

Return of Organization Exempt From Income Tax

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

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

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

Part I Summary: C Name of organization, D Employer identification number, E Telephone number, F Name and address of principal officer, G Gross receipts, H(a) Is this a group return, H(b) Are all subordinates included, I Tax-exempt status, J Website, K Form of organization, L Year of formation, M State of legal domicile.

Part II Signature Block: 1 Briefly describe the organization's mission or most significant activities, 2-11 Revenue, 12-19 Expenses, 20-22 Net Assets or Fund Balances.

Signature of officer: JAMES S. HARRIS, PRESIDENT/CEO. Print/Type preparer's name: ERIC F. FULLMER. Preparer's signature, Date, Check if self-employed, PTIN, Firms name, Firms address, Firms EIN, Phone no.

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

May the IRS discuss this return with the preparer shown above? See instructions

Yes No

4e Total program service expenses **180,761.** (Expenses \$) including grants of \$ (Revenue \$)

4d Other program services (Describe on Schedule O)

4c (Code:) (Expenses \$) including grants of \$ (Revenue \$)

4b (Code:) (Expenses \$) including grants of \$ (Revenue \$)

4a (Code:) (Expenses \$) including grants of \$ (Revenue \$)

THE FOUNDATION FUNDS SCHOLARSHIPS TO QUALIFIED APPLICANTS OF THE RESTAURANT, HOTEL, AND CULINARY SCHOOLS IN LOUISIANA; IT OPERATES A PROGRAM DESIGNED TO PREPARE STUDENTS FOR CAREER OPPORTUNITIES IN MANAGEMENT AND CULINARY ARTS.

4 Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

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

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 No

1 Briefly describe the organization's mission: PROMOTE EDUCATION OF/IN THE HOSPITALITY INDUSTRY

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

Part IV Checklist of Required Schedules

Table with 2 columns: Question/Requirement (1-21) and Yes/No response. Questions cover various financial and operational requirements for the organization.

1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	8
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	X
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	X
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or family member of any of these persons? If "Yes," complete Schedule L, Part III	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):	
28a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	
28b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	X
28c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X
35b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 1b and 19? Note: All Form 990 filers are required to complete Schedule O	X

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		3		2a		b		If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note:</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b		X	
3a		Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X		3b		If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation on Schedule O		3b			
4a		At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X		4b		If "Yes," enter the name of the foreign country		4b			
5a		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		5a		X		5b		Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5b		X	
6a		Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X		6b		If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b			
7		Organizations that may receive deductible contributions under section 170(c).		7a		X		7b		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? If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b			
8		Sponsoring organizations maintaining donor advised funds.		8				9a		Did the sponsoring organization make any taxable distributions under section 4966?		9a			
9		Sponsoring organizations maintaining donor advised funds.		9b				10a		Initiation fees and capital contributions included on Part VIII, line 12		10a			
10		Section 501(c)(7) organizations. Enter:		10a				10b		Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b			
11		Section 501(c)(12) organizations. Enter:		11a				11b		Gross income from members or shareholders		11a			
12a		Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a				12b		If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12b			
13		Section 501(c)(29) qualified nonprofit health insurance issuers.		13a				13b		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			
14a		Did the organization receive any payments for indoor tanning services during the tax year?		14a		X		14b		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?		15		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.		16		X	

2700 N ARNOLD RD, METAIRIE, LA 70002

SHERRI SPINELLI - 504-454-2277

State the name, address, and telephone number of the person who possesses the organization's books and records

statements available to the public during the tax year.

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. Own website Another's website Upon request Other (explain on Schedule O)

for public inspection. Indicate how you made these available. Check all that apply.

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

List the states with which a copy of this Form 990 is required to be filed

NONE

Section C. Disclosure

Table with 16 rows (10a-16b) and 2 columns (Yes/No) for various disclosure questions regarding organizational governance and financial statements.

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

Table with 16 rows (1a-9) and 2 columns (Yes/No) for various policy questions regarding organizational governance and financial statements.

Section A. Governing Body and Management

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

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

For each "Yes" response to lines 2 through 7b below, and for a "No" response

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's current officers, directors, trustees, and highest compensated employees (whether individuals or organizations), regardless of amount of compensation.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)	(C) Position					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) JULIE TALBOT EXECUTIVE DIRECTOR	40.00			X			57,514.	0.	3,358.
(2) FORREST BETHAY III DIRECTOR	0.50	X					0.	0.	0.
(3) ROCKY WEIGAND IMMEDIATE PAST CHAIR	0.50	X		X			0.	0.	0.
(4) MATT MASSEY CHAIR	0.50	X		X			0.	0.	0.
(5) GREG HAMER DIRECTOR	0.50	X					0.	0.	0.
(6) DICKIE BRENNAN DIRECTOR	0.50	X					0.	0.	0.
(7) JOHN EASTMAN DIRECTOR	0.50	X					0.	0.	0.
(8) PAUL ROTNER PAST CHAIR	0.50	X					0.	0.	0.
(9) SCOT CRAIG DIRECTOR	0.50	X					0.	0.	0.
(10) CRAIG DENNISON SECRETARY/TREASURER	0.50	X		X			0.	0.	0.
(11) ALAN GUILBEAU VICE CHAIR	0.50	X					0.	0.	0.
(12) BRUCE ATTINGER DIRECTOR	0.50	X					0.	0.	0.
(13) MICHAEL CARMOUCHE DIRECTOR	0.50	X					0.	0.	0.
(14) TONY D'ANGELO DIRECTOR	0.50	X					0.	0.	0.
(15) JASON JONES DIRECTOR	0.50	X					0.	0.	0.
(16) GREG REGGIO DIRECTOR	0.50	X					0.	0.	0.
(17) TAMMY SMITHERMAN DIRECTOR	0.50	X					0.	0.	0.

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Part VIII Statement of Revenue					
Check if Schedule O contains a response or note to any line in this Part VIII <input type="checkbox"/>					
Contributions, Gifts, Grants and Other Similar Amounts					
1	Federated campaigns				
2	Membership dues				
3	Fundraising events				
4	Related organizations				
5	Government grants (contributions)				
6	All other contributions, gifts, grants, and similar amounts not included above	191,259.			
7	Noncash contributions included in lines 1a-1f	191,259.			
8	Total, Add lines 1a-1f	221,245.			
Program Service Revenue					
9	Federated campaigns				
10	Membership dues				
11	Fundraising events				
12	Related organizations				
13	Government grants (contributions)				
14	All other contributions, gifts, grants, and similar amounts not included above				
15	Noncash contributions included in lines 1a-1f				
16	Total, Add lines 1a-1f	32,800.			
Other Revenue					
17	Federated campaigns				
18	Membership dues				
19	Fundraising events				
20	Related organizations				
21	Government grants (contributions)				
22	All other contributions, gifts, grants, and similar amounts not included above				
23	Noncash contributions included in lines 1a-1f				
24	Total, Add lines 1a-1f	0.			
Miscellaneous Revenue					
25	Federated campaigns				
26	Membership dues				
27	Fundraising events				
28	Related organizations				
29	Government grants (contributions)				
30	All other contributions, gifts, grants, and similar amounts not included above				
31	Noncash contributions included in lines 1a-1f				
32	Total, Add lines 1a-1f	279,131.			
33	Total revenue, See instructions	279,131.	32,800.	0.	25,086.

Part IX Statement of Functional Expenses

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

Do 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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	147,156.	47,759.	99,397.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,196.	1,800.	2,396.	
9 Other employee benefits	21,180.	8,472.	12,708.	
10 Payroll taxes	13,303.	5,210.	8,093.	
11 Fees for services (nonemployees):				
a Management				
b Legal	980.		980.	
c Accounting	4,000.		4,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 1g amount exceeds 10% of line 25, column (A) amount, list line 1g expenses on Sch O.)	20,625.			20,625.
12 Advertising and promotion	498.	117.	381.	
13 Office expenses	600.	217.	383.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	2,865.	505.	2,360.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	3,523.		3,523.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	82,564.	82,564.		
a CONTRIBUTIONS	82,564.	82,564.		
b COMPETITION EXPENSE	29,696.	29,696.		
c MISCELLANEOUS	8,934.	3,148.	5,786.	
d TELEPHONE	2,892.	1,247.	1,645.	
e All other expenses	5,597.	26.	5,571.	
25 Total functional expenses. Add lines 1 through 24e	348,609.	180,761.	147,223.	20,625.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

		(A) Beginning of year	(B) End of year
1	Cash - non-interest-bearing	198,838.	154,704.
2	Savings and temporary cash investments	50,374.	81,385.
3	Pledges and grants receivable, net		
4	Accounts receivable, net	5,152.	12,116.
5	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		
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		
7	Notes and loans receivable, net		
8	Inventories for sale or use		
9	Prepaid expenses and deferred charges	4,877.	882.
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		
	10a	3,673.	
	10b	3,673.	
b	Less: accumulated depreciation	0.	0.
11	Investments - publicly traded securities		
12	Investments - other securities. See Part IV, line 11	1,271,335.	1,272,766.
13	Investments - program-related. See Part IV, line 11		
14	Intangible assets		
15	Other assets. See Part IV, line 11		
16	Total assets. Add lines 1 through 15 (must equal line 33)	1,530,576.	1,521,853.
17	Accounts payable and accrued expenses	20,258.	51,858.
18	Grants payable		
19	Deferred revenue	30,066.	49,515.
20	Tax-exempt bond liabilities		
21	Escrow or custodial account liability. Complete Part IV of Schedule D		
22	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		
23	Secured mortgages and notes payable to unrelated third parties		
24	Unsecured notes and loans payable to unrelated third parties		
25	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		
26	Total liabilities. Add lines 17 through 25	50,324.	101,373.
27	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.	1,066,126.	1,021,350.
28	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/>	414,126.	399,130.
29	Capital stock or trust principal, or current funds and complete lines 29 through 33.		
30	Paid-in or capital surplus, or land, building, or equipment fund		
31	Retained earnings, endowment, accumulated income, or other funds		
32	Total net assets or fund balances	1,480,252.	1,420,480.
33	Total liabilities and net assets/fund balances	1,530,576.	1,521,853.

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

1 Accounting method used to prepare the Form 990: Cash Accrual Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant? Yes No

2b Were the organization's financial statements audited by an independent accountant? Yes No

2c 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? Yes No

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? Yes No

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

Part XIII Financial Statements and Reporting

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

1	Total revenue (must equal Part VIII, column (A), line 12)	279,131.
2	Total expenses (must equal Part IX, column (A), line 25)	348,609.
3	Revenue less expenses. Subtract line 2 from line 1	-69,478.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	1,480,252.
5	Net unrealized gains (losses) on investments	9,706.
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain on Schedule O)	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	1,420,480.

Part XI Reconciliation of Net Assets

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

Schedule A (Form 990 or 990-EZ) 2020

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

14	42.63	%
15	43.42	%

Section C. Computation of Public Support Percentage

13 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					
12 Gross receipts from related activities, etc. (see instructions)					
11 Total support. Add lines 7 through 10					1798346.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)					
9 Net income from unrelated business activities, whether or not the business is regularly carried on					
8 Dividends, payments received on securities loans, rents, royalties, and income from similar sources	13,087.	17,248.	22,517.	30,163.	25,086.
7 Amounts from line 4	369,906.	312,271.	366,915.	419,908.	221,245.
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020
	369,906.	312,271.	366,915.	419,908.	221,245.
	(f) Total				1690245.

Section B. Total Support

6 Public support. Subtract line 5 from line 4.					923,635.
5 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)					766,610.
4 Total. Add lines 1 through 3	369,906.	312,271.	366,915.	419,908.	221,245.
3 The value of services or facilities furnished by a governmental unit to the organization without charge					
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	369,906.	312,271.	366,915.	419,908.	221,245.
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020
	369,906.	312,271.	366,915.	419,908.	221,245.
	(f) Total				1690245.

Section A. Public Support

(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.)

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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions **18** Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) **17** Investment income percentage from 2019 Schedule A, Part III, line 17 **16** Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) **15** Public support percentage from 2019 Schedule A, Part III, line 15 **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 D. Computation of Investment Income Percentage

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 **19a 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

Section C. Computation of Public Support Percentage

check this box and stop here

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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. (Add lines 9, 10c, 11, and 12.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section A. Public Support

(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 B. Type I Supporting Organizations

detail in Part VI.

11 Has the organization accepted a gift or contribution from any of the following persons?

a 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 A family member of a person described in line 11a above?

c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes," to line 11a, 11b, or 11c, provide detail in Part VI.

11a		
11b		
11c		
Yes		
No		

Section C. Type II Supporting Organizations

1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

1		
2		
Yes		
No		

Section D. All Type III Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

1		
Yes		
No		

Section E. Type III Functionally Integrated Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?

2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

3 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

1		
2		
3		
Yes		
No		

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

a The organization satisfied the Activities Test. Complete line 2 below.

b The organization is the parent of each of its supported organizations. Complete line 3 below.

c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly further 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.

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? 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.

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a		
2b		
3a		
3b		
Yes		
No		

Schedule A (Form 990 or 990-EZ) 2020

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations	
<input type="checkbox"/> 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	
1	Net short-term capital gain
2	Recoveries of prior-year distributions
3	Other gross income (see instructions)
4	Add lines 1 through 3.
5	Depreciation and depletion
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)
7	Other expenses (see instructions)
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)
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):
1a	Average monthly value of securities
1b	Average monthly cash balances
1c	Fair market value of other non-exempt-use assets
1d	Total (add lines 1a, 1b, and 1c)
<i>(explain in detail in Part VI):</i>	
e	Discount claimed for blockage or other factors
2	Acquisition indebtedness applicable to non-exempt-use assets
3	Subtract line 2 from line 1d.
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).
5	Net value of non-exempt-use assets (subtract line 4 from line 3)
6	Multiply line 5 by 0.035.
7	Recoveries of prior-year distributions
8	Minimum Asset Amount (add line 7 to line 6)
Section C - Distributable Amount	
Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)
2	Enter 0.85 of line 1.
3	Minimum asset amount for prior year (from Section B, line 8, column A)
4	Enter greater of line 2 or line 3.
5	Income tax imposed in prior year
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).
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).

Schedule A (Form 990 or 990-EZ) 2020

Section D - Distributions		Excess Distributions (i)	Underdistributions (ii)	Distributable Amount for 2020 (iii)
1	2			
1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)			
6	Other distributions (<i>describe in Part VI</i>). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.			
9	Distributable amount for 2020 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Section E - Distribution Allocations (see instructions)				
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2020 (reason-able cause required - <i>explain in Part VI</i>). 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 Total 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, <i>explain in Part VI</i> . See instructions.				
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7 Excess distributions carryover to 2021. 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				

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. **\$**

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

Special Rules

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

General Rule

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. Check if your organization is covered by the **General Rule** or a **Special Rule**.

501(c)(3) taxable private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) exempt private foundation

527 political organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

501(c)(3) (enter number) organization

Filters of: Section:

Organization type (check one):

Employer identification number 72-1318297	Name of the organization EDUCATION FOUNDATION OF THE L.R.A., INC.
--	--

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

2020

Name of organization: EDUCATION FOUNDATION OF THE L.R.A., INC.
 Employer identification number: 72-1318297

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AUTO-CHLOR 500 DAKIN STREET JEFFERSON, LA 70121	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	BAYOU CHAPTER - LRA 2700 N. ARNOULT ROAD METAIRIE, LA 70002	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	LA HOSPITALITY FOUNDATION P.O. BOX 24046 NEW ORLEANS, LA 70184	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	ACME OYSTER HOUSE 724 IBERVILLE ST NEW ORLEANS, LA 70130	\$ 5,375.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	NRA EDUCATIONAL FOUNDATION 2055 L ST, NW, SUITE 700 WASHINGTON, DC 20036	\$ 40,066.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	LRA 2700 N. ARNOULT ROAD METAIRIE, LA 70002	\$ 63,123.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

EDUCATION FOUNDATION OF THE L.R.A., INC.

72-1318297

Employer identification number

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MCLHENNY COMPANY 601 POYDRAS ST NEW ORLEANS, LA 70130	\$ 10,000.	(Complete Part II for noncash contributions.) Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
8	FOREKIDS FOUNDATION 11005 LAPALCO BLVD AVONDALE, LA 70094	\$ 12,500.	(Complete Part II for noncash contributions.) Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
9	US DEPT OF LABOR-RYPA GRANT 200 CONSTITUTION AVENUE, NW, ROOM N4716 WASHINGTON, DC 20210	\$ 29,986.	(Complete Part II for noncash contributions.) Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
10	HILTON FOUNDATION GRANT 1 DOLE DR WESTLAKE VILLAGE, CA 91362	\$ 20,000.	(Complete Part II for noncash contributions.) Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) from No. Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

EDUCATION FOUNDATION OF THE L.R.A., INC.	72-1318297
Name of organization	Employer identification number

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

EDUCATION FOUNDATION OF THE L.R.A., INC.

Employer identification number

72-1318297

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply):
 Preservation of land for public use (for example, recreation or education)
 Preservation of a historically important land area
 Protection of natural habitat
 Preservation of open space

- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- | | 2a | 2b | 2c | 2d |
|--|----|----|----|----|
| a Total number of conservation easements | | | | |
| b Total acreage restricted by conservation easements | | | | |
| c Number of conservation easements on a certified historic structure included in (a) | | | | |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | | | | |

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
- 4 Number of states where property subject to conservation easement is located
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)? Yes No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 \$
- (ii) Assets included in Form 990, Part X \$
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 \$
- b Assets included in Form 990, Part X \$

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)			
1a Land			
b Buildings			
c Leasehold improvements			
d Equipment		3,673.	
e Other			0.
Description of property			
(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value

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

Part VI Land, Buildings, and Equipment.

4 Describe in Part XIII the intended uses of the organization's endowment funds.

b If "Yes" on line 3a(i), are the related organizations listed as required on Schedule R?

(ii) Related organizations

(i) Unrelated organizations

by:

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

3a(i)	X
3a(ii)	X
3b	
Yes	No

The percentages on lines 2a, 2b, and 2c should equal 100%.

c Term endowment %

b Permanent endowment 100 %

a Board designated or quasi-endowment %

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
97,102.	96,621.	90,000.	90,000.	90,000.
1a Beginning of year balance	96,621.	90,000.	90,000.	90,000.
b Contributions	5,481.			
c Net investment earnings, gains, and losses	-5,000.	6,621.		
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance	97,102.	96,621.	90,000.	90,000.

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

Yes No

f Ending balance

e Distributions during the year

d Additions during the year

c Beginning balance

b If "Yes," explain the arrangement in Part XIII and complete the following table:

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

Amount	1c	1d	1e	1f

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.

to be sold to raise funds rather than to be maintained as part of the organization's collection?

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

a Public exhibition

b Scholarly research

c Preservation for future generations

d Loan or exchange program

e Other

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):

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

Schedule D (Form 990) 2020

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.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

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

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

Part X Other Liabilities.

		Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)
(9)		
(8)		
(7)		
(6)		
(5)		
(4)		
(3)		
(2)		
(1)		
(a) Description	(b) Book value	

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

Part IX Other Assets.

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

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

Part VIII Investments - Program Related.

		Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)
(H)		
(G)		
(F)		
(E)		
(D)		
(C)		
(B) INVESTMENTS	1,272,766.	END-OF-YEAR MARKET VALUE
(A) LONG TERM MATURITIES OF		
(3) Other		
(2) Closely held equity interests		
(1) Financial derivatives		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value

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

Part VII Investments - Other Securities.

Part V Supplemental information. Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JAMES HARRIS
 (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: PRESIDENT AND CEO OF LRA AND DIRECTOR OF EDUCATION FOUNDATION

(A) NAME OF PERSON: SHERRI SPINELLI
 (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: CFO OF LRA AND EDUC

(A) NAME OF PERSON: PAUL ROTNER
 (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: DIRECTOR OF LRA AND

(A) NAME OF PERSON: MATT MASSEY
 (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: DIRECTOR OF LRA AND

(A) NAME OF PERSON: ALAN GUILBEAU
 (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: DIRECTOR OF LRA AND

(A) NAME OF PERSON: ALAN GUILBEAU
 (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: DIRECTOR OF LRA AND VICE CHAIR OF EDUCATION FOUNDATION

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?
JAMES HARRIS	PRESIDENT AND CEO O	0.		X
SHERRI SPINELLI	CFO OF LRA AND EDUC	0.		X
PAUL ROTNER	DIRECTOR OF LRA AND	0.		X
MATT MASSEY	DIRECTOR OF LRA AND	0.		X
ALAN GUILBEAU	AT-LARGE DIRECTOR O	0.		X
GREG HAMER	DIRECTOR OF LRA AND	0.		X
JOHN EASTMAN	DIRECTOR OF LRA AND	0.		X
TAMMY SMITHERMANN	DIRECTOR OF LRA AND	0.		X
BRUCE ATTINGER	DIRECTOR OF LRA AND	0.		X

THERE IS NO CHANGE IN THE PROCESS.

FORM 990, PART XII, LINE 2C:

UPON REQUEST.

INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC

INFORMATION ABOUT EDUCATION FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF

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

THE LRA.

ANNUAL REVIEWS AND EVALUATIONS ARE COMPLETED BY THE PRESIDENT AND CEO OF

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

THE BOARD AND STAFF SELF MONITORS AND REPORTS TO THE PRESIDENT AND CEO.

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

DIRECTORS PRIOR TO SUBMISSION.

AFTER COMPLETION OF THE 990, A COPY IS SENT TO AND REVIEWED BY THE

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

COMMITTEE REPORTS AND ACTIVITIES ARE INCLUDED IN THE DIRECTOR'S MINUTES.

FORM 990, PART VI, SECTION A, LINE 8B:

BOARD.

THE BOARD EACH YEAR WHO ARE THEN VOTED ON BY THE MEMBERS OF THE CURRENT

THE NOMINATING COMMITTEE OF THE BOARD PROPOSES A SLATE OF CANDIDATES FOR

FORM 990, PART VI, SECTION A, LINE 7A:

<p>OMB No. 1545-0047</p> <p>2020</p> <p>Open to Public Inspection</p>	<p>Supplemental Information to Form 990 or 990-EZ</p> <p>Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.</p> <p>▶ Attach to Form 990 or 990-EZ.</p> <p>▶ Go to www.irs.gov/Form990 for the latest information.</p>	<p>SCHEDULE O</p> <p>(Form 990 or 990-EZ)</p> <p>Department of the Treasury Internal Revenue Service</p>
<p>EDUCATION FOUNDATION OF THE L.R.A., INC.</p>		<p>Name of the organization</p>
<p>Employer identification number</p>	<p>72-1318297</p>	

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

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

		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b	Gift, grant, or capital contribution to related organization(s)	1b	X
c	Gift, grant, or capital contribution from related organization(s)	1c	X
d	Loans or loan guarantees to or for related organization(s)	1d	X
e	Loans or loan guarantees by related organization(s)	1e	X
f	Dividends from related organization(s)	1f	X
g	Sale of assets to related organization(s)	1g	X
h	Purchase of assets from related organization(s)	1h	X
i	Exchange of assets with related organization(s)	1i	X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o	Sharing of paid employees with related organization(s)	1o	X
p	Reimbursement paid to related organization(s) for expenses	1p	X
q	Reimbursement paid by related organization(s) for expenses	1q	X
r	Other transfer of cash or property to related organization(s)	1r	X
s	Other transfer of cash or property from related organization(s)	1s	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	LOCAL CHAPTERS OF THE LOUISIANA RESTAURANT ASSOCIATION	C	5,000. FMV	
2	LOUISIANA RESTAURANT ASSOCIATION	P	185,835. FMV	
3	LOUISIANA RESTAURANT ASSOCIATION	C	63,123. FMV	
4				
5				
6				

IRS e-file Signature Authorization for an Exempt Organization

Form 8879-EO

Department of the Treasury
Internal Revenue Service

For calendar year 2020, or fiscal year beginning _____, 2020, and ending _____, 20

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

2020

OMB No. 1545-0047

Name of exempt organization or person subject to tax

EDUCATION FOUNDATION OF THE L.R.A., INC.

72-1318297

Taxpayer identification number

Name and title of officer or person subject to tax

JAMES S. HARRIS

PRESIDENT/CEO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax	
1a Form 990 check here	<input checked="" type="checkbox"/> b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 279,131.
2a Form 990-EZ check here	<input type="checkbox"/> b Total revenue, if any (Form 990-EZ, line 9)
3a Form 1120-POL check here	<input type="checkbox"/> b Total tax (Form 1120-POL, line 22)
4a Form 990-PF check here	<input type="checkbox"/> b Tax based on investment income (Form 990-PF, Part VI, line 5)
5a Form 8868 check here	<input type="checkbox"/> b Balance due (Form 8868, line 3c)
6a Form 990-T check here	<input type="checkbox"/> b Total tax (Form 990-T, Part III, line 4)
7a Form 4720 check here	<input type="checkbox"/> b Total tax (Form 4720, Part III, line 1)

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____, and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only

I authorize BOURGEOIS BENNETT, L.L.C.

ERO firm name

to enter my PIN

70002

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Part III Certification and Authentication

Signature of officer or person subject to tax

Date

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

7208977005

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So