# **Forward Jefferson Corporation**

700 Churchill Parkway, Avondale, LA 70094

PH: (504) 875-3908 FAX: (504) 875-3923

# FORWARD JEFFERSON CORPORATION (FORJ)

October 30, 2014 8:30 A.M.

### **AGENDA**

- I. Unfinished and New Business Chairwoman, Lynda Nugent-Smith
  - Approval of Minutes for September 25, 2014
  - Approval of Forward Jefferson Corporation Revised 2013 Tax Form 990

## II. Adjournment

The meeting begins at 8:35 a.m. and will be held at the JEDCO Conference Center, 701-A Churchill Parkway, Avondale, LA 70094

In accordance with provisions of the Americans with disabilities Act Amendments Act of 2008, as amended, FORJ shall not discriminate against individuals with disabilities on the basis of disability in its services, programs or activities. If you require auxiliary aids or devices, or other reasonable accommodation under the ADA Amendments Act, please submit your request to the ADA Coordinator at lease forty-eight (48) hours in advance or as soon as practical. A seventy-two (72) hour advanced notice is required to request Certified ASL interpreters.

**ADA Coordinator for FORJ** – Scott Rojas, Director of Facilities and IT, 700 Churchill Parkway, Avondale, LA 70094 Telephone – (504)875-3908 Email – <a href="mailto:srojas@jedco.org">srojas@jedco.org</a>

# Forward Jefferson Corporation

700 Churchill Parkway, Avondale, LA 70094

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# FORWARD JEFFERSON CORPORATION (FORJ)

## September 25, 2014 8:30 A.M.

## **MINUTES**

Call to Order

8:30 a.m.

Attendance:

Greg Jordan, Steve LaChute, Dr. Vinicio Madrigal, Bill Peperone, Mike

Rongey, Stan Salathe

Staff:

Jerry Bologna, Lacey Bordelon, Cynthia Grows, Scott Rojas, Kelsey

Scram, Penny Weeks

Absences:

Joe Ewell, Mark Madderra, Lynda Nugent-Smith, Paul Rivera, Jim

Garvey

Attorney:

Reed Smith – Assistant Parish Attorney

Guests:

Amy Walters - LaPorte CPAs & Business Advisors

# I. Unfinished and New Business - Vice Chairman, Dr. Vinicio Madrigal

• Approval of Minutes for <u>August 28, 2014</u>
Steve LaChute motioned to approve the minutes as amended; seconded by Stan Salathe. The motion passed unanimously.

- Approval of Forward Jefferson Corporation 2013 Tax Form 990 This item was postponed to October 30, 2014.
- **II. Adjournment** Bill Peperone motioned to adjourn; seconded by Mike Rongey. The motion passed unanimously.

James	Garvey
FORJ	Secretary

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CLIENT'S COPY

# LAPORTE CPAS & BUSINESS ADVISORS 111 VETERANS MEMORIAL BLVD., SUITE 600 METAIRIE, LA 70005-4958

OCTOBER 16, 2014

FORWARD JEFFERSON CORPORATION 700 CHURCHILL PARKWAY AVONDALE, LA 70094

FORWARD JEFFERSON CORPORATION:

ENCLOSED IS THE ORGANIZATION'S 2013 EXEMPT ORGANIZATION RETURN.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990 RETURN:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THIS COPY INDEFINITELY.

SINCERELY,

LAPORTE CPAS & BUSINESS ADVISORS

## **TAX RETURN FILING INSTRUCTIONS**

FORM 990

## FOR THE YEAR ENDING

DECEMBER 31, 2013

	Bacamban 31, 2013
Prepared for	FORWARD JEFFERSON CORPORATION 700 CHURCHILL PARKWAY AVONDALE, LA 70094
Prepared by	LAPORTE, APAC 111 VETERANS MEMORIAL BLVD., SUITE 600 METAIRIE, LA 70005-4958
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.
	THE RESTRICT OF THE RESTRICT OF THE TREE.

## Form 8879-EO

# \*\*\*\*\* THIS IS NOT A FILEABLE COPY \*\*\*\*\* IRS e-file Signature Authorization for an Exempt Organization

-	 		
		_	

	1 or calcitudal year 2013, or liscal year beginning	,20	2013
Department of the Treasury	▶ Do not send to the IRS. Keep for your reco	ords,	2010
Internal Revenue Service	► Information about Form 8879-EO and its instructions is at we	ww.irs.anv/form8879en	
Name of exempt organization		Employer	identification number
E0244 22			
	RSON CORPORATION	20-0	334197
Name and title of officer		· · · · · · · · · · · · · · · · · · ·	
CYNTHIA GROWS			
CHAIRPERSON			
Part I Type of I	Return and Return Information (Whole Dollars Only)		
whichever is applicable, bit than 1 line in Part I.  1a Form 990 check here  2a Form 990-EZ check he  3a Form 1120-POL check  4a Form 990-PF check he  5a Form 8868 check here  Part II Declarati  Under penalties of perjury, electronic return and accor further declare that the amintermediate service provid (a) an acknowledgement of	b Total revenue, if any (Form 990-EZ, line 9) here b Total tax (Form 1120-POL, line 22)  b Tax based on investment income (Form 990-PF, I	form was blank, then leave II on the applicable line below line 12)  b 2b 3b Part VI, line 5)  examined a copy of the orga and belief, they are true, comon's electronic return. I conse	ine 1b, 2b, 3b, 4b, or 5b, 2. Do not complete more  -95, 774.  Inization's 2013 rect, and complete. I ent to allow my to receive from the IRS
1-888-353-4537 no later that processing of the electronic payment. I have selected a organization's consent to electronic payment. The consent to electronic payment are consent to electronic payment. The consent to electronic payment are consentrated by the consentration of th	ox only	contact the U.S. Treasury Filize the financial institutions is	nancial Agent at nvolved in the
X I authorize LAP	ORTE, APAC	to enter my	PIN 06341
	ERO firm name	to onto my	Enter five numbers, b
			do not enter all zeros
enter my PIN on the	In the organization's tax year 2013 electronically filed return. If I have inca a state agency(ies) regulating charities as part of the IRS Fed/State pro he return's disclosure consent screen. e organization, I will enter my PIN as my signature on the organization's	ogram, I also authorize the af	orementioned ERO to
molcated within th	ils return that a copy of the return is being filed with a state agency(les) er my PIN on the return's disclosure consent screen.	regulating charities as part	of the IRS Fed/State
Officer's signature	** THIS IS NOT A FILEABLE COPY ***	Date	
	on and Authentication		
	r six-digit electronic filing identification		
	do no	41070005 It enter all zeros	
I certify that the above nume confirm that I am submitting e-file Providers for Business	aric entry is my PIN, which is my signature on the 2013 electronically file this return in accordance with the requirements of <b>Pub. 4163,</b> Moderni Returns.	ed return for the organization zed e-File (MeF) Information	n indicated above. I for Authorized IRS
ERO's signature 🕨	[	Date >	
	ERO Must Retain This Form - See Instruc	tions	
	Do Not Submit This Form To the IRS Unless Reque	ested To Do So	

LHA For Paperwork Reduction Act Notice, see instructions. 323051 10-01-13

Form **8879-EO** (2013)

Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990. Open to Public Inspection

Δ	For t	he 2013 calendar year, or tax year beginning and ending	WW IIS GOV	MORMS90.	mopostion
_					
_	Check applica	IDIE;		Employer identif	ication number
Ļ	lchai	na dia dia dia dia dia dia dia dia dia di			
F	char	Doing Business As		20-0	334197
	Tern ated	700 CHURCHILL PARKWAY	suite E 7	felephone numbe 504-	er 875-3908
-	App	City or town, state or province, country, and ZIP or foreign postal code  AVONDALE, LA 70094		iross receipts \$	166,916.
	pene	F Name and address of principal officer:LYNDA NUGENT-SMITH	——  H(a)	ls this a group r	
		700 CHURCHILL PARKWAY, AVONDALE, LA 70094	1 H(b)	for subordinates	? Yes X No
1	Tax-e	xempt status: X 501(c)(3) 501(c)( ) ( (insert no.) 4947(a)(1) or	527		list. (see instructions)
		ite: ▶ WWW.JEDCO.ORG	H(c)	Group exemption	The Chica
		of organization: X Corporation Trust Association Other	Year of forn	nation: 2003 N	A State of legal domicile: LA
P	_	Summary			
Activities & Governance	1	AND DEVELOPMENT OF BUSINESS CONCERNS IN THE	JEFFE	THE ECON	OMIC GROWTH
Ë	2	Check this box  If the organization discontinued its operations or disposed of the continued its operations or disposed of the continued its operations.	more than	25% of its net as	sets
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	11
S G	4	Number of independent voting members of the governing body (Part VI, line 1b)	**********	4	11
es	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
Ž	6	Total number of volunteers (estimate if necessary)		6	11
Ct	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7в	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				rior Year	Current Year
ą	8	Contributions and grants (Part VIII, line 1h)		186,795.	0.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
Rev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-61,908.	-95,774.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		124,887.	-95,774.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits pald to or for members (Part IX, column (A), line 4)		0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Ē	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0 .	0.
Ä	b	Total fundraising expenses (Part IX, column (D), line 25)			
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		19,601.	0.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		19,601.	0.
Ces	19	Revenue less expenses. Subtract line 18 from line 12		105,286.	-95,774.
ance	20	Total access (Dark V. Kara d.C.)		g of Current Year	End of Year
ASS		Total assets (Part X, line 16) Total liabilities (Part X, line 26)	0,	257,947.	6,071,853.
n Set		Net assets or fund balances. Subtract line 21 from line 20	2,	021,595. 236,352.	3,931,275.
	rt II	Signature Block	4,	230,352.	2,140,578.
Unde	r pena	lities of perjury, I declare that I have examined this return, including accompanying schedules and sta	tamente ar	ad to the best of mu	knowledge and hellef # in
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has an	v knowledae.	Knowledge and belief, it is
		20.		1	
Sign	1	Signature of officer		Date	
Here	•	LYNDA NUGENT-SMITH, CHAIRPERSON			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date	Check	PTIN
Paid		AMY E. WALTERS, CPA, CCIF		if self-employed	P01078383
Prepa	- 0	Firm's name LAPORTE, APAC	_	Firm's EIN	72-1088864
Use (	Only	Firm's address 111 VETERANS MEMORIAL BLVD., SUITE	600		
		METAIRIE, LA 70005-4958		Phone no. (50	4)835-5522
May	the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No
3200	1 10-2	LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2013)

	m 990 (2013) FORWARD JEFFERSON CORPORATION	20-0334197	Page 2
	art III Statement of Program Service Accomplishments		
1	Check if Schedule O contains a response or note to any line in this Part III  Briefly describe the organization's mission:		
	TO ASSIST IN THE ECONOMIC GROWTH AND DEVELOPMENT OF BU	SINESS CONCER	NS
	IN THE JEFFERSON PARISH, LA AND THEREBY LESSEN THE BUR	DENS OF	
	GOVERNMENT.		
2	Did the organization undertake any significant program services during the year which were not listed on		
			[TE]
	the prior Form 990 or 990-EZ?  If "Yes,* describe these new services on Schedule O.	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	2	X No
	it "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	as measured by expenses	i.
	Section 50 (C)(3) and 50 (C)(4) organizations are required to report the amount of grants and allocations to of	hers, the total expenses,	and
	revenue, ir any, for each program service reported.		
70		enue \$	)
	FORWARD JEFFERSON CORPORATION AND THE RELATED GOVERNMEN JEFFERSON ECONOMIC DEVELOPMENT COMMISSION, ACQUIRED AND THE CHNOLOGY AND PHELIPPERSON FOR THE CHNOLOGY AND PHELIPPERSON	TAL ENTITY,	
	TECHNOLOGY AND BUSINESS PARK IN AVONDALE, LOUISIANA.	THE PROJECT W	) A
	NEW MARKETS TAX CREDIT TRANSACTION. FORWARD TEFFERSON OF	TODDODAMITON N	CERTIFIC
	AS A LEVERAGED LENDER TO THE INVESTMENT FUND PROVIDING	EQUITOR TO THE	CP.
	FROMECT. FORWARD JEFFERSON CORPORATION OWNS THE BITTED	INC AND TEXABLE	TIME TO
	TO SEFFERSON ECONOMIC DEVELOPMENT COMMISSION TO FURTHER	TITO MITCOTON	OF
	ASSISTING WITH ECONOMIC GROWTH AND DEVELOPMENT OF BUSIN	IESS.	
4b	(Code:) (Expenses \$ Including grants of \$) (Rever		
	(Rever	nue \$	)
4c	(Code:) (Expenses \$	uue \$	
	/ (never)	пе ф	
d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	94	
e	Total program service expenses		
วกกจ		Form 990	(2012)

# Form 990 (2013) FORWARD JEFF. Part IV Checklist of Required Schedules

1	Is the organization described in section 504(a)(0) as 40.47(a)(4) / H		Yes	No
	If "Yes " complete Polyadyla A		x	
2	Is the organization year land to some late School of E. Oche del a Co.	1	┢	х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to capalidates for		-	A
4	public office? If "Yes," complete Schedule C, Part I	3		х
•	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection the tax year? If "Yes," complete Schedule C, Part II	+		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? If "Yes," complete Schedule C, Part III	5		Х
6	and organization maintain any donor advised funds of any similar funds of accounts for which donors have the right to			
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	_	Х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	١.,		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete		-	
	Schedule D, Part III	8	x	
9	Big the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	1		
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		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? If "Yes," complete Schedule D,			
	Part VI	11a	x	
t	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	big the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			_
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	1		v
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d	-	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	$\dashv$	22
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X	111		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		<u>x</u>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	$\mathbf{x}$	
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	*	x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	1 1		
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b	_	<u>x</u>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	45		X
6	big the digenization report on Part IA, Column IA), line 3, more than \$5,000 of addresses grants or other accietance to	15	-	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IV			
А	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
0	bid the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII lines			**
9	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	_	X
	complete Schedule G, Part III	19		X
0a	the organization operate one of more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form §	90 (20	013)

Form 990 (2013) FORWARD JEFFERSON
Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), lier 3 / 1" view, "complete Schedule / Parts and ii!  22 Did the organization report more than \$5,000 of grants or other assistance to Individuals in the United States on Part DX, column (A), lier 2 / 1" view, "complete Schedule / Parts and ii!  23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and foremer officers, directors, trustees, key employees, and highest compensation of the organization accurrent and foremer officers, directors, trustees, key employees, and highest compensation of the organization accurrent and foremer officers, directors, trustees, key employees, and highest compensation of the organization answer trust was issued after Docember 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule K. If "No! go to line 25a.  24a Did the organization have a tax-exempt bond suce with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after Docember 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule K. If "No! go to line 25a.  25b Did the organization have a tax-exempt bonds beyond a temporary period exception?  25c Did the organization scale as no no behalf of Issuer for bonds outstanding at any time during the year?  25d Section 501(x)3) and 501(x)4 organizations. On behalf of Issuer for bonds outstanding at any time during the year?  25d Section 501(x)3) and 501(x)4 organizations. On behalf of Issuer for bonds outstanding at any time during the year?  25d Section 501(x)3) and 501(x)4 organizations.  25d Section 501(x)3) and 501(x)44 organizations.  25d Section 501(x)3) and 501(x)44 organizations.  25d Section 501(x)44 organizations are as no no behalf organization and accuration and the section of the secti				Yes	No
22 Dit the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part Dit, column (A), the 21 if "se, complete Schedule, Parts I and III.  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 officiens, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J  24 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  25a Did the organization maintain an escrow account other than a refunding ascrow at any time during the year to defease any tax-evempt bonds.  25b Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year?  26c Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year?  27d Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year?  28d Sections 50 (1)(3) and 50 (1)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of buffly organizations. Did the organization engage 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 960 or 960-827 If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, titustee, key employee, substantial contribution or an organization provide a grant or other assistance to an officer, director, titustee, key employee, substantial contribution or an organization provide a grant or other assistance to an officer, director, titustee, or experience thereof, a grant assistance or an organization provide schedule L, Part IV Instructions	21	COVERNMENT OF PORT IV COLUMN (A) line 12 If IVec II complete Cohertule I Ports I a III			
column (A), line 2° If "Yes," complete Schedule I, Parts I and III 23 Did the organization area "Yes" to Part IVI, 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 I, Schedule I, Part IVI line 10 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 I, IVI NO", go to time 25a 24b	22		. 21	-	┝
Late the organization answer "res" or Part VII, Section A, line 3, 4, or 5 about compensation of the organization scurent and former officers, directors, trustees, key employees, and highest compensated employees? If "res," complete Schedule I, If "No", go to line 25a  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 I, If "No", go to line 25a  b Did the organization maintain an secrow account other than a refunding secrow at any time during the year of the compensation maintain an secrow account other than a refunding secrow at any time during the year of the organization and the post of the organization and the post of the organization and the year of the organization was returned that the transaction which a disqualified person during the year?  25b Section 501(3) and 501(4) organizations. Did the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction was not been reported on any of the organization with a disqualified persons? If so, complete Schedule L, Part II  26b Id the organization report any amount on Part X, line 5, 6, or 22 for receivables from or psyables to any ourrent or former officers, citiestors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part III  27c Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, and the part III and the part III and the part III and I		column (A), line 27 if "Yes," complete Schedule I, Parts I and III	22		x
and former officers, directors, functess, key employees, and highest compensated employees? If "Yes," complete Schedule J 244 Did the organization have a fax-exampt 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 224 bitrough 24d and complete Schedule K. If "No"; go to hise 25a 24a    Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 24b 24b 24b 24b 25b 24b 25b 25b 25b 25b 25b 25b 25b 25b 25b 25	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			$\vdash$
246 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 him 25a 24b 12d 24b 12d 24d 24d 24d 24d 24d 24d 24d 24d 24d 2		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			,
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Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of 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  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  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197  Note. All Form 990 filers are required to complete Schedule O  38 X	20	Did the exercise or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
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If "Yes," complete Schedule N, Part I  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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  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  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 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  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	30	contributions? If "Ves " complete Schools A4			
If "Yes," complete Schedule N, Part I  31	31	Did the organization liquidate terminate or discolve and seems energiage.	30		<u> </u>
Schedule N, Part II  32 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  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  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X	•	If "Yes." complete Schedule N. Part I			v
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33		Schedule N, Part II	20		¥
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I   33	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	-	
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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)?  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  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 V!  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	-		
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 Y  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X	350	Did the organization have a controlled antibusition the massive of autiliar Edek Massa		X	
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36 X  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X	~	within the meaning of section 512/b)(13)2 /f "Ves." complete Schedule R. Port V. line 3.			
If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X	36	Section 501(c)(3) organizations. Did the organization make any transfers to an example page should be selected as a second transfer to a se	35b	-	
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X		If "Yes," complete Schedule R, Part V, line 2	,,		¥
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 X  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	-	
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X		and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R. Part VI	37		x
Note. All Form 990 filers are required to complete Schedule O	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11h and 192	"	-	
		Note. All Form 990 filers are required to complete Schedule O	38	$\mathbf{x}$	
					20131

# Form 990 (2013) FORWARD JEFFERSON CORPORATION 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>1</b> a	Enter the number reported in Box 3 of Form 1096. Enter -0- If not applicable	1a	1 (		1.55	1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		5		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	reporta	able gaming	1		
	(gambling) winnings to prize winners?			1c		
<b>2</b> a	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				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ırns?	200.00240000000000000000000000000000000	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	is) .				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
þ	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
<b>5</b> a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
D	Uld any taxable party notify the organization that it was or is a party to a prohibited tay shelter trans-	action?		5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	boes the organization have annual gross receipts that are normally greater than \$100,000, and did to	he ora:	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu-	tions o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a		X
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?		***************	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?	owan.		7c		X
	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 of	ontrac	t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?	***************************************	71		Х
g	If the organization received a contribution of qualified Intellectual property, did the organization file Form	orm 88	99 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fil	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di	d the si	pporting			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
a 5	Did the organization make any taxable distributions under section 4966?		***************************************	9a		
0	Section 504/4/7) association of a donor, donor advisor, or related person?		***************************************	9b		
_	Section 50 (c)(7) organizations. Enter:	2 1				
h	Gross receipts, included an Ferm 200 Rest VIII, line 12			0.0		
1	Section 501(a)(12) organizations. Enter	10b				
		1				
b	Gross income from other sources (Do not not amounts due or paid to other sources and the other sources (Do not not amounts due or paid to other sources and the other sources are the other sources ar	11a				
	or the calendar year ending with or within the year covered by this return.  as tone is reported on line 2a, did the organization file all required federal employment tax returns?  2b  If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  are organization have unrelated business gross income of \$1,000 or more during the year?  3a  are greater than 250, you may be required an explanation in Schedule O  3b  the during the calendar year, did the organization have an interest in, or a signature or other authority over, a lad account in a foreign country (such as a bank account, securities account, or other financial account)?  4a la account in a foreign country (such as a bank account, securities account, or other financial account)?  4a la account in a foreign country (such as a bank account, securities account, or other financial account)?  4a la account in a foreign country (such as a bank account, securities account, or other financial account)?  4a la account in a foreign country (such as a bank account, securities account, or other financial account)?  4a la account in a foreign country (such as a bank account, securities account, or other financial account)?  4a la account in a foreign country (such as a bank account, securities account, or other financial accountry).  4a la account in a foreign country (such as a bank account, securities accountry).  4a la account in a foreign country (such as a bank account, securities accountry or accountry (such the organization solid).  5a la account in a foreign country (such as a bank account, securities accountry).  5b chart (such as a party to a prohibition and party) for goods and services provided to the payor?  7a lidd the organization notify the donor of the value of the goods or services provided?  7b organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c o					
2a	Section 4947/aV1) non-exempt charitable trusts is the organization filling Form 200 in line of Form	110				
				128	_	
3	Section 501(c)(29) qualified nonprofit health insurance issuers	120				
а	Is the organization licensed to issue qualified health plans in more than one state?	the calendar year ending with or within the year covered by this return.  one is reported on line 2a, did the organization file all required federal employment tax returns?  the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  ganization have unrolated business gross income of \$1,000 or more during the year?  3a substitution have unrolated business gross income of \$1,000 or more during the year?  3b busit filed a Form 990-17 for this year? If 'No'. 'Iou file 3b, provide an explanation in Schedule O  ab during the calendary year, did the organization have an interest in, or a signature or other authority over, a cocount in a foreign country (such as a bank account, securities account, or other financial account)?  4a business of the foreign country; Iou file 1b business of the foreign country (such as a bank account, a securities account, or other financial Accounts. granization are yet to a prohibited tax shelter transaction at any time during the tax year?  5a consider filing requirements for Form TDF 90.22.1, Report of Foreign Bank and Financial Accounts. granization start to a prohibited tax shelter transaction?  5b consider that year of the organization file Form 8886-17?  5c progranization frave annual gross receipts that are normally greater than \$100,000, and did the organization solicit butions that were not tax deductible accharitable contributions?  6c progranization that were not tax deductible contributions under section 170(c).  6d butions that were not tax deductible contributions under section 170(c).  6d the organization include with every solicitation an express statement that such contributions or gifts ax deductible?  6d the organization notify the donor of the value of the goods or services provided?  6d the organization on office the payment in excess of \$55 made partly as a contribution and partly for goods and services provided to the payor?  7d the organization on the payment in excess of \$55 made partly as a contribution of gross payment in				
	Note. See the instructions for additional information the organization must report on Schedule O		***************************************	138	-	_
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	13h				
C	Enter the amount of reserves on hand					
4a	Did the organization receive any neumonts for independent to price and it and the state of the s			142	-	X
		O	***************************************		-	
	, provide an organization in contiduite	*****		_	990 /	20131

Form 990 (2013) FORWARD JEFFERSON CORPORATION 20-0334197 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below 7b bel Page 6 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

_	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction A. Governing Body and Management			-
			Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year	1	1	
	If there are material differences in voting rights among members of the governing body, or if the governing	7		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
	b Enter the number of voting members included in line 1a, above, who are independent 1b1	1		
2		7	4	
	officer, director, trustee, or key employee?	1 2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	2	1	-
	of officers, directors, or trustees, or key employees to a management company or other person?	_	x	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3	+^	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4	-	X
6	Did the organization have members or stockholders?		-	
78	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6	-	Х
	more members of the governing body?	l_		.,
Ł	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a	₩	X
		l	1 1	.,
8	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b	_	_X_
a	The governing body?			
b	F	8a	X	
9	the desiration of the governing body i	8b	X	
•	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Sal	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		_X_
000	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
40-	Did the country is a second set of the second set of the second s		Yes	No
iva	Did the organization have local chapters, branches, or affiliates?	10a		X
D	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?	10b		
118	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	and the first to an analysis and the district to display the first could dive like to collinicity.	12b	X	_
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	bid trie organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	_		_
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	-	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	.50		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	160		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a	-	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	405		
Sec	tion C. Disclosure	16b	_	
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 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are			
	for public inspection. Indicate how you made these available. Check all that apply.	vallab	ie	
	Own website Another's website W Upon request Other (explain in Schedule O)			
19	Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an statements available to the public during the tax year.	d finar	cial	
	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza ${\tt CYNTHIA}~{\tt GROWS}~-~504-875-3908$	ion: 🕨	2	
	EAA GUILLIAN COLORS			
00000				
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## FORWARD JEFFERSON CORPORATION

20-0334197

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
   Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organize  (A)  Name and Title	(B) Average hours per week	(d	Position (do not check more than obox, unless person is both officer and a director/trust			n than Is bo	one th an	( <b>D)</b> Reportable compensation from	(E) Reportable compensation	(F) Estimated amount of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	from related organizations (W·2/1099-MISC)	other compensation from the organization and related organizations
(1) LYNDA NUGENT-SMITH CHAIRPERSON	0.60	x		x	4100			0.	0.	0.
(2) DR. VINICIO MADRIGAL	0.60	Т		3	P		libe	Ü.	0.	
VICE CHAIRMAN		X		X	6	d	174	0.	0.	0.
(3) BILL PEPERONE	0.60		191	6	7					
TREASURER (4) JAMES GARVEY	0.60	X	7	X	100	20		0.	0.	0 .
SECRETARY	0.60	x	bd	х	74					
(5) JOSEPH EWELL	0.60	Δ	100	_	_		-	0.	0.	0.
BOARD MEMBER	48	x	b.	9.				0.	0.	0 =
(6) GREG JORDAN	0.60	7					$\neg$		0.	0.
BOARD MEMBER	30	X					- 1	0.	0.	0.
(7) MIKE RONGEY BOARD MEMBER	0.60	W.								
(8) PAUL RIVERA	0.60	Х	_	$\dashv$	_	_	-	0.	0.	0.
BOARD MEMBER		x		- 1				0.		
(9) STANTON SALATHE	0.60	-	$\dashv$	$\dashv$		$\dashv$	$\dashv$	0.	0.	0.
BOARD MEMBER		x		- 1				0.	0.	0.
(10) JOHN TOBLER	0.60		$\neg$	$\neg$	$\neg$	$\neg$	$\neg$			0.
BOARD MEMBER		X						0.	0.	0.
(11) MANUEL BLANCO BOARD MEMBER	0.20					П	$\neg$			
BOARD MEMBER		X	$\dashv$	$\dashv$	$\dashv$	$\dashv$	+	0.	0.	0.
				4		_				
		7	1	1	7	+	+			
		$\dashv$	$\dashv$	+	$\dashv$	+	+			
		$\perp$	$\perp$		_					
		+	+		+	+	+			

332007 10-29-13

Form 990 (2013)

FORWARD JEFFERSON CORPORATION

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Form 990 (2013)

-	_	_	Check if Schedule O cor	ntains a resp	onse or note to any li	ne in this Part VIII	*************************		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue exclude from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	1 a		1	а				312-314
SP		b	1101110111	1					
A, A	1	C	10.000041044		C				
200		d	Related organizations	10					
SE		е	Signature granto (Southing)		e				1
ig ja	1	1	All other contributions, gifts, gra						
問	l	_	similar amounts not included abo						
55		9	Noncash contributions included in line						
<u></u>	-	n	Total. Add lines 1a-1f						
ø	١,	a a			Business Code				
Program Service Revenue	~	b							
<u>8</u> 2		c							
eve eve		d							-
P.G.		e				- 4			
4		f	All other program service reve	enue					<del> </del>
		g			<b>&gt;</b>	1	-		1
	3		Investment income (including	dividends, i	nterest, and	All I	166		
			other similar amounts)			16. 10			
	4		Income from investment of ta	x-exempt bo	nd proceeds	1000			<b> </b>
	5		Royalties	· ·	<b>&gt;</b>	(1)			
- 1				(i) Real	(il) Personal				
- 1	6	<b>a</b>	Gross rents	166,91	.6.				
- 1		b	Less: rental expenses	262,69	0.				
			Rental income or (loss)	-95,77					
- 1			Net rental income or (loss)		<b>&gt;</b>	-95,774.	-95,774.		
- 1	•		Gross amount from sales of	(i) Securiti	es (ii) Other				
- 1			assets other than inventory Less: cost or other basis		A Profile of				
- 1			and sales expenses		46. 19				
- 1		c	Gain or (loss)		- NO. AT				
		d	Net gain or (loss)		<b>•</b>				
a	8	a	Gross Income from fundraising	a events (no					
		i	including \$		`				
Revenue			contributions reported on line		1 1				
2			Part IV, line 18		a				
<b>§</b>	ı	ы	Less: direct expenses		ь				Y
-	•	c i	Net income or (loss) from fundi	raising even	ts				
- 1	9 ;	а (	Gross income from gaming act	tivities. See					
- 1		F	Part IV, line 19		a		110		
	ŀ	) L	ess: direct expenses		b				
		: 1	Net income or (loss) from gaml	ng activities					
- [1	O E		Gross sales of inventory, less r						
	Ŋ.		and allowances		a				
			ess: cost of goods sold						
-		1	Net income or (loss) from sales						
1	1 a	_	Miscellaneous Revenue		Business Code			Y	
- ['	b	-							
		17							
	d	_	Il other revenue						
	e	T	otal. Add lines 11a-11d	***************************************					
1	-	Т	otal revenue. See instructions.		······ }	-95,774.	-05 774		
2009 -29-13	_		wandida			33,114.	-95,774	0.	0 . Form <b>990</b> (2013)

Form 990 (2013) FORWARD JEFFERSON CORPORATION
Part IX Statement of Functional Expenses

Do	Check if Schedule O contains a respond not include amounts reported on lines 6b,	(A)	(B)	(C)	/6V
7b	, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
6	trustees, and key employees Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	nercone described in costion 4050/5/(0)/DV				
7	Other salaries and wages				
8	Other salaries and wages Pension plan accruals and contributions (include		- 4		
-	section 401(k) and 403(b) employer contributions		100		
9	Other employee benefits				
0	Payroll taxes				
1	Fees for services (non-employees):		AD		
а	Management		All the last		
b	Legal		900		
C	Accounting	400	District Name		
d	Lobbying		The same		
е	Professional fundraising services. See Part IV, line 17	279h	5-607		
f	Investment management fees	4	107		
g	Other. (If line 11g amount exceeds 10% of line 25,	46. JFS	p*		
	column (A) amount, list line 11g expenses on Sch O.)	4000			
2	Advertising and promotion	ATTENDA TO			
3	Office expenses	OF VA			
1	Information technology	976s. 107			
5	Royalties	700.07			
3	Occupancy	100			
	Travel				
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
)	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
1	Depreciation, depletion, and amortization				
	Insurance				
-	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а .					
ь					
C _					
d _					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	0.	0.	0.	0
	oint costs. Complete this line only If the organization				0
	eported in column (B) joint costs from a combined				
e	ducational campaign and fundraising solicitation.			1	
С	heck here II following SOP 98-2 (ASC 958-720)		1		

		Check if Schedule O contains a response or note to any line in this Part X	(A)	T	
			Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	30,961	1	41,219
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	296,750	4	309,199
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
	1	Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	1	employers and sponsoring organizations of section 501(c)(9) voluntary			
Assets	١.	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Ass	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	51,696.	9	1,819
	l loa	Land, buildings, and equipment: cost or other			
	۱.	basis. Complete Part VI of Schedule D Less: accumulated depreciation  10a 6,141,870.  422,254.	5 000 540		
	111	Less: accumulated depreciation 10b 422,254.	5,878,540.	_	5,719,616
	12	Investments - publicly traded securities	VIII.	11	
	13	Investments - other securities. See Part IV, line 11		12	
	14	Investments - program-related. See Part IV, line 11		13	
	15	Intangible assets Other assets See Part IV line 11		14	
	16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34)	6 257 047	15	6 071 055
	17	Accounts payable and accrued expenses	6,257,947. 128,471.	_	6,071,853.
	18	Grants payable	120,4/1.	17	109,400.
	19	Deferred revenue		18	
	20	Tax-exempt bond liabilities		19	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
?	22	Loans and other payables to current and former officers, directors, trustees,		21	
		key employees, highest compensated employees, and disqualified persons.			
		Complete Part II of Schedule L		22	
1	23	Secured mortgages and notes payable to unrelated third parties	3,893,124.	23	3,821,875.
	24	Unsecured notes and loans payable to unrelated third parties	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	24	0,021,015.
	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			
- 1		Schedule D		25	
4	26	Total liabilities. Add lines 17 through 25	4,021,595.	26	3,931,275.
- 1		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
		complete lines 27 through 29, and lines 33 and 34.			
- 1	27	Unrestricted net assets	2,236,352.	27	2,140,578.
-	28	Temporarily restricted net assets		28	
-		Permanently restricted net assets		29	
-		Organizations that do not follow SFAS 117 (ASC 958), check here			
	20	and complete lines 30 through 34.			
	30 31	Capital stock or trust principal, or current funds		30	
	32	Paid-in or capital surplus, or land, building, or equipment fund		31	
	33	Retained earnings, endowment, accumulated income, or other funds	0 006 056	32	
	34	Total liabilities and not accets/k and beleases	2,236,352.	33	2,140,578.
	J-1	Total liabilities and net assets/fund balances	6,257,947.	34	6,071,853. Form <b>990</b> (2013)

	m 990 (2013) FORWARD JEFFERSON CORPORATION	20-0	334197	7 P	age 12
P	art XI Reconciliation of Net Assets				M.
	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)		_ q	95.'	774
2	Total expenses (must equal Part IX, column (A), line 25)	2			0
3	Revenue less expenses. Subtract line 2 from line 1	3	_ 0	5.	774
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,23		
5	Net unrealized gains (losses) on investments	5	-,		
6	Donated services and use of facilities	6		_	
7	Investment expenses	7			
8	Prior period adjustments	8			_
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,14	0.5	578.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		12427021100000	0.0000000	X
					No
1	Accounting method used to prepare the Form 990: Cash X Accrual 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?		2a		l x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	1
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis.			
	consolidated basis, or both:	,			
	Separate basis X Consolidated basis 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 th	e audit.			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	adule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	nale Audit			
	Act and OMB Circular A-133?		За		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Зь		
	The state of the s			990	(2013)

## 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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public inspection

Name of	the organiza								Employer	r identifica	tion n	umbe
Dont		FORWA	RD JEFFERSON	CORPO	RATIO	N			2	20-033		
Part I	Heason	n for Public Cl	narity Status (All organ	nizations m	nust compl	ete this pa	art.) See in	structions	).			
1 2 3 4 4	A church, o A school de A hospital e	t a private foundat convention of churce escribed in section or a cooperative ho esearch organizati	ion because it is: (For line ches, or association of ch n 170(b)(1)(A)(ii). (Attach s espital service organization on operated in conjunctio	s 1 through urches des Schedule E n describe	h 11, chec scribed in s E.) d in <b>sectio</b>	k only one section 17 n 170(b)(	box.) 70(b)(1)(A) 1)(A)(iii).	(i).		the hospita	al's nar	пе,
5 🗌	An organiza	ation operated for t	the benefit of a college or	university	owned or a	perated b	ov a gover	nmental u	nit describ	ned in	_	
6	A federal, so An organiza section 170	'0(b)(1)(A)(iv). (Con tate, or local gover atlon that normally D(b)(1)(A)(vi). (Com	nplete Part II.) nment or governmental u receives a substantial par	nit describ t of its sup	ed in <b>secti</b> oport from (	on 170(b)	(1)(A)(v).				cribed	in
9 <u> </u>	An organiza activities rel income and	ition that nomally i lated to its exempt	receives: (1) more than 33 functions - subject to cer s taxable income (less se	3 1/3% of it tain excep	ts support tions, and	(2) no moi	re than 33	1/3% of it	ts support	from aross	inves	tment
10     11     e     f	An organization or public describes the a Type By checking foundation or lift the organization porting of the organization or	tion organized and ly supported organ to type of supportin this box, I certify to nanagers and othe station received a worganization, check	that the organization is no or than one or more public written determination from	the benefit tion 509(a) blete lines <sup>1</sup> Type III - Fu of controller by support the IRS th	t of, to perf (1) or secti 11e throug unctionally d directly o ed organiz nat it is a Ty	orm the function 509(a), the first t	unctions of (2). See se d y by one of scribed in sell, or Typ	f, or to call ction 509 d Ty or more dissection 50	(a)(3). Che pe III - Nor squalified <sub>I</sub> 99(a)(1) or :	eck the box n-functional	that ly integ	grated
_	(i) A perso	on who directly or i	ndirectly controls, either a	uly girt or c	ontnoutio	n from any	of the fol	lowing per	rsons?			
	the gov	erning body of the	supported organization?	anome or tog	Jenner with	persons	aescribea	in (ii) and	(III) below,	44.00	Yes	No
	(ii) A family	member of a pers	on described in (i) above	7					*****	11g(i)	-	
	(iii) A 35%	controlled entity of	a person described in (i)	or (ii) abov			************			11g(ii)	-	
h	Provide the f	ollowing information	on about the supported or	raanization	(e)					11g(iii)		_
(i) Name o	of supported nization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is the (in col. (i) ii	organization isted in your document?	organiza	u notify the tion in col. r support?	(vi) l: organizati (i) organiz U.S	s the on in col. eed in the 5.?	(vii) Amount sup		ietary
												_
otal												_

332021 09-25-13

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990 EZ) 2013 FORWARD JEFFERSON CORPORATION 20-03341

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 falls to qualify under the tests listed below, please complete Part III.)

	anderver (and in a land						
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not	053 050	1055001			1	
	include any "unusual grants.")	253,258.	1267201.	583,479.	186,795		2290733
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to			) l			1
2	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to		1				
4	the organization without charge	252 250	404500				
	Total. Add lines 1 through 3	253,258.	1267201.	583,479.	186,795.		2290733.
3	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included						1
	on line 1 that exceeds 2% of the			l'			1
	amount shown on line 11,						1
	column (f)						
R	column (f)  Public support. Subtract line 5 from line 4.						
Se	etion B. Total Support			200 000			2290733.
_	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(-1) 0040		
7	Amounts from line 4	253,258.	1267201	583,479.	(d) 2012 186, 795.	(e) 2013	(f) Total
8	Gross income from interest,	,	120/201	303,473.	100,795.		2290733.
	dividends, payments received on	1	16	Then is			
	securities loans, rents, royalties	1	2000	107			1
	and income from similar sources	1,539.	22,802.	1,415.			05 556
9	Net income from unrelated business	=/5551	22,002.	1,213.			25,756.
	activities, whether or not the	- 1	1				1
	business is regularly carried on	-6	Dina. Tillia	1			
10	Other income. Do not include gain	497	TALL				
	or loss from the sale of capital	400	187				
	assets (Explain in Part IV.)	-	30,000.				20.000
11	Total support. Add lines 7 through 10		30,0001				30,000.
	Gross receipts from related activities, e	tc. (see Instruction	ne)				2346489.
13	First five years. If the Form 990 is for the	he organization's	first second third	fourth or fifth to		12	557,457.
	organization, check this box and stop h	nere	mot, decoria, triira	, louitii, or illiii tax	c year as a section	1501(c)(3)	. —
sec	tion C. Computation of Public	Support Per	centage	*************************			
14	Public support percentage for 2013 (line	e 6, column (f) div	ided by line 11, co	olumn (f))		14	97.62 %
10	rubiic support percentage from 2012 S	Schedule A. Part II	. line 14			45	07 62
· va ·	o more support test - 20 is. If the org	janization did not	check the box on	line 13, and line 14	4 is 33 1/3% or m	ore, check this bo	ox and
,	stop here. The organization qualifies as	a publicly suppor	rted organization				X
D;	33 1/3% support test - 2012. If the org	anization did not	check a box on lin	ie 13 or 16a and li	no 15 in 22 1/00/		
•	and stop nere. The organization qualifie	es as a publicly su	pported organizat	ion			
	i and an administration feat -	ZO IS. II the organ	iization did not ch	eck a box on line 1	13 16a or 16b a	nd line 1/1 is 1/10/	Or Proto
è	ind if the organization meets the "facts-	-and-circumstance	es" test, check this	s box and ston ho	re Evoloio in Bost	M bow the serve	-141
•	Heers the Hacts-and-Circumstances, fe	st. The organization	on qualifies as a pi	ublicly supported a	organization		
_	- 12010-dila-oli callistalices fést	20 12. II the organ	nization did not ch	eck a box on line 1	13 16a 16b or 17	a and line 15 in	100/ 04
٠,	note, and it the organization meets the	Tacts-and-circum	stances" test, che	ick this hav and et	on hore. Evaluin I	- Dad N/L	
	inganization meets the fracts-and-circum	nstances" test. Th	ne organization qu	alifies as a publick	supported organ	ization	
8 F	Private foundation. If the organization of	did not check a bo	x on line 13, 16a,	16b, 17a, or 17b,	check this box an	d see instruction	s
							or 990-EZ) 2013

# Schedule A (Form 990 or 990-EZ) 2013 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or If the organization failed to qualify under Part II. If the organization fails to

Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not					1	(i) Fotor
Include any "unusual grants.")						1
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 bus- iness under section 513						
Tax revenues levied for the organ- lzation'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			A			
6 Total. Add lines 1 through 5			4	Dis.		
7a Amounts included on lines 1, 2, and			All a	7		
3 received from disqualified persons			45.4			
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		(1)	A STATE OF THE STA			
c Add lines 7a and 7b		- 4	M		-	
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support		All There	W.			
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(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	1					
b Unrelated business taxable income	- 4	5.0				
(less section 511 taxes) from businesses acquired after June 30, 1975		effs.				
Net income from unrelated business activities not included in line 10b, whether or not the business is						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the	organization's	first, second, third	I, fourth, or fifth tax	year as a sectio	on 501(c)(3) organiza	etion.
check this box and stop here	******************	********************				
section C. Computation of Public	Support Per	centage				
Public support percentage for 2013 (line	8, column (f) div	vided by line 13, c	olumn (f))		15	9
16 Public support percentage from 2012 Sc Section D. Computation of Investn	hedule A, Part I	II, line 15			16	9
17 Investment income percentage for 2013	ling 10s solve	Percentage	40 1 (0)			
	,ime ruc, colum 2 Schedule A. E	n (1) alvided by iln: Part III, line 17	9 13, column (f))		17	9
8 Investment income percentage from 201	- Consulte A, F	a. III, III 17	n line 14 and line 4	5 ic mare the -	18	7:
18 Investment income percentage from 201;	anization did no	If Check the hav a			//496 And line 1	10 000
<ul><li>Investment income percentage from 2013</li><li>IPs 33 1/3% support tests - 2013. If the org</li></ul>	anization did no	organization qualif	ies as a nublicly ou	onorted ergent	otion	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Investment income percentage from 201: 19a 33 1/3% support tests - 2013. If the org more than 33 1/3%, check this box and a	anization did no stop here. The	organization qualif	ies as a publicly su	pported organiz	ation	
<ul><li>Investment income percentage from 2013</li><li>IPs 33 1/3% support tests - 2013. If the org</li></ul>	anization did no stop here. The o anization did no	organization qualif ot check a box on l	ies as a publicly su ine 14 or line 19a. a	pported organiz and line 16 is mo	ation	<b>&gt;</b>

Part IV   Com 9	90 or 990-EZ) 2013	ORWARD JEI	FFERSON CORP	DRATION	20-0334197 Page 4
		THE PARTY OF THE P	explanations required by atlon. (See instructions).	(FAILII, IIDA III) PART	July 17a or 17b; and Part III, line 12.
		y accuration and the	ation. (Obe instructions).		
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## SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/lipm/990">www.irs.gov/lipm/990</a>.

OMB No. 1545-0047 Open to Public Inspection

Employer Identification number

Name of the organization

FORWARD JEFFERSON CORPORATION 20-0334197 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year ..... Aggregate contributions to (during year) 2 Aggregate grants from (during year) 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? 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? No Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure 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. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 20 d Number of conservation easements included in (c) acquired after 8/17/06, 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 🛌 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? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(li)? 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" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (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 SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide

a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Sch	edule D (Form 990) 2013 FORWARI	) JEFFERSON	CORPORA	CION			20-0	3341	97	Page
Fa	rt III   Organizations Maintaining	Collections of A	rt, Historical	Treasures	or Ot	her Simil	ar Acc	ets/con	tinuoc	4
3	Using the organization's acquisition, acces	sion, and other recor	ds, check any of t	he following t	nat are a	significant	use of its	s collect	ion Ite	ms
	( <u>check all that apply):</u>					_				
a	X Public exhibition		d ∐∐ Loan ore	xchange prog	rams					
b	Scholarly research		Other_							
C	Preservation for future generations		3							
4	Provide a description of the organization's	collections and expla	in how they furthe	r the organiza	tion's ex	empt purp	ose in Pa	rt XIII.		
5	During the year, did the organization solicit	or receive donations	of art, historical tr	easures, or of	her simil	ar pecoto				
D-	to be sold to raise funds rather than to be n	naintained as part of	the organization's	collection?			[	Yes		No
	reported an amount on Form 990, Pa	<b>ngements.</b> Compl art X, line 21.	ete if the organiza	tion answered	i "Yes" t	o Form 990	, Part IV,	line 9, c	r	
1a	Is the organization an agent, trustee, custoo	dan or other intermed	diary for contribut	ons or other a	issets no	at included		_		
ь	on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII	and complete the fe	llowing table.			******	(84941) (4	_ Yes		⊥ No
	and an analysis of the All	and complete the ic	mowing table:							
C	Beginning balance					-		Amou	nt	
d	Beginning balance Additions during the year	***************************************	••••••			1c				
е	Additions during the year Distributions during the year	**********************	*************			1d				
f	Ending balance		***************************************	XXXXXX		1e				_
28	Did the organization include an amount on F	orm 990 Part X line	212		********	1f		1	_	1
b	If "Yes," explain the arrangement in Part XIII	. Check here if the ex	colanation has bee	n provided in	Dort VIII			Yes	H	No
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to F	orm 990. Par	IV line	10	<u> </u>	************		
		(a) Current year	(b) Prior year				aare hack	(e) Fou	FUARY	haale
1a	Beginning of year balance		AR A	(6) 1 110 700	ITO DEOK	(d) Throb y	COI O DOCK	(e) 100	years	Dack
b	Contributions		No.							
C	Net investment earnings, gains, and losses		Alexander V	0 1-						_
	Grants or scholarships		W. State							
	Other expenditures for facilities		70.77	-						
	and programs	.25	- ADS.							
f.	Administrative expenses	AFF	The W							
g	End of year balance	425.	P-104	1				-		_
2	Provide the estimated percentage of the curr	ent vear end halance	/line 1g. column	(a)) hold so:						
а	Board designated or quasi-endowment	on your one buildre	%	(a)) Heid as:						
b	Permanent endowment	%								
	Temporarily restricted endowment									
	The percentages in lines 2a, 2b, and 2c shou	ld equal 100%								
3a /	Are there endowment funds not in the posse	ssion of the organiza	tion that are hold	and administs		la = =====!==				
į	by:	-o.o. o. a.o o.ga.nea	aon arar are nera	and administr	HOU IOT E	ne organiza	ation	ſ		200
(	i) unrelated organizations							- m	Yes	No
٠,	TO TOTAL OF GRANDERS							3a(i)	_	
bΙ	f "Yes" to 3a(ii), are the related organizations	listed as required or	Schedule R2		**********		*********	3a(ii)		
-T 1	bescribe in Part Alli the intended uses of the	organization's endov	vment funds	***************************************	*********	************	***************************************	3b		_
Part	VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	"Yes" to Form 990,	Part IV, line 11a, 9	See Form 990	Part X	line 10				
	Description of property	(a) Cost or oth		t or other		cumulated		(d) Book	cvalue	
		basis (investme		(other)		preciation		12, 200	. valut	•
1a L					1174	4	Section 1			_
b E	Buildings		6,14	1,870.	4	122,25	4.	5,719	,6	16.
c L	easehold improvements	,						A. A.		
d E	quipment									
e C	Other									
otal. /	Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part X	, column (B), line	10(c).)			<b>•</b> !	719	,6	16.
						S.	chedule			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

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(8)

332054 09-25-13

## **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/fprm990.

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

FORWARD JEFFERSON COPPORATION

Employer identification number

FORWARD SEFFERSON CORPORATION 20	-0334197
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION	:
AREA AND THEREBY LESSEN THE BURDENS OF GOVERNMENT.	
FORM 990, PART VI, SECTION A, LINE 3:	
EXPLANATION: FORWARD JEFFERSON CORPORATION IS MANAGED BY EMPLO	OYEES OF THE
RELATED GOVERNMENTAL ENTITY, JEFFERSON ECONOMIC DEVELOPMENT CO	OMMISSION.
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: BOARD OFFICERS MEET WITH CPA TO REVIEW AND THEN	THE RETURN IS
DISTRIBUTED TO THE REST OF THE BOARD FOR REVIEW BEFORE FILING	
FORM 990, PART VI, SECTION B, LINE 12C:	
EXPLANATION: THE POLICY IS DISTRIBUTED ANNUALLY AND ALL BOARD	MEMBERS AND
OFFICERS ARE REQUIRED TO SIGN AND RETURN BY A SPECIFIED DEADLE	INE.
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: ALL INFORMATION IS AVAILABLE UPON REQUEST.	
FORM 990, PART XII, LINE 2C:	
EXPLANATION: NO CHANGE FROM PRIOR YEAR.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships
Complete If the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

See separate instructions.

545-0047	13
OMB No	8

Open to Public Inspection

▶Information about Schedule R (Form 990) and its instructions is at www.irs gov/form990.

FORWARD JEFFERSON CORPORATION

Employer identification number 20-0334197

Direct controlling entity End-of-year assets <u>©</u> Total income 9 Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) Ü Primary activity Name, address, and EIN (if applicable) of disregarded entity Part 11 Part

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)	(9)	[3]	9	3	9		
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	(t) Direct controlling entity	Section 512(b)(13) controlled entity?	12(b)(13) olled by?
TREPRESON RODOWN OTHER PRESENCE AND TRANSPORTED TO THE PRESENCE OF THE PRESENC				501(c)(3))		Yes	No
DEVELORENT COMMISSION -							
12-00302/0, /UU CHURCHILL PARKWAY, AVONDALE							
	ECONOMIC DEVELOPMENT	LOUISIANA					Þ
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2013

20-0334197

Page 2

Schedule R (Form 990) 2013 FORWARD JEFFERSON CORPORATION

Part III

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

General or Percentage managing ownership partner? 3 3 Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Ξ Yes No Disproportionate allocations? Ξ Share of end-of-year assets Share of total income Ξ Predominant income (related, unrelated, excluded from tax under sections 512-514) e (d)
( Direct controlling ) (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization (a) Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) (e) (e) Simple Si	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?
								Se
								+
								-
								-

Schedule R (Form 990) 2013

Page 3

# Schedule R (Form 990) 2013 FORWARD JEFFERSON CORPORATION

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

1 District the tay were did the section is a second of the section of the second of th				Tes
	ons with one or more	related organizations listec	d in Parts II-IV?	
	A			5
<ul> <li>Gift, grant, or capital contribution to related organization(s)</li> </ul>				
<ul> <li>Gift, grant, or capital contribution from related organization(s)</li> </ul>				
d Loans or loan guarantees to or for related organization(s)		***************************************	***************************************	20
e Loans or loan guarantees by related organization(s)	***************************************	***************************************	***************************************	₽
			***************************************	1e
f Dividends from related organization(s)				
Sale of assets to related organization(s)		***************************************	***************************************	4
	***************************************			7
	***************************************			÷
i Exchange of assets with related organization(s)			***************************************	  -  -
<ul> <li>Lease of facilities, equipment, or other assets to related organization(s)</li> </ul>				<b>*</b>
	6			+
K Lease of facilities, equipment, or other assets from related organization(s)		ji		+
l Performance of services or membership or fundraising solicitations for related organization(s)	ganization(s)	《天》中《中华》中《中华》中,《中,《中华》中,《中华》中,《中华》中,《中华》中,《中华》中,《中华》中,《中华》中,《中华》中,《中,《中华》中,《中,《中华》中,《中华》中,《中华》中,《中,《中,《中,《中,《中,《中,《中,《中,《中,《中,《中,《中,《中		¥ ;
m Performance of services or membership or fundraising solicitations by related ornanization(s)	Janization(e)			=
B Sharing of facilities equipment mailing that and experience selections of the selection o	gar lization i(s)	***************************************	***************************************	Ē
	ation(s)	***************************************		1
Sharing of paid employees with related organization(s)				10
p Reimbursement paid to related organization(s) for expenses				
	***************************************	***************************************		4
		***************************************	***************************************	14
<ul> <li>Other transfer of cash or property to related oversity stick(s)</li> </ul>				
s Other transfer of cash or property from related organization(s)	***************************************	***************************************		-
If the answer to any of the above is "Ves" cost to the distriction of	***************************************	***************************************	***************************************	1s
in the manufacture of the above is the instructions for	who must complete t	his line, including covered	information on who must complete this line, including covered relationships and transaction thresholds.	
(а) Name of related organization	(b) Transaction type (a-s)	<b>(с)</b> Amount involved	(d) Method of determining amount involved	hvolved
(1)				
(2)				
(3)				
(4)				
(5)				
(9)				
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Page 4

Schedule R (Form 990) 2013 FORWARD JEFFERSON CORPORATION

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

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

The rest of the state of the st	structions regarding excil	sion for certain inv	estment partnerships.							•
(a) Name. address, and EIN	(b) Primary activity	(c)	(d)	(e) Are al		(6)	<u>(a)</u>	Ξ	9	(K)
of entity	יוויומוץ מכוועונץ	(state or foreign country)	(related, unrelated, estimate second excluded from tax ones?) under section 512-514)	501(c)(3) orgs ?	Share of total income	Share of end-of-year assets	Dispropor- tionate allocations?	Dispripor Code V-UBI General or Percentage formational amount in box 20 managing ownership allocations of Schedule K-1 parme? ownership	General o managing partner?	Percentage
				G			Yes	(1000)	Ves No	
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								Schedule	В (Рош	Schedule R (Form 990) 2013

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Supplemental Information	20-0334197 Page 5
Provide additional information for responses to questions on Schedule R (see instructions).	- LIOMANA
r 100100 additional information for responses to questions on Schedule H (see instructions).	
A Section of the sect	
A-19) - 3	
4	

Form 8868 (Rev. 1-2014)					Page 2
If you are filing for an Additional (Not Automatic) 3-	Month Extension,	complete only Part II and check the	s box	*********	
note. Only complete Part II if you have already been gra	anted an automatic	3-month extension on a previously	filed Forr	n 8868.	
If you are filing for an Automatic 3-Month Extension     Part II Additional (Not Automatic) 3-M	n, complete only P	art I (on page 1).			
Part II Additional (Not Automatic) 3-N	ionth Extension	on or time. Only file the origin	al (no	copies nee	ded).
Type or Name of exempt organization or other filer		Enter filer's	identify	ing number,	see instructions
Type or Name of exempt organization or other filer, sprint	see instructions.		Employ	er identificati	ion number (EIN) o
File by the FORWARD JEFFERSON CORPO	TANT M C CI			00.00	
due date for Number etroet and room as suite no 15 a D					334197
return. See 700 CHURCHILL PARKWAY			Social s	ecurity numb	per (SSN)
City, town or post office, state, and ZIP code AVONDALE, LA 70094	e. For a foreign add	dress, see instructions.			
Enter the Return code for the return that this application	is for (file a senara	ate application for each water.			
Application				*****************	[0 1]
Is For	Return	Application			Return
Form 990 or Form 990-EZ	Code	Is For			Code
Form 990-BL	01	Form 4044 A			
Form 4720 (individual)	03	Form 1041-A			08
Form 990-PF	03	Form 4720 (other than individual) Form 5227			09
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			10
Form 990-T (trust other than above)	06	Form 8870			11
STOP! Do not complete Part II if you were not already			launh di	-d F 000	1 12
The books are in the care of ▶ 700 CHURCH.  Telephone No. ▶ 504-875-3908  If the organization does not have an office or place of  If this is for a Group Return, enter the organization's form the proof of the group, check this box  I request an additional 3-month extension of time use for calendar year 2013, or other tax year beging the tax year entered in line 5 is for less than 12 ms.  Change in accounting period  State in detail why you need the extension ALL INFORMATION NECESSARY	business in the Ur our digit Group Exe and atta ntil NOVEMI ning	Fax No.  ited States, check this box imption Number (GEN) If the a list with the names and EINs of BER 15, 2014.  ight in the name	this is for all memb	or the whole goers the exten	group, check this nsion is for.
HAS NOT YET BEEN RECEIVED.	·	CE A COMPLETE AND F	CCUR	ATE TA	X RETURN
8a If this application is for Forms 990-BL, 990-PF, 990-	T 4720 or 6069 a	enter the tentetive toy less and			×
nonrefundable credits. See instructions.	., 1,20,010005,6	ine tentative tax, less any			0.
b If this application is for Forms 990-PF, 990-T, 4720,	or 6069, enter any	refundable credits and estimated	- Ba	\$	0.
tax payments made. Include any prior year overpay	ment allowed as a	Credit and any amount paid			
previously with Form 8868.		ordan and any amount para	86		0.
Balance due. Subtract line 8b from line 8a. Include	vour payment with	this form if required by using	OD	\$	
EFTPS (Electronic Federal Tax Payment System). Se	ee instructions.	in the learning in required, by doining	8c	s	0.
Signature and Ve	rification mus	t be completed for Part II or	nlv.		
Inder penalties of perjury, I declare that I have examined this form Is true, correct, and complete, and that I am authorized to prepa	n including accomp	anying schedules and statements, and to	the best o	f my knowledg	e and belief,
Signature >	itle DIRECT	OR	Date	<b>.</b>	
			Date		868 (Rev. 1-2014)