Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection A For the 2023 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 Name change 83-3309612 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ P.O. BOX 21375 423-599-9901 424,237. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended CHATTANOOGA, TN 37424 H(a) Is this a group return Applica-F Name and address of principal officer: JESSICA DUKE for subordinates? Yes X No P.O. BOX 21375, CHATTANOOGA, TN 37424 H(b) Are all subordinates included? Yes I Tax-exempt status: X 501(c)(3) 501(c) (If "No," attach a list. See instructions (insert no.) 4947(a)(1) or WWW.FRIENDSOFTHETROOPS.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association 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. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 11 4 Activities & 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 0 5 1642 6 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 0. **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 483,373. 424,237. Program service revenue (Part VIII, line 2g) 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 483,373. 424,237. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 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) 428,019 375,767. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 428,019. 375,767. 55,354. 19 Revenue less expenses. Subtract line 18 from line 12 48,470. PS **Beginning of Current Year** End of Year 159,051. 110.149. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 77. 0. 22 Net assets or fund balances. Subtract line 21 from line 20 110,072. 159,051. 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. Signature of officer Sign JEŚSICA DUKE, Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 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

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4e Total program service expenses

Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? See instructions X 2 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 X 3 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 X 4 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 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 X 6 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 X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X 9 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V 10 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X 11a 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 X 11b c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e 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 X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a 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 X 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a 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 X 14b 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 X 15 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 X 16 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 X 17 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 X 18 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 Х 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X 20a **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

X

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FRIENDS OF THE TROOPS 83-3309612 Form 990 (2023) Page 4 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 X 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c 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 d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X 25a 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 Х 25b Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III X 27 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): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV X 28c Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 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 X 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI X 37 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 X 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 0 1a b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 0 1b

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form **990** (2023)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b		2b		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а		7a		х
b		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	15		
	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7		
	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		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	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		X
	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.	5		ent stay a self-

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 11			
	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				
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	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	-		
_	of officers directors trustops or key employees to a management company or other newscar?			Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3	-	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4		
	Did the organization have members or steel/helders?	5		X
6	Did the organization have members or stockholders?	6		X
7a	and the posterior of			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(mile doctor o rogado information about policies not regalied by the internal nevertue code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	100	165	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		Λ
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	401		
112		10b	37	
ı ıa	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	X	
40-	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b		X
	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 arrangement with a			
	taxable entity during the year?	160		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		- 41
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	everytheteria with several to the se			
Sec	tion C. Disclosure	16b		
17 10	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, and 990-T (section 501(c)(3)s	only) a	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 423-599-9901			
	PO BOX 21375, CHATTANOOGA, TN 37424			

332007 12-21-23

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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.

(A)	(B)			_ ((2)			(D)	(E)	(F)
Name and title	Average	(40	not c	Position ot check more than one				Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	s both	an	compensation	compensation	amount of
	week		cer ar	id a d	irecto	r/trus	tee)	from	from related	other
	(list any	trustee or director						the	organizations	compensation
	hours for related	p to	99			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the
	organizations	ruste	nstitutional trustee		ee	Highest compensated employee		1099-NEC)	1099-NEC)	organization and related
	below	dual t	ntiena	L	Key employee	st cor	-	10001420)		organizations
	line)	Individual	Institu	Officer	Key e	Highe em plo	Former			g
(1) AL DUKE	6.00									
PRESIDENT		X		Х				0.	0.	0
(2) JOHN EGER	1.00									
CFO		X		X				0.	0.	0
(3) LINDA HOUGHTON	1.00									
DIRECTOR		X						0.	0.	0
(4) TAVIS SALAZAR	1.00									
DIRECTOR		X						0.	0.	0
(5) BEN BOSTON	1.00									
DIRECTOR		X						0.	0.	0
(6) WILLIAM RAINES	1.00									
DIRECTOR		Х						0.	0.	0
(7) KAREN BELL	1.00									
DIRECTOR		X						0.	0.	0
(8) ANGIE MACKIE	1.00									
DIRECTOR		X				211020.00		0.	0.	0
(9) BRYANT LEWIS	1.00									
DIRECTOR		X						0.	0.	0
(10) PAUL DAVIS	1.00									
SECRETARY		X		X				0.	0.	0
(11) JIMMIE MONCRIEF	1.00									
DIRECTOR		Х						0.	0.	0
(12) JESSICA DUKE	85.00									
CEO				X				0.	0.	0
		_								
THE PARTY OF THE P										

Pai	rt VII Section A. Officers, Directors, Trus	TO BE A STATE OF THE STATE OF T	oloy	ees,			ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)				C) ition			(D)	(E)			(F)	
	Name and title	Average		not c		more	than o		Reportable	Reportable			timate	
		hours per week					s both or/trus		compensation from	compensation from related			other	of
		(list any	tor						the	organizations			pensa	tion
		hours for	r direc				pa		organization	(W-2/1099-MISC	C/		om th	
		related	stee o	rustee			ensat	9	(W-2/1099-MISC/	1099-NEC)		org	anizat	ion
		organizations below	al trus	onal tr		Noyee	comp		1099-NEC)				d relat	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensate employee	Former				orga	ınizati	ons
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	- Company to the Company of the Comp													
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1h	Subtatal	1		l	L	<u></u>	L	L.,	0.		0.		-	0.
10	Subtotal Total from continuation sheets to Part V	II Section A							0.		0.			0.
	Total (add lines 1b and 1c)								0.		0.			0.
2	Total number of individuals (including but i				SS 0 0 1 1 1 1						<u> </u>			•
	compensation from the organization													0
	District the second second										ı		Yes	No
3	Did the organization list any former officer					-	- 6	_		,				37
4	line 1a? If "Yes," complete Schedule J for	such individual				 						3		Х
4	For any individual listed on line 1a, is the s													X
5	and related organizations greater than \$15 Did any person listed on line 1a receive or	accrue comper	. co sati	on fr	om	anv	unre	late	or such individual ed organization or individ	fual for services		4		27
	rendered to the organization? If "Yes." cor											5	773	X
Sec	ction B. Independent Contractors	-processor		<u> </u>	بسعا									
1	Complete this table for your five highest co	ompensated inc	lepe	nder	nt co	ontra	actor	's th	nat received more than \$	100,000 of compe	ensat	ion fro	m	
	the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith o	or wi	thin	the organization's tax y	ear.				
	(A) Name and business	addross	3.77		,				(B)	an ilaa	_	(C		
	Name and business	address	TAC	INC	<u> </u>		-	+	Description of s	ervices		ompe	isalio	
				11/1/										
				<u> </u>				1	**************************************					
		- William												
2	Total number of independent contractors (ot lir	nited	d to	100	23	ted	above) who received mo	ore than				
	\$100,000 of compensation from the organ	ization				(6314				Form	000 /	2000)

Form 990 (2023) FRIENDS OF THE TROOPS

Part VIII Statement of Revenue

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

					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	(D) Revenue excluded
						function revenue	business revenue	from tax under
								sections 512 - 514
ä.	mounts		Federated campaigns 1a					
G.	2		Membership dues 1b					
Contributions, Gifts, Grants	₹	С	Fundraising events 1c					
£ 3	E E	d	Related organizations 1d					
s'	₫		Government grants (contributions) 1e					
. <u></u>	9		All other contributions, gifts, grants, and					
gr	9		similar amounts not included above 1f	424,237.				
250	3	а		338,998.				
Ö	3				404 000			
0	4	-11	Total. Add lines 1a-1f		424,237.			
	١.			Business Code				
Program Service	1 2	2 a						
20 0	D	b						
ν, i		С	-					
ar	2	d						
) ga	9	е						
F.			All other program service revenue					
			Total Add lines 2s 2f					
	3	9	Total. Add lines 2a-2f					
	٦	•	Investment income (including dividends, intere	Second and the control of the contro				
			other similar amounts)		W.			
	4		Income from investment of tax-exempt bond p	roceeds				
	5	;	Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
	١ ـ		Net rental income or (loss)					
	'	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
		b	Less: cost or other basis					
ne			and sales expenses7b					
len		С	Gain or (loss) 7c					
è			Net gain or (loss)					
Other Revenue	Q	2	Gross income from fundraising events (not					
ŧ.	٥							
٥			including \$ of					
100			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses 8b					
		С	Net income or (loss) from fundraising events					
	9		Gross income from gaming activities. See					
			Dank N./ Bur do					
		h	Part IV, line 19 9a					
			Less: direct expenses 9b					
WY.		С	Net income or (loss) from gaming activities					-
	10		Gross sales of inventory, less returns					Made March 1980 March
			and allowances10a					
- 1		b	Less: cost of goods sold 10b					
		С	Net income or (loss) from sales of inventory					
				Business Code				
Sno	11	a		Dusiness Code				
Je de								
la le le		b.						
scellaneo Revenue		С.						
Miscellaneous Revenue		d /	All other revenue					
		e :	Total. Add lines 11a-11d					
	12	_ 1	Total revenue. See instructions		424,237.	0.		
22000	10.0				,,	0.	0.	0.

Form 990 (2023) FRIENDS OF THE TROOPS
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must compl	ete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respons				
	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22 Grants and other assistance to foreign				
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
4 5	Compensation of current officers, directors,				
3	trustees, and key employees				
6	Compensation not included above to disqualified				
_	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				`
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	3,684.		3,684.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
100.20	column (A), amount, list line 11g expenses on Sch O.)	FOC		FAC	
12	Advertising and promotion	506. 944.		506. 944.	
13	Office expenses	689.		689.	
14	Information technology	003.		009.	-
15	Royalties				
16 17	Occupancy				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,340.		1,340.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	PROGRAM SUPPLIES	303,907.	303,907.		
b	SHIPPING FOR PROGRAMS	62,094.	62,094.		
С	MISCELLANEOUS	1,964.		1,964.	
d	STATE & BUSINESS FILING	639.		639.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	375,767.	366,001.	9,766.	0.
26	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 (2023)
Part X Balance Sheet

1			Check if Schedule O contains a response or note to any line in this Part 2	Χ		
2 Savings and temporary cash investments 2 3 3 4 Accounts receivable, net 4 4 5 Loans and other receivable, net 4 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 33% controlled entity or family member of any of these persons 5 5 Controlled entity or family member of any of these persons 5 5 Controlled entity or family member of any of these persons 5 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 6 Controlled entity or family member of any of these persons 5 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member				(A)		(B)
2 Savings and temporary cash Investments 2 3		1	Cash - non-interest-bearing	110,149.	1	159,051.
3 Pledges and grants receivable, net 3 4 4 5		2			2	
4 Accounts receivable, net 5 Lossa 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 Lossa and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(8) 7 Notes and losans receivable, net 8 Inventories for sale or use 9 Prepale deprenses 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 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 fmust equal line 33) 110 , 149 , 16 159, 051. 17 Accounts payable and accrued expenses 17 , 17 18 Grants payable 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Losens 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 mortages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities included on lines 17-24. Complete Part X of Schedule D 26 Total stabilities, Add lines 17 through 25 27 (Through 25 Total controlled entity or family member of any of these persons 28 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 29 Organizations that follow FASB ASC 958, check here and complete lines 29 through 33. 27 Net assets with donor restrictions 29 Organizations that follow FASB ASC 958, check here and complete lines 29 through 33. 21 Net assets with donor restrictions 29 Organizations that on to follow FASB ASC 958, c		3			3	
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Controlled entity or family member of any of these persons 5		5				
Section 2007 Sect			trustee, key employee, creator or founder, substantial contributor, or 35%	6		
1989 1989			controlled entity or family member of any of these persons		5	
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8	s	7			7	
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14		13				
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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 liabilities and net assets/fund balances 34 Total liabilities and net assets/fund balances 35 Total liabilities and net assets/fund balances 36 O · 29 O · 0 · 0 · 0 · 0 · 0 · 0 · 0 · 0 · 0 ·	Bal	28				
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32 Total net assets or fund balances 110,072. 32 159,051. 33 Total liabilities and net assets/fund balances 110,149. 33 159,051.	Ass					
33 Total liabilities and net assets/fund balances 110,149. 33 159,051.	let					
				110,149.		

Pa	art XI Reconciliation of Net Assets	03-33	009012	Pag	ge 1
	Check if Schedule O contains a response or note to any line in this Part XI				
	and a response of note to any line in this Part XI				
1	Total evenue (must equal Part VIII, column (A), line 12)		404		^ F
2	Total expenses (must equal Part IX, column (A), line 25)	1	424		
3	Revenue less expenses. Subtract line 2 from line 1	2	375		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	3		, 4'	
5	Net unrealized gains (losses) on investments	4	110	, 0	12.
6	Donated services and use of facilities Investment expanses	5			
7	Investment expenses	6			
8		7		-	-
9	Other changes in not accept as fund below as (see L.)	8		50	9.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	9			0.
	column (B))		1 - 0		
Pa	column (B)) rt XIII Financial Statements and Reporting	10	159	, 05	1.
	Check if Schedule O contains a response or note to any line in this Part XII				
	The or the order of the strains at All		······································	T	
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule				
2a	were the organization's financial statements compiled or reviewed by an independent				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		2a		X
	separate basis, consolidated basis, or both:	on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements qualited by a lind and separate pasis		100000		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		2b		X
	consolidated basis, or both:	basis,			
	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				
	TOVICW, UL COMBINION OF Its inancial etatements and calcuting at the second second and calcuting at the second second and calcuting at the second sec				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche		2c		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	dule O.			
	Uniform Guidanaa 2 C E D Dad aaa a L L L L				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		. 3a		X
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	ed audit			
	sand decombe any steps taken to undergo such audits		3b	L	
			Form 9	90 (2)	023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

2023

Open to Public Inspection

Employer identification number

FRIENDS OF THE TROOPS 83-3309612 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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.) 8 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 12g. 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 II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iv) is the organization listed in your governing document? (iii) Type of organization (v) Amount of monetary (vi) Amount of other organization (described on lines 1-10) support (see instructions) support (see instructions) Yes No above (see instructions)) Total

Schedule A (Form 990) 2023 FRIENDS OF THE TROOPS 83-3309

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

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

2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, 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.) 11 Total support. Add line 5 Through 10 2 Gross receipts from related activities, etc. (see instructions) 12 3 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	Sec	tion A. Public Support							
1 Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization is benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 63,765. 397,252. 477,875. 483,373. 424,237. 1846502 7 Total Add lines 1 through 3 7 The potion 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) 8 Public support. Secreta the 5 from line 4. Section B. Total Support 8 Gross income from line 4 8 Gross income from line 4 8 Gross income from interest, 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 or loss from the sele of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this loss and stop here [X] 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 Evdilc support percentage from 2022 Schedule A, Part II, line 14	Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
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6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 63,765. 397,252. 477,875. 483,373. 424,237. 1846502 8 Gross income from interest, 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.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 Public support percentage from 2022 Schedule A, Part II, line 14 15 Public support percentage from 2022 Schedule A, Part II, line 14									
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15 Public support percentage from 2022 Schedule A, Part II, line 14	-								
					olumn (f))			%	
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and								%	
	16a					14 is 33 1/3% or m	ore, check this box	and	
stop here. The organization qualifies as a publicly supported organization	l.								
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box	D								
and stop here. The organization qualifies as a publicly supported organization	47.								
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,	1/a								
and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization							VI how the organiz	ation	
meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						•			
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	b							10% or	
		more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the							
organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	10								
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990) 202	10	rivate loundation, if the organizatio	ii did not check a t	DOX ON TIME 13, 168	a, 100, 17a, or 17b	, cneck this box ai			

FRIENDS OF THE TROOPS 83-3309612 Page 3 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 (f) Total **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b. whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 % 16 Public support percentage from 2022 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 % 18 Investment income percentage from 2022 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule A (Form 990) 2023 FRIE 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.)

			Yes	No
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.	1		
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	DOM:		
30	organization was described in section 509(a)(1) or (2).	2		
Ja	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	0.		
h	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	3a		
~	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	35		
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	Зс		
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.	4a		
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.	4b		
С	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.	4c		
эa	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).	50		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a		
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	- 00		
	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.	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?			
0-	If "Yes," complete Part I of Schedule L (Form 990).	8		
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	9a		
~	the supporting organization had an interest? If "Yes," provide detail in Part VI.	Oh		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	9b		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
0a	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.	10a		
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.)

	t IV Supporting Organizations (continued)			ige S
. 41			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
-	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes." explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		-	
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		<u> </u>
Sec	tion D. All Type III Supporting Organizations			
		-	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		We store
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	1 3		1
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	a.		
' a	The organization satisfied the Activities Test. Complete line 2 below.	7		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		e de la constant
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	200	

emergency temporary reduction (see instructions).

6

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

1

2

3

4

5

Adjusted net income for prior year (from Section A, line 8, column A)

Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990) 2023

Enter 0.85 of line 1.

Enter greater of line 2 or line 3.

Income tax imposed in prior year

4

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Organ	nizations (continu	ed)	
Section	on D - Distributions				Current Year
	Amounts paid to supported organizations to accomplish exe			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	
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	
	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.		- A - A - A - A - A - A - A - A - A - A	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 2023 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) Underdistributior Pre-2023	ns	(iii) Distributable Amount for 2023
1_	Distributable amount for 2023 from Section C, line 6				`
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years		and the second s		
h	Applied to 2023 distributable amount				
i_	Carryover from 2018 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
-	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023	FRIENDS	OF	THE	TROOPS		83-3309612 Page 8
Part VI	line 1; Part IV, Section A, lines 1,	2, 3b, 3c, 4b, lines 2 and 3; F	4c, 5a, art IV, :	6, 9a, 9t Section I	o, 9c, 11a, 11b E, lines 1c, 2a,	o, and 11c; Part IV, Sect . 2b, 3a, and 3b; Part V,	II, line 17a or 17b; Part III, line 12; ion B, lines 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V, r any additional information.
							
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-							
						-	
		W-1					

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

FRIENDS OF THE TROOPS

Employer identification number 83-3309612

Part I Types of Property (a) (b) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures 2 Art - Fractional interests Books and publications 4 132,510.FMV 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 Qualified conservation contribution -Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 206,488.FMV Food inventory 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 25 Other 26 Other 27 Other 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? X 32a b If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Schedule M (Form 990) 2023

Schedule M	1 (Form 990) 2023 FRIENDS OF THE TROOPS	83-3309612	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, a is reporting in Part I, column (b), the number of contributions, the number of items received, or a combit this part for any additional information.	and whether the organiza nation of both. Also com	ation plete
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SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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.

2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDS OF THE TROOPS

Employer identification number 83-3309612

TRIBADD OF THE TROOFS
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 IRES
FORM 990, PART VI, SECTION B, LINE 12C:
A CONFLICT OF INTEREST POLICY IS INCLUDED IN THE ORGANIZATION'S BYLAWS,
WHICH ARE REVIEWED AT BOARD MEETINGS.
FORM 990, PART VI, SECTION C, LINE 19:
ALL GOVERNING DOCUMENTS ARE POSTED EITHER TO THE ORGANIZATION'S WEBSITE OR
ARE AVAILABLE UPON REQUEST.