# Form **990**

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public

Department of the Treasury Internal Revenue Service

A For the 2022 calendar year, or tax year beginning and ending B Check if applicable C Name of organization D Employer identification number Address FRIENDS OF THE TROOPS 83-3309612 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated P.O. BOX 21375 423.599.9901 City or town, state or province, country, and ZIP or foreign postal code 483,373. G Gross receipts \$ Amended CHATTANOOGA, TN 37424 H(a) Is this a group return Applica-F Name and address of principal officer: JESSICA DUKE Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? I Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.FRIENDSOFTHETROOPS.ORG H(c) Group exemption number Form of organization: X Corporation Trust Association Other L Year of formation: 2019 M State of legal domicile: TN Part I Summary Briefly describe the organization's mission or most significant activities: TO PROVIDE SUPPORT TO VETERANS Governance AND SERVICE MEMBERS FROM ALL BRANCHES OF THE U.S. ARMED FORCES. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 8 Number of independent voting members of the governing body (Part VI, line 1b) 8 4 Activities & Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 1551 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 477,875 483,373. Program service revenue (Part VIII, line 2g) 0. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .... 477.875 373. 483. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 . 0. b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 447,825. 428,019. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 447,825. 428,019. 19 Revenue less expenses. Subtract line 18 from line 12 30,050. 55,354. **Beginning of Current Year** End of Year 110,149. 20 Total assets (Part X, line 16) 54,841. 21 Total liabilities (Part X, line 26) 123. 22 Net assets or fund balances. Subtract line 21 from line 20 718. 110,072. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Alona Signature of officer Sign JESSICA DUKE, Here Type or print name and title Date Print/Type preparer's name Preparer's signature Check Paid self-employed Preparer Firm's name Firm's EIN Use Only Firm's address Phone no. May the IRS discuss this return with the preparer shown above? See instructions Yes

Form	1 990 (2022) FRIENDS OF THE TROOPS	83-3309612	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:  TO PROVIDE SUPPORT TO VETERANS AND SERVICE MEMBERS FR		
	OF THE U.S. ARMED FORCES.		
2	Did the organization undertake any significant program services during the year which were not listed on t prior Form 990 or 990-EZ?		X No
_	If "Yes," describe these new services on Schedule O.		▼
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serving "Yes," describe these changes on Schedule O.	ces? Yes	L∆_ No
4	Describe the organization's program service accomplishments for each of its three largest program service	es, as measured by expenses.	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to revenue, if any, for each program service reported.		d
4a		(Revenue \$	
<del>-1</del> a	VETERAN AND U.S. MILITARY SUPPORT PROVIDE SUPPORT AN		īs -
	AND THEIR FAMILIES, TO SERVICE MEMBERS AND MILITARY F.	AMILIES IN A	
	VARIETY OF WAYS. IN 2022, 89,162 CARDS AND CARE PACKA		7
	THOUSANDS OF POUNDS OF FOOD, HYGIENE, HOUSEHOLD ITEMS		
	CLEANING SUPPLIES WERE DELIVERED OR SHIPPED TO CURREN	T AND FORMER	
	MEMBERS OF THE U.S. MILITARY AND THEIR FAMILIES.		
4b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$	
	(Code) (Expenses v	(Hevende Ф	
_		,	
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
_4e	Total program service expenses 418,377.		

# Form 990 (2022) FRIENDS OF THE TROOPS Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		<del></del>
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	۳		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
				x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			X
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	<u>11a</u>		<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			١
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			l
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		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			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u> -
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
<u>- 1</u>	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х
	democracy government on Fart IX, column (-y, into 1: II Yes, Complete Scriedule I. Parts Land II	<u>  41</u>	<u> </u>	

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Form 990 (2022) FRIENDS OF THE TROOPER THE Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24 a	3 , , , , , , , , , , , , , , , , , , ,			
	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	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			37
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00.		Х
	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
C	·	28c		x
20	"Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	-25	
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
JZ.	· · ·	32		x
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- JZ		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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	35b		
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

022) FRIENDS OF THE TROOPS
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No			
<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 0						
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		37			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> X</u>			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	40		х			
h	If "Yes," enter the name of the foreign country	4a		<u> </u>			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit						
	any contributions that were not tax deductible as charitable contributions?	6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X			
b	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 was required						
	to file Form 8282?	7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h					
8	sponsoring organization have excess business holdings at any time during the year?						
9	Sponsoring organizations maintaining donor advised funds.	8					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders 11a						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4-					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
1_	Note: See the instructions for additional information the organization must report on Schedule O.						
D	Enter the amount of reserves the organization is required to maintain by the states in which the						
_	organization is licensed to issue qualified health plans  Story the amount of receives on hand.						
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	. 15					
-	excess parachute payment(s) during the year?	15		х			
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х			
	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17					
	If "Yes," complete Form 6069.						

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

	Check if Schedule O contains a response or note to any line in this Part VI						Λ		
Sec	tion A. Governing Body and Management						ı		
			I			Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	<u> 1a</u>		8					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			_					
b	Enter the number of voting members included on line 1a, above, who are independent	1b		<u>8</u> ]					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other						
	officer, director, trustee, or key employee?				2	X			
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervision						
	of officers, directors, trustees, or key employees to a management company or other person?			;	3		Х		
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?		4		Х		
5									
6	Did the organization have members or stockholders?				3		X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap								
•	more members of the governing body?			7	a		х		
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			F	_				
				,	ъ		x		
o	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the yea			<b>–</b>					
8						Х			
_	The governing body?				a	X			
b	Each committee with authority to act on behalf of the governing body?			<del> </del>	b				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			Ι.			<b>₩</b>		
<u> </u>	organization's mailing address? If "Yes." provide the names and addresses on Schedule O				9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u>venue</u>	Code.)				T		
				_		Yes	No		
	Did the organization have local chapters, branches, or affiliates?			10	Оа		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.	apters	s, affiliates,						
				10	Ob	Х			
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b									
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	<u>  12</u>	2b	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, " c	lescribe						
	on Schedule O how this was done			12	2c	X			
13	Did the organization have a written whistleblower policy?			1	3		X		
14	Did the organization have a written document retention and destruction policy?			1	4		Х		
15	Did the process for determining compensation of the following persons include a review and approval	by in	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			15	5a		Х		
	Other officers or key employees of the organization				5b		Х		
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent w	vith a						
	taxable entity during the year?			10	3a		Х		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat								
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-	-						
	exempt status with respect to such arrangements?	Lacio		16	3b				
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed TN								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	)-T (section 501(c)(	3)s on	ılv) s	availal	ole		
	for public inspection. Indicate how you made these available. Check all that apply.		(222	,	.,, -				
	X Own website Another's website X Upon request Other (explain	or C	shadula (1)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	nd fin	ano	ial			
13	statements available to the public during the tax year.	mot	or microst policy, a	iu III	ai IU	ıaı			
00		ke e:-	d rooords						
20	State the name, address, and telephone number of the person who possesses the organization's boo THE ORGANIZATION - 423.599.9901	หร สก	u recorus						
	P.O. BOX 21375, CHATTANOOGA, TN 37424								
	F.O. DON AIDID, CHAILANOUGA, IN D/424								

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

X Check this box if neither the organization n		orga T	niza			nper	ısate			
(A)	(B)			D-(	C)	_		(D)	(E)	(F)
Name and title	Average		not c	Position check more than one			Reportab <b>l</b> e	Reportable	Estimated	
	hours per	box	, unle	ss pe	erson is both an director/trustee)		n an	compensation	compensation	amount of
	week (list any	-				Γ	<u> </u>	from the	from related organizations	other compensation
	hours for	Individual trustee or director				,		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	Institutional trustee		oyee	Highest compensated employee		1099-NEC)	,	and related
	below	idual	tutior	ja j	Key employee	est co	Jer.			organizations
	line)	lndi	Insti	Officer	Key	E g d	Former			
(1) AL DUKE	3.00	]								
PRESIDENT		X		X				0.	0.	0.
(2) JOHN EGER	1.00	]								
CFO		X		X				0.	0.	0.
(3) PAUL DAVIS	1.00	]								
SECRETARY		X		X				0.	0.	0.
(4) LINDA HOUGHTON	1.00	]								
DIRECTOR		X						0.	0.	0.
(5) TAVIS SALAZAR	1.00									
DIRECTOR		X						0.	0.	0.
(6) BEN BOSTON	1.00									
DIRECTOR		X						0.	0.	0.
(7) WILLIAM RAINES	1.00									
DIRECTOR		X						0.	0.	0.
(8) JIMMY MONCRIEF	1.00									
DIRECTOR		X						0.	0.	0.
(9) JESSICA DUKE	85.00	]								
CEO				X				0.	0.	0.
		]								
		]								
		]								
		]								
		<u> </u>								
		]								
			1				1			

232007 12-13-22 Form **990** (2022)

Part VII   Section A. Officers, Directors, Trus		oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			_ (0	•			(D)	(E)			(F)	
Name and title	Average	Average Position					nne	Reportab <b>l</b> e	Reportable	,	Es	stimate	∌d
	hours per	box	, unles	ss per	son i	s both	n an	compensation compensation			ar	nount	of
	week	<b>—</b>	cer an	id a di	irecto	r/trus	tee)	from	from related	t		other	
	(list any	ector						the	organization	ıs	com	npensa	tion
	hours for	or dir	a.			ted		organization	(W-2/1099-MIS	SC/	I	rom the	
	related	stee (	ruste			eusa		(W-2/1099-MISC/	1099-NEC)	/		ganizati	
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		1099-NEC)				d relat	
	below	ividu	itati	Officer	emp	hest	mer				org	anizatio	ons
	line)	pul	lus	JJ0	Key	불통	For						
	-					$\vdash$				$\longrightarrow$			
						_							
1b Subtotal	•							0.		0.			0.
c Total from continuation sheets to Part VI								0.		0.			0.
								0.		0.			0.
d Total (add lines 1b and 1c)								, , , , , , , , , , , , , , , , , , ,	000 of reportable				<del>••</del>
, ,	or milited to th	056	IISLE	u al	ove	;) vvi i	0 16	ceived more than \$100,	ooo or reportable	3			0
compensation from the organization												Yes	No
									_	1		163	NO
3 Did the organization list any former officer		ee, k	сеу е	empl	oye	e, or	hig	hest compensated empl	loyee on				77
line 1a? If "Yes," complete Schedule J for s											3		Х
4 For any individual listed on line 1a, is the su	•							· ·	•				
and related organizations greater than \$150	0,000? <i>If</i> "Yes,	" со	mple	ete S	Sche	edule	J f	or such individual			4	oxdot	X
5 Did any person listed on line 1a receive or a	accrue comper	ısati	on fr	om	any	unre	elate	ed organization or individ	dual for services				
rendered to the organization? If "Yes." con	nplete Schedule	e J fo	or su	ıch r	oers	on .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of com	pensa <sup>.</sup>	tion fr	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)			((	C)	
Name and business	address	NO	ONE	3				Description of s	ervices	C		nsatio	n
										l			
-													
										l			
							$\dashv$						
										l			
							$\dashv$						
								<u> </u>					
2 Total number of independent contractors (i	ncluding but n	ot lir	nited	d to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organi	zation				(	)							

83-3309612

Form 990 (2022) FRIENDS
Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
		•		(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 <b>-</b> 514
ω ω	1 2	Federated campaigns 1a					
nt si							
5 2							
¥,ţ	C	9					
Contributions, Gifts, Grants and Other Similar Amounts		Related organizations 1d					
ns,		Government grants (contributions) 1e					
흕	f	All other contributions, gifts, grants, and	402 272				
혈		similar amounts not included above 1f	483,373.				
E ST	_	Noncash contributions included in lines 1a-1f	401,499.	100 000			
<u>ਨੂੰ ਬ</u>	h	Total. Add lines 1a-1f		483,373.			
			Business Code				
<u>و</u> ا	<b>2</b> a	l					
و خَ	b						
Sign	С						
am eXe	d	_					
Program Service Revenue	е	•					
ᇫ	f	All other program service revenue					
		Total. Add lines 2a-2f					
	3	Investment income (including dividends, inter	est, and				
		other similar amounts)					
	4	Income from investment of tax-exempt bond					
	5	Royalties					
	•	(i) Real	(ii) Personal				
	6 a	Gross rents 6a	,				
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
	ا		1				
		` ′	(ii) Other				
	/ a		(ii) Other				
		assets other than inventory 7a					
	b	Less: cost or other basis					
- B		and sales expenses					
Revenue		Gain or (loss) 7c	1				
<u>~</u>		Net gain or (loss)	·····				
her	8 a	Gross income from fundraising events (not					
ಕ∣		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8t	)				
	С	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 19	1				
	b	Less: direct expenses9k	<b>o</b>				
	С	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10	a				
	b	Less: cost of goods sold10	b				
		Net income or (loss) from sales of inventory					
			Business Code				
Miscellaneous Revenue	11 a	1					
E a	b						
SK GH	С						
<u>B</u>		All other revenue					
≥		• Total. Add lines 11a-11d					
	12	Total revenue. See instructions		483,373.	0.	0.	0.

#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (C) Management and general expenses (**D**) Fundraising expenses (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes 10 Fees for services (nonemployees): Management Legal 2,825. 2,825. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 1.041. 1,041. Advertising and promotion 12 939. 939. Office expenses 13 740. 740. Information technology 14 Royalties 15 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 1,064. 1,064. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 373,822. 373,822. PROGRAM SUPPLIES SHIPPING AND POSTAGE 44,555. 44,555. 2,318. 2,318. **MISCELLANEOUS** 715. 715. STATE AND BUSINESS FILI e All other expenses 428,019. 418,377. 9,642. 0. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2022)
Part X | Balance Sheet

Chrock if Schedule O contains a response or note to any line in this Part X			1 24,4					
1   Cash - non-interest-bearing   54 , 841 . 1   110 , 149 .			Check if Schedule O contains a response or no	te to any	y line in this Part X			
2   Savings and temporary cash investments   2   3   3						Beginning of year		
Pedges and grants receivable, net		1	Cash - non-interest-bearing			54,841.	1	110,149.
3   Pledges and grants receivables, net   3   4		2					2	
4 Accounts receivable, net 5 Losss and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Losss and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and losars receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis, Complete Part VI of Schedule D 11 Investments : publicly traded securities 12 Investments : publicly traded securities 12 Investments : publicly traded securities 13 Investments : publicly traded securities 14 Intangble assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 fimust equal line 33) 17 Accounts payable and accrued expenses 19 Deferred revenue 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Unsecured nortes and loans payable to unrelated third parties 23 Secured mortagoas and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Organizations that follow FASB ASC 958, check here and complete lines 22 through 33. 27 Net assets with donor restrictions 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total assets with donor restrictions 33 Total assets or through balances 34 Total parties 35 Carl parties and complete lines 29 through 33. 36 Paid-in or capital surplus, or land, building, or equipment fund 39 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital sur		3					3	
Secure   Company   Compa		4					4	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons (a february of the property of the prope		5						
Controlled entity or family member of any of these persons   5								
6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)  7 Notes and loans receivable, net 9  Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D  10b Less: accumulated depreciation					·		5	
1		6						
7   Notes and loans receivable, net   8   Novestroise for sale or use   8   Novestroise for sale or use   9   Prepaid expenses and deferred charges   9   Depaid expenses and deferred severities   Depaid expenses   Dep		"	·		,		6	
8		7						
10a   Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   10a   10b   10c	ets							
10a   Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   10a   10b   10c	Ass							
basis, Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments - publicity traded securities 11 Investments - other securities, See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Eserow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Net assets with donor restrictions 28 Net assets with donor restrictions 29 Capital stock or trust principal, or current funds 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 40 Quarties, and or capital surplus, or land, building, or equipment fund 54 Quarties, and or capital surplus, or land, building, or equipment fund 55 Quarties, and or capital surplus, or land, building, or equipment fund 56 Quarties, and or capital surplus, or land, building, or equipment fund 57 Quarties, and or capital surplus, or land, building, or equipment fund 57 Quarties, and or capital surplus, or land, building, or equipment fund 57 Quarties, and or capital surplus, or land, building, or equipment fund 58 Quarties, and or fund balances 57 Quarties, and or fund balances							9	
b Less: accumulated depreciation   10b   10c   11   Investments - publicly traded securities   11   12   12   13   Investments - publicly traded securities   12   13   Investments - program-related, See Part IV, line 11   13   14   Intangible assets   14   15   Other assets. See Part IV, line 11   15   15   16   Total assets. Add lines 1 through 15 (must equal line 33)   54 , 841   16   110 , 149   17   Accounts payable and accrued expenses   123   17   77   77   18   Grants payable and accrued expenses   123   17   77   77   18   Grants payable and accrued expenses   123   17   77   77   18   18   19   Deferred revenue   19   19   18   19   19   19   19   19		10a		40.				
11   Investments - publicly traded securities   11   12   17   17   18   19   19   19   19   19   19   19		١.					40	
12   Investments - other securities. See Part IV, line 11   13   Investments - program-related. See Part IV, line 11   13   14   Intangible assests   14   15   Other assets. See Part IV, line 11   15   15   15   16   17   16   17   16   17   16   17   17								
13								
14								
15 Other assets. See Part IV, line 11   15   15   16   Total assets. Add lines 1 through 15 (must equal line 33)   54 , 841								
16 Total assets. Add lines 1 through 15 (must equal line 33)   54,841. 16   110,149.     17 Accounts payable and accrued expenses   123. 17   77.     18 Grants payable   18   19   19   19   19     20 Tax-exempt bond liabilities   20   21   22   22   23   24   22   23   24   23   25   26   26   26   26   26   26   26								
17 Accounts payable and accrued expenses   123. 17   77.     18 Grants payable   18		15				F 4 0 4 1		110 110
The service of the se		16						
19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   22   Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons   22   23   Secured mortgages and notes payable to unrelated third parties   23   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties, and other liabilities included on lines 17-24). Complete Part X of Schedule D   25   Total liabilities. Add lines 17 through 25   123 · 26   777 · Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.   27   Net assets without donor restrictions   28   Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.   28   Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.   29   Capital stock or trust principal, or current funds   0 · 29   20 · 20 · 20 · 20 · 20 · 20 · 20 · 20		17				123.	17	77.
Tax-exempt bond liabilities 20  Tax-exempt bond liabilities 20  Escrow or custodial account liability. Complete Part IV of Schedule D  Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D  Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions  Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Paid-in or capital stock or trust principal, or current funds  O Paid-in or capital surplus, or land, building, or equipment fund  O 30  O and O		18				18		
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 54,718. 31 110,072.		19	Deferred revenue		19			
22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  28 Net assets with donor restrictions  29 Net assets with donor restrictions  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds  32 Total net assets or fund balances  33 Universe (increase)  22 Unsecured mortgages and notes payable to unrelated third parties  23 Unsecured mortgages and notes payable to unrelated third parties  24 Unsecured mortgages and notes payable to unrelated third parties  25 Unsecured mortgages and notes payable to unrelated third parties  26 Total liabilities (including payable to unrelated third parties  25 Unsecured mortgages and notes payable to unrelated third parties  26 Total liabilities (including payable to unrelated third parties  27 Unsecured mortgages and notes payable to unrelated third parties  28 Unsecured mortgages and notes payable to unrelated third parties  28 Unsecured mortgages and notes payable to unrelated third parties  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  30 Paid-in or capital surplus, or land, building, or equipment fund  31 Patince dearnings, endowment, accumulated income, or other funds  32 Total net assets or fund balances		20	Tax-exempt bond liabilities			20		
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds  0 Paid-in or capital surplus, or land, building, or equipment fund  10 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Unsecured notes and loans payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  25  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds  O Paid-in or capital surplus, or land, building, or equipment fund  O 30  O 0.  Retained earnings, endowment, accumulated income, or other funds  54,718. 31  110,072.	S	22	Loans and other payables to any current or form	ner offic	er, director,			
Unsecured notes and loans payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  25  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds  O Paid-in or capital surplus, or land, building, or equipment fund  O 30  O 0.  Retained earnings, endowment, accumulated income, or other funds  54,718. 31  110,072.	ijΞ		trustee, key employee, creator or founder, subs	stantial c	ontributor, or 35%			
Unsecured notes and loans payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  25 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  24  24  25  26  77.  27  80  80  80  80  80  80  80  80  80  8	abi		controlled entity or family member of any of the	se perso	ons		22	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Corganizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  28 Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds  54,718. 31 110,072.  Total net assets or fund balances	Ξ	23	Secured mortgages and notes payable to unrela	ated thir	d parties		23	
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total net assets or fund balances 34 718 32 110,072.		24	Unsecured notes and loans payable to unrelate	ed third p	parties		24	
of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  28 Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  25  77.  123. 26  77.  27  28  Organizations that follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds  0. 29  0. 30  0. 30  0. 30  110,072.		25	Other liabilities (including federal income tax, pa	ayables <sup>.</sup>	to related third			
Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions  Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  123			parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  28 Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds  32 Total net assets or fund balances  123 26  77 .  123 26  77 .  124 28  125 27  28  127  28  128  29  129  129  120  121  123 26  77 .  123 26  77 .  124 27  125 27  126 27  127  128 28  129 20  129 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			of Schedule D					
and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances  33 Total net assets or fund balances  34 Total net assets or fund balances		26				123.	26	77.
			Organizations that follow FASB ASC 958, che	eck here	e 🗌			
	es		and complete lines 27, 28, 32, and 33.					
	anc	27					27	
	Bal	28					28	
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Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1			$\frac{73.}{19.}$				
2	Total expenses (must equal Part IX, column (A), line 25)	2							
3	Revenue less expenses. Subtract line 2 from line 1	3		_	<u>54.</u>				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	54	<u>1,7</u>	<u> 18.</u>				
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 on Schedule O)	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	110	0,0	72.				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: X Cash Cash Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.							
2a			2a		Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed								
	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				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate								
	consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit.							
	review, or compilation of its financial statements and selection of an independent accountant?		2c						
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required								
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b						

Form **990** (2022)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

### Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

FRIENDS OF THE TROOPS

**Employer identification number** 

83-3309612 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")		63,765.	397,252.	477,875.	483,373.	1422265.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	<b>Total.</b> Add lines 1 through 3		63,765.	397,252.	477,875.	483,373.	1422265.
	The portion of total contributions		·	·			
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						1422265.
	etion B. Total Support						11222000
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	
	Amounts from line 4	(a) 2010	63,765.	397,252.	477,875.	483,373.	1422265.
	Gross income from interest.		03,703	331,232	177,073	403,3730	1422203.
0	<b>,</b>						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						1400065
	Total support. Add lines 7 through 10						1422265.
	Gross receipts from related activities,	,	,			12	
13	First 5 years. If the Form 990 is for the		rst, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	77
C	organization, check this box and stor						X
	tion C. Computation of Publi						
	Public support percentage for 2022 (I					14	%
	Public support percentage from 2021					15	<u>%</u>
16a	33 1/3% support test - 2022. If the o				14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies		ŭ				
b	33 1/3% support test - 2021. If the	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	. <b>- 2022.</b> If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	r <b>e.</b> Explain in Part '	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blic <b>l</b> y supported o	rganization		
b	10% -facts-and-circumstances test	- <b>2021.</b> If the org	anization did not c	heck a box on line	: 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, chec	k this box and st	op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	llifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	box on <b>l</b> ine 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	

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

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

Section A. Public Suppo		w, please comp	nete Part II.)				
Calendar year (or fiscal year begin		(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions		, , , , , , , , , , , , , , , , , , ,	( )			( )	
membership fees received	· I						
include any "unusual grant	ts.")						
2 Gross receipts from admis merchandise sold or servic formed, or facilities furnish any activity that is related organization's tax-exempt	ces per- ned in to the						
3 Gross receipts from activit	ies that						
are not an unrelated trade iness under section 513	or bus-						
4 Tax revenues levied for the	organ-						
ization's benefit and either or expended on its behalf	•						
5 The value of services or fa	cilities						
furnished by a government	ta <b>l</b> unit to						
the organization without cl	harge						
6 Total. Add lines 1 through	5						
7a Amounts included on lines	s 1, 2, and						_
3 received from disqualifie							
<b>b</b> Amounts included on lines 2 and 3 r from other than disqualified persons exceed the greater of \$5,000 or 1% amount on line 13 for the year	s that of the						
<b>c</b> Add lines 7a and 7b							
8 Public support. (Subtract line 7							
Section B. Total Suppor	t				_	_	
Calendar year (or fiscal year begin	nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6							
10a Gross income from interes dividends, payments recei securities loans, rents, roy, and income from similar so	ved on alties,						
<b>b</b> Unrelated business taxable inc	come						
(less section 511 taxes) from acquired after June 30, 1975	businesses						
11 Net income from unrelated activities not included on li whether or not the busines regularly carried on	ine 10b,						
or loss from the sale of cap assets (Explain in Part VI.)	pital						
13 Total support. (Add lines 9, 10c,	<b>I</b>						
14 First 5 years. If the Form 9	990 is for the o	organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizatio	on,
check this box and stop h	nere						
Section C. Computation	of Public	Support Per	centage				
15 Public support percentage	e for 2022 (line	8, column (f), d	ivided by line 13,	column (f))		15	%
16 Public support percentage	e from 2021 Sc	chedule A, Part	III, line 15			16	%
Section D. Computation	of Investn	nent Income	Percentage				
17 Investment income percen	ntage for 2022	! (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
18 Investment income percen						18	%
19a 33 1/3% support tests - 2	<b>2022.</b> If the or	ganization did n	ot check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 17	7 is not
more than 33 1/3%, check	this box and	stop here. The	organization qua <b>l</b> i	fies as a publicly s	upported organiza	ation	
b 33 1/3% support tests - 2 line 18 is not more than 33		=					nd
20 Private foundation. If the							

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
. 34		
10b		

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A pe	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c l	below, the governing body of a supported organization?	11a		
b	A far	mily member of a person described on line 11a above?	11b		
С	A 35	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detai	il in Part VI.	11c		
Sect	ion	B. Type I Supporting Organizations			
				Yes	No
1	Did t	the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		e supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ctors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ctively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	_	nization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the ported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
		the organization operate for the benefit of any supported organization other than the supported	-		
		nization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		ervised, or controlled the supporting organization.	2		
Sect	ion	C. Type II Supporting Organizations			
		<del>, , , , , , , , , , , , , , , , , , , </del>		Yes	No
1	Were	e a majority of the organization's directors or trustees during the tax year also a majority of the directors		100	140
		ustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		anagement of the supporting organization was vested in the same persons that controlled or managed			
		supported organization(s).	1		
Sect	ion	D. All Type III Supporting Organizations	•		
				Yes	No
1	Did t	the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
		nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	_	, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	_	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		· · ·	2		
		organization maintained a close and continuous working relationship with the supported organization(s). Eason of the relationship described on line 2, above, did the organization's supported organizations have a			
		ficant voice in the organization's investment policies and in directing the use of the organization's			
	•	· · · · · · · · · · · · · · · · · · ·			
		me or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's payed in this regard.	3		
Sect	ion	E. Type III Functionally Integrated Supporting Organizations			
		ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
' a	Criec	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
C		The organization is the parent of each of its supported organizations. Complete line of below.  The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction	o)	
	Δctiv	rities Test. <b>Answer lines 2a and 2b below.</b>	uction	Yes	No
		substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	140
		supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
		e supported organizations and explain how these activities directly furthered their exempt purposes,			
		the organization was responsive to those supported organizations, and how the organization determined			
		the organization was responsive to those supported organizations, and now the organization determined these activities constituted substantially all of its activities.	2a		
		these activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		VI the reasons for the organization's position that its supported organization(s) would have engaged in			
		e activities but for the organization's involvement.	2b		
		nt of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
		the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		ees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
		the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
		s supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
	J. 113	Composition of the real description of the state of the provided by the Oldenization in this relation.			

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		· ·	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	ınization (see

Schedule A (Form 990) 2022

instructions).

Par	t V Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations (continue	ed)	
Secti	on D - Distributions				Current Year
_1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
_5_	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	5	(iii) Distributable Amount for 2022
_1_	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2022				
a	From 2017				
<u>b</u>	From 2018				
<u> </u>	From 2019				
<u>d</u>	From 2020				
<u>e</u>	From 2021				
f_	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
<u>       b    </u>	Applied to 2022 distributable amount				
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
_8_	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

232028 12-09-22 Schedule A (Form 990) 2022

### **SCHEDULE M** (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

**Employer identification number** 

	FRIENDS OF T	HE TRO	OPS			83-3309	612	
Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	n	(d) Method of determir oncash contribution a	-	s
1	Art - Works of art							
2	Art - Historical treasures				Ь			
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		200,989.	FMV			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded				Ь—			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous				<u> </u>			
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential				-			
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles	X	3	200,510.	TPMT 7			
19	•		3	200,510.	<u> FM∨</u>			
20	Drugs and medical supplies				<del> </del>			
21	Taxidermy				├──			
22	Historical artifacts		+		├─			
23	Scientific specimens		+		├─			
24	Archeological artifacts		+		├─			
25	Other ()		+		├─			
26	Other ()				├──			
27	Other ()				<del>                                     </del>			
28	Other ( )				<u></u>			
29	Number of Forms 8283 received by the organization completed Form 82	-						
	for which the organization completed Form 62	os, Part V, L	onee Acknowledg	ement 29			Vaa	No
200	During the year, did the organization receive by	v oontributie	n any proporty ron	ported in Part I lines 1 throug	h 20 -	that it	Yes	No.
Jua	must hold for at least 3 years from the date of					mat it		
	exempt purposes for the entire holding period?	_		·		30a		Х
b	If "Yes," describe the arrangement in Part II.					30a		- 25
31	Does the organization have a gift acceptance	nolicy that re	equires the review of	of any nonstandard contribut	tions?	31		Х
32a	Does the organization have a girt acceptance property of the organization hire or use third parties							1
JZa			•	•		32a		x
b	If "Yes," describe in Part II.					32a		
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	/ for which column (a) is che	sked			
55	describe in Part II.	- C.G. 111 (O) 10	. a type of property	, is. Willott Soldiffit (a) is offer	ou,			

LHA

### **SCHEDULE 0** (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDS OF THE TROOPS

Employer identification number 83-3309612

TRIBNED OF THE TROOPS
FORM 990, PART VI, SECTION A, LINE 2:
AL DUKE, BOARD PRESIDENT HAS A FAMILY AND BUSINESS RELATIONSHIP WITH
JESSICA DUKE, CEO.
FORM 990, PART VI, SECTION B, LINE 11B:
A COPY OF THE FORM 990 WAS SUBMITTED TO THE CHIEF FINANCIAL OFFICER AND TO
THE ENTIRE BOARD PRIOR TO FILING WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 12C:
A CONFILCT OF INTEREST POLICY IS INCLUDED IN THE ORGANIZATION'S BYLAWS,
WHICH ARE REVIEWED AT EVERY MEETING OF THE BOARD.
FORM 990, PART VI, SECTION C, LINE 19:
ALL GOVERNING DOCUMENTS ARE POSTED EITHER TO THE ORGANIZATION'S WEBSITE OR
ARE AVAILABLE UPON REQUEST.