrated a desire to change their behavior and work toward a successful completion of the Behavioral Health Court Program. Rewards could range from public praise in the court from the Judge, reduced supervision, dismissal of criminal charges, decreased frequency of court appearances, etc.

The Behavioral Health Court Program consists of a Judge, two employees, and a team of Behavioral Health Professionals which assist with the weekly review process. Other team members may also appear in the court room to represent various community resources begin accessed by defendants.

**B. Background and Capacity of Organization:**

Established in 1961, CFNLA oversees more than \$170 million in assets for the benefit of North Louisiana. CFNLA's mission is to promote philanthropy and improve the quality of life in the North Louisiana community by serving as a permanent and growing resource of expertise and funds. CFNLA has a longstanding history of effectively administering grants. In 2021, CFNLA received over \$7.7 million in donations, facilitated the creation of 15 new funds, and awarded \$8.5 million in grants and scholarships. CFNLA has a staff of ten and is governed by a seven-member volunteer Board of Directors. Prior to becoming the CEO of CFNLA, Kristina Gustavson was a practicing attorney and trust advisor. In addition to grantmaking, CFNLA convenes public/private partnerships to identify problems and develop solutions to effect real and lasting change.

**C. Prior Experience of Organization:**

Since inception, CFNLA has granted over \$100 million in grants to nonprofit organizations. CFNLA's Give for Good annual online giving campaign raised over \$14 million for North Louisiana nonprofits

since 2014. Beginning in 2008, CFNLA has tracked and published Shreveport-Bossier MSA data in six categories (Population, Economics, Human Capital, Health, Social Environment, and Physical Environment) in its *Community Counts* publication. The data guides CFNLA funding priorities and is available for all in the community to use. CFNLA often launches pilot programs, such as the one applied for herein and can provide more detail about prior projects if necessary.

**D. Extent of Neighborhood Involvement:**

The proposed project will not require volunteers. The proposed project will apply to all applicable citizens in the parish.

**E. Joint Application and Collaboration**

While CFNLA is the sole applicant, the request is the result of a collaboration between CFNLA, Shreveport City Court, and Caddo Parish District Court. The project will be carried out through a joint agreement between Shreveport City Court and Caddo Parish District Court. One or more contractors will be identified and hired to provide the Behavioral Health Court case management.

**F. Identify Needs and Gaps in Services in Neighborhood:**

There is currently no behavioral health court in Caddo Parish meeting this need. There are many defendants that spend time incarcerated due to mental illness rather than receiving the treatment they need. This project aims to address that issue and ultimately save taxpayer dollars by keeping citizens out of jail.



P.O. Box 2508  
Cincinnati OH 45201

In reply refer to: 0248667584  
Oct. 29, 2010 LTR 4168C E0  
72-6022365 000000 00  
00018838  
BODC: TE

COMMUNITY FOUNDATION OF NORTH  
LOUISIANA  
401 EDWARDS ST STE 105  
SHREVEPORT LA 71101-5508

Employer Identification Number: 72-6022365  
Person to Contact: Mrs. Scheper  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Oct. 20, 2010, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in June 1987.

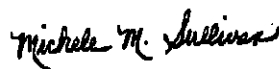
Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website [www.irs.gov/eo](http://www.irs.gov/eo) for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,



Michele M. Sullivan, Oper. Mgr.  
Accounts Management Operations I