

Forms 990 / 990-EZ Return Summary

For calendar year 2024, or tax year beginning , and ending

82-2703338

The Lakou NFP

Net Asset / Fund Balance at Beginning of Year 1,045,075

Revenue

Contributions	471,640
Program service revenue	116,682
Investment income	5,956
Capital gain / loss	
Fundraising / Gaming:	
Gross revenue	
Direct expenses	
Net income	
Other income	5,881

Total revenue 600,159

Expenses

Program services	673,949
Management and general	119,295
Fundraising	8,130

Total expenses 801,374

Excess / (deficit) -201,215

Changes -5,260

Net Asset / Fund Balance at End of Year 838,600

Reconciliation of Revenue

Total revenue per financial statements	
Less:	
Unrealized gains	
Donated services	
Recoveries	
Other	
Plus:	
Investment expenses	
Other	
Total revenue per return	600,159

Reconciliation of Expenses

Total expenses per financial statements	
Less:	
Donated services	
Prior year adjustments	
Losses	
Other	
Plus:	
Investment expenses	
Other	
Total expenses per return	801,374

Balance Sheet

	Beginning	Ending	Differences
Assets	1,045,075	838,600	
Liabilities			
Net assets	1,045,075	838,600	-206,475

Miscellaneous Information

Amended return
Return / extended due date 11/15/25
Failure to file penalty

Form 114a Department of the Treasury Financial Crimes Enforcement Network (FinCEN) May 2015	Record of Authorization to Electronically File FBARs (See instructions below for completion) <u>Do not send to FinCEN. Retain this form for your records.</u> The form 114a may be digitally signed	FINANCIAL CRIMES ENFORCEMENT NETWORK
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Part I Persons who have an obligation to file a Report of Foreign Bank and Financial Account(s)

1. Owner last name or entity's legal name The Lakou NFP	2. Owner first name	3. Owner M. I.
4. Spouse last name (if jointly filing FBAR - see instructions below)	5. Spouse first name	6. Spouse M. I.

I/we declare that I/we have provided information concerning 1 (enter number of accounts) foreign bank and financial account(s) for the filing year ending December 31, **2024** to the preparer listed in Part II; that this information is to the best of my/our knowledge true, correct, and complete; that I/we authorize the preparer listed in Part II to complete and submit to the Financial Crimes Enforcement Network (FinCEN) a Report of Foreign Bank and Financial Accounts (FBAR) based on the information that I/we have provided; and that I/we authorize the preparer listed in Part II to receive information from FinCEN, answer inquiries and resolve issues relating to this submission. I/we acknowledge that, notwithstanding this declaration, it is my/our legal responsibility, not that of the preparer listed in Part II, to timely file an FBAR if required by law to do so.

7. Owner signature (Authorized representative if entity)	8. Date 08/26/2025 MM DD YYYY	9. Owner or entity TIN 82-2703338	10. TIN type a ☒ EIN b ☐ SSN/ITIN c ☐ Foreign
11. Spouse signature	12. Date _____ MM DD YYYY	13. Spouse TIN	14. TIN type a ☐ EIN b ☐ SSN/ITIN c ☐ Foreign

Part II Individual or Entity Authorized to File FBAR on behalf of Persons who have an obligation to file.

15. Preparer last name Rozovics	16. Preparer first name Jeffery	17. Preparer M.I. A	18. Preparer PTIN P00227382
19. Address 805 W. Touhy Ave	20. City Park Ridge	21. State IL	22. ZIP/postal code 60068
23. Country code US	24. Preparer's (item 15) employer's (Entity) name Rozovics Group, LLP	25. Employer EIN 80-0955974	26. Preparer's signature

Instructions for completing the FBAR Signature Authorization Record
This is a fill and print form using Adobe Reader

This record may be completed by the individual or entity granting such authorization (Part I) OR the individual/entity authorized to perform such services. The completed record must be signed by the individual(s)/entity granting the authorization (Part I) and the individual/entity that will file the FBAR. The Preparer/filing entity must be registered with FinCEN BSA E-File system. (See <http://bsaefiling.fincen.treas.gov/main.html> for registration).

Read and complete the account owner statement in Part I.

To authorize a third party to file the Foreign Bank and Financial Accounts Report (FBAR), the account owner should complete Part I, items 1 through 3 (as required), sign and date the document in Part I, Items 7/8 and complete items 9 and 10. Item 7 may be digitally signed.

Accounts Jointly Owned by Spouses (see exceptions in the FBAR instructions)

If the account owner is filing an FBAR jointly with his/her spouse, the spouse must also complete Part I, items 4 through 6. The spouse must also sign and date the report in items 11/12, (item 11 may be digitally signed) and complete items 13 and 14. A third party preparer may be one of the spouses of the jointly owned foreign account. In this case, both spouses must complete Part I of form 114a in its entirety. The third party preparer (spouse) that will file the FBAR on behalf of both spouses will complete Part II in its entirety (do not use such terms as see above, or same as item number x).

Complete Part II, items 15 through 18 with the preparer's information. The address, items 19 through 23, is that of the preparer **or** the preparer's employer if the preparer is an employee. Record the employer's information (if any) in items 24 and 25. If the preparer does not have a PTIN, leave item 18 blank. The third party preparer must sign in item 26 (digital signature acceptable) of Part II indicating that the FBAR will be filed as directed by the authorizing authority.

The person(s) listed in Part I, and the person listed in Part II as authorized to file on behalf of the person(s) listed in Part I, should retain copies of this record of authorization and the filing itself, both for a period of 5 years. See 31 CFR 1010. 430(d).

DO NOT SEND THIS RECORD TO FinCEN UNLESS REQUESTED TO DO SO.

Form 990		FinCEN 114 - Report of Foreign Bank and Financial Accounts, Page 1		2024
For calendar year 2024 or tax year beginning , ending				
Name The Lakou NFP			Employer Identification Number 82-2703338	

Warning: Printed versions of the BSA E-Filing forms are not for submission
and will not be processed by FinCEN

1 This report is for calendar year ended 12/31 **2024**
Amended ☒ Prior report BSA Identifier **31000296606976**
Reason if filing late

Part I - Filer Information

2 Type of filer **Tax-exempt entity**
3 U.S. Taxpayer Identification Number **822703338**
3a TIN type **EIN**
4 Foreign identification
4a Type
4b Number
4c Country of Issue
5 Individual's date of birth
6 Last name or organization name **The Lakou NFP**
7 First name
8 Middle initial
8a Suffix
9 Mailing address **805 W. Touhy Ave**
10 City **Park Ridge**
11 State **IL Illinois**
12 Zip/postal code **60068**
13 Country **US**
14a Does the filer have a financial interest in 25 or more financial accounts?
Yes ☐ If "Yes" enter total number of accounts
No ☒
14b Does the filer have signature authority over but no financial interest in 25 or more financial accounts?
Yes ☐ If "Yes" enter total number of accounts
No ☒

Client Copy Only

Form 990		FinCEN 114 - Report of Foreign Bank and Financial Accounts, Page 2		2024
For calendar year 2024 or tax year beginning , ending				
Name The Lakou NFP			Employer Identification Number 82-2703338	

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and will not be processed by FinCEN

Part II - Information on Financial Account(s) Owned Separately 1 of 1

15	Maximum account value	143,935	15a	Maximum account value unknown	☐
16	Type of account	Bank			
17	Name of financial institution in which account is held	Unibank S.A.			
18	Account number or other designation	60116221758595			
19	Mailing address				
20	City	Port-Au-Prince	21	State	
22	Foreign postal code		23	Country	HT Haiti

Part II - Information on Financial Account(s) Owned Separately of

15	Maximum account value		15a	Maximum account value unknown	☐
16	Type of account				
17	Name of financial institution in which account is held				
18	Account number or other designation				
19	Mailing address				
20	City		21	State	
22	Foreign postal code		23	Country	

Part II - Information on Financial Account(s) Owned Separately of

15	Maximum account value		15a	Maximum account value unknown	☐
16	Type of account				
17	Name of financial institution in which account is held				
18	Account number or other designation				
19	Mailing address				
20	City		21	State	
22	Foreign postal code		23	Country	

Part II - Information on Financial Account(s) Owned Separately of

15	Maximum account value		15a	Maximum account value unknown	☐
16	Type of account				
17	Name of financial institution in which account is held				
18	Account number or other designation				
19	Mailing address				
20	City		21	State	
22	Foreign postal code		23	Country	

Part II - Information on Financial Account(s) Owned Separately of

15	Maximum account value		15a	Maximum account value unknown	☐
16	Type of account				
17	Name of financial institution in which account is held				
18	Account number or other designation				
19	Mailing address				
20	City		21	State	
22	Foreign postal code		23	Country	

Form 990		FinCEN 114 - Report of Foreign Bank and Financial Accounts, Page 5		2024
For calendar year 2024 or tax year beginning , ending				
Name The Lakou NFP			Employer Identification Number 82-2703338	

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and will not be processed by FinCEN

44a	Check if report completed by a third party preparer, complete the third party preparer section	X
44	Filer signature PIN (Enter the PIN assigned by FinCEN used to sign the FBAR)	Form 114a signed, PIN not required
45	Filer title	
46	Date of signature	08/26/2025

Third Party Preparer Use Only

47	Preparer's last name	Rozovics
48	First name	Jeffery
49	Middle name/initial	A
50	Check if self-employed	☐
51	Preparer's TIN	P00227382
51a	TIN type	PTIN
52	Contact phone number	847-699-7600
52a	Extension	
53	Firm's name	Rozovics Group, LLP
54	Firm's TIN	80-0955974
54a	TIN type	EIN
55	Mailing address	805 W. Touhy Ave
56	City	Park Ridge
57	State	IL
58	Zip/postal code	60068
59	Country	US US

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

2024

Open to Public Inspection

A

For the 2024 calendar year, or tax year beginning

, and ending

B

Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☒ Amended return

☐ Application pending

C

Name of organization

The Lakou NFP

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

805 W. Touhy Ave

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Park Ridge IL 60068

D

Employer identification number

82-2703338

E Telephone number

847-699-7600

G Gross receipts\$

600,159

F

Name and address of principal officer:

Randal J. Meyer

1934 State Route 26

Metamora IL 61548

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number

I

Tax-exempt status:

☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website:

www.lakou.org

K

Form of organization:

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation:

2017

M State of legal domicile:

IL

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:

See Schedule 0

2 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)

5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, Part I, line 11

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	567,983	471,640
9 Program service revenue (Part VIII, line 2g)	429,042	116,682
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	96	5,956
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	35,563	5,881
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,032,684	600,159
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	160,303	185,736
16a Professional fundraising fees (Part IX, column (A), line 11e)	17,903	0
b Total fundraising expenses (Part IX, column (D), line 25)	8,130	
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	616,958	615,638
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	795,164	801,374
19 Revenue less expenses. Subtract line 18 from line 12	237,520	-201,215
20 Total assets (Part X, line 16)	1,045,075	838,600
21 Total liabilities (Part X, line 26)	0	0
22 Net assets or fund balances. Subtract line 21 from line 20	1,045,075	838,600

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.

Sign Here

Signature of officer

Randal J. Meyer

President

Type or print name and title

Date

Paid Preparer Use Only

Preparer's name

Jeffery A. Rozovics

Preparer's signature

Date

08/27/25

Check ☐ if self-employed

PTIN

P00227382

Firm's name

Rozovics Group, LLP

Firm's EIN

80-0955974

Firm's address

805 W. Touhy Ave

Park Ridge, IL 60068

Phone no.

847-699-7600

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

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form 990 (2024)

Part 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:
See Schedule O
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
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 services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.
- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **551,305** including grants of \$) (Revenue \$)

Construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families and communities.

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

N/A

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

N/A

4d Other program services (Describe on Schedule O.)
(Expenses \$ **122,644** including grants of \$) (Revenue \$)

4e Total program service expenses **673,949**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 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? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	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 entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
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	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	1a	1
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	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	X
b	If "Yes," enter the name of the foreign country Haiti 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	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	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	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).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
c	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	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
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.		
a	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:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, 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? If "Yes," complete Form 6069.	17	

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 7 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 5		
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 direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 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:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
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		X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe 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	
c 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?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b	X	
If "Yes" to line 15a or 15b, describe the process 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? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☐ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

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

David E. Haracz
Park Ridge

805 W. Touhy Ave

IL 60068

773-718-9978

Form 990 (2024)

The Lakou NFP**82-2703338**Page **7****Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Lanae B Meyer Director	40.00 0.00	X		X				41,944	0	0
(2) Randal J. Meyer President	40.00 0.00	X						41,944	0	0
(3) Darryl August Director	0.00 0.00	X						0	0	0
(4) Franco Cobite Director	0.00 0.00	X						0	0	0
(5) Steve Cook Director	0.00 0.00	X						0	0	0
(6) Luvthageline Jean Director	0.00 0.00	X						0	0	0
(7) Thomas Keenan Director	0.00 0.00	X						0	0	0
(8) William C. Murphy Secretary	0.00 0.00	X						0	0	0
(9) Mike Petersen Director	0.00 0.00	X						0	0	0
(10) Carl Sajous Director	0.00 0.00	X						0	0	0
(11) Jack Scapin Director	0.00 0.00	X						0	0	0

Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								83,888		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								83,888		

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	0						
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>3</td><td></td><td>X</td></tr></table>		Yes	No	3		X
	Yes	No						
3		X						
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>4</td><td></td><td>X</td></tr></table>		Yes	No	4		X
	Yes	No						
4		X						
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>5</td><td></td><td>X</td></tr></table>		Yes	No	5		X
	Yes	No						
5		X						

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		0

Form 990 (2024)

The Lakou NFP**82-2703338**Page **9****Part VIII****Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	471,640				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			471,640			
Program Service Revenue			Business Code				
	2a Reimbursements			78,682	78,682		
	b Special Events			38,000	38,000		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			116,682			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			5,956	5,956		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		6a					
		b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7a					
		b Less: cost or other basis and sales exps.	7b				
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18						
		8a					
		b Less: direct expenses	8b				
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19							
	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances							
	10a						
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11a Other Revenue			5,881	5,881		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			5,881			
12 Total revenue. See instructions			600,159	128,519	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

X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	83,888	83,888		
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	76,628		76,628	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	11,251	9,602	1,649	
10 Payroll taxes	13,969		13,969	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	2,710		2,710	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	189,197	164,392	20,875	3,930
12 Advertising and promotion	1,059			1,059
13 Office expenses	3,141			3,141
14 Information technology	2,243	2,243		
15 Royalties				
16 Occupancy	58,000	58,000		
17 Travel	4,757	4,757		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	82,803	82,803		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a Building & Equipment	117,032	117,032		
b Administration	85,436	85,436		
c Vehicles	22,934	22,934		
d Travel	20,273	20,273		
e All other expenses	26,053	22,589	3,464	
25 Total functional expenses. Add lines 1 through 24e	801,374	673,949	119,295	8,130
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)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	267,785	1	210,531
	2 Savings and temporary cash investments	321,874	2	262,415
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,699	4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 652,670		
	b Less: accumulated depreciation	10b 287,016	10c	365,654
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,045,075	16	838,600	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	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	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26 Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,045,075	27	838,600
	28 Net assets with donor restrictions		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		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	1,045,075	32	838,600
33 Total liabilities and net assets/fund balances	1,045,075	33	838,600	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	600,159
2	Total expenses (must equal Part IX, column (A), line 25)	2	801,374
3	Revenue less expenses. Subtract line 2 from line 1	3	-201,215
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,045,075
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	-5,260
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	838,600

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Federal Statements

Statement 1 - Form 4562, Line 26 - Property Used More Than 50% in a Qualified Business

		Property Type							
		Date	Business %	Cost	Depr Basis	Period	Method	Deduction	Section 179
2015 F550 Truck		8/27/20	100.00	\$ 30,310	\$ 30,310	7.0	S/L-	\$ 4,330	\$
Truck		10/21/21	100.00	42,900	42,900	7.0	S/L-	5,860	
Ford Ranger Truck		12/31/18	100.00	25,625	25,625	7.0	S/L-	2,075	
Total				\$ 98,835	\$ 98,835			\$ 12,265	\$ 0

SCHEDULE A
(Form 990)

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

2024

Open to Public
Inspection

Name of the organization

The Lakou NFP

Employer identification number

82-2703338

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f

☐

Enter the number of supported organizations
- g

☐

Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	321,529	750,132	519,238	567,983	471,640	2,630,522
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	321,529	750,132	519,238	567,983	471,640	2,630,522
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						2,630,522

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	321,529	750,132	519,238	567,983	471,640	2,630,522
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	10	28				38
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						2,630,560
12 Gross receipts from related activities, etc. (see instructions)					12	728,592

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 for 2024 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test — 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support test — 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
17a 10%-facts-and-circumstances test — 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐		
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 ☐		

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 2024 (line 8, column (f), divided by line 13, column (f))	15		%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16		%

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17		%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18		%
19a 33 1/3% support tests — 2024. 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 — 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions			

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b 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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described 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		
c 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		

Section 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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section 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		

Section 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		
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 supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to each of its 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.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.			
3a			
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			

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

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	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-functionally integrated Type III supporting organization (see instructions).

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

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Name of the organization	Employer identification number
The Lakou NFP	82-2703338

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

Name of organization	Employer identification number
The Lakou NFP	82-2703338

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Christine Baum 5711 E. Huntress Drive Paradise Valley AZ 85253	\$ 25,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2	Sun Valley Masonry 10828 N. Cave Creek Rd Phoenix AZ 85020	\$ 38,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
3	Stacey & Mark Steffen 801 Overlook Drive Prosper TX 75078	\$ 25,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
4	Rumbold & Kuhn, Inc. 14890 Township Rd 300 N Wyoming IL 61491	\$ 20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
5	Erica & Todd Baum 4402 E. Via Montoya Dr. Phoenix AZ 85050	\$ 16,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
6	Stefanie & Randy Wuethrich 5547 E. Beryl Ave Paradise Valley AZ 85253	\$ 20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

The Lakou NFP

Employer identification number

82-2703338**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Joyce & Glen Metzger 802 Dove Ave #S-1, Box 720 Lester IA 51242	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
8	Tim & Dana Schneider 479 Somers Rd. Ellington CT 06029	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
9	Jody & Ken Baum 123 SW Jefferson Ave, Ste 108 Peoria IL 61602	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
10	Mary Dolan & Dave Haracz 1427 Judson Ave Evanston IL 60201	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
11	Linda & Steve Patton 1242 N. Lake Shore Dr. #14S Chicago IL 60610	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
12	Nicole & Todd Steffen 5523 E. Crocus Drive Scottsdale AZ 85254	\$ 15,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

The Lakou NFP

Employer identification number

82-2703338**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	River Valley Cooperative 14890 Township Rd 300 N Wyoming IL 61491	\$ 15,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
14	Wilson Hunt International, Ltd. 2800 Lakeside Dr Bannockburn IL 60015	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
15	First Tech Federal CU PO Box 2100 Beaverton OR 97075	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
16	Connie & Kurt Christ 4321 N. Texas Rd Elmwood IL 61529	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
17	Laurie & Herb 6224 E. Berneil Ln. Paradise Valley AZ 85253	\$ 40,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
18	Ryan Rumbold 7726 N Radnor Rd Peoria IL 61615	\$ 10,300	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
The Lakou NFP	82-2703338

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	Cole Rumbold 2903 Sidney St, Apt A St. Louis MO 63104	\$ 10,300	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
Open to Public Inspection

Name of the organization	Employer identification number
The Lakou NFP	82-2703338

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conversation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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

3

Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange program

e

☐

Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐

Yes

☐

No

Part IV Escrow and Custodial Arrangements

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐

Yes

☐

No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐

Yes

☐

No

b

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

☐

Part V Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

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

a

Board designated or quasi-endowment

%

b

Permanent endowment

%

c

Term endowment

%

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

3a

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

(i)

Unrelated organizations?

(ii)

Related organizations?

3a(i)

☐

Yes

3a(ii)

☐

No

3b

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

4

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		255,192	159,017	96,175
e Other		397,478	127,999	269,479
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				365,654

Schedule D (Form 990) (Rev. 12-2024)

DAA

Part VII

Investments – Other Securities

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

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

Part VIII

Investments – Program Related

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

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

Part IX

Other Assets

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

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

Part X

Other Liabilities

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

1.

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☐

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

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

Supplemental Information

SCHEDULE O (Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 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 The Lakou NFP		Employer identification number 82-2703338

Amended Return Explanation
Return amended to update answers to questions in Part VI, Section B & C and Schedule O Part VI Line 19.

Form 990 - Organization's Mission or Most Significant Activities
The organization's mission is to provide construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families, and communities.

Form 990 - Organization's Mission
The organization's mission is to provide construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families, and communities.

Form 990, Part III, Line 4d - All Other Accomplishments
Construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families and communities.

Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries
Haiti

Form 990, Part VI, Line 2 - Related Party Information Among Officers	
Randal J. Meyer	Lanae Meyer
President	Director
Married	

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
Tax returns will be reviewed by the board of directors.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
There is a Conflicts of Interests policy which is distributed annually and each board member is required to fill out and re-sign said disclosure.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
A wage comparison is made by the Director of Finance of similar Non profits through 990 comparisons, talking to industry experts and recruiters. All staff, including the Executive Director are then budgeted, which is approved by the Board. All salaries and wages are clearly defined by position, so that the Board has a clear understanding of the compensation. Wage reviews are completed once a year at Budget approval

Form 990, Part VI, Line 15b - Compensation Process for Officers
A wage comparison is made by the Director of Finance of similar Non profits through 990 comparisons, talking to industry experts and recruiters. All staff, including the Executive Director are then budgeted, which is approved by the Board. All salaries and wages are clearly defined by position, so that the Board has a clear understanding of the compensation.

SCHEDULE O
(Form 990)
(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 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

The Lakou NFP

Employer identification number

82-2703338

Wage reviews are completed once a year at Budget approval

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
The Organazation's governing documents and Conflict of Interest Policy are made available upon request. The Financial Statements are made available upon request and are on the Organization's website.

Form 990, Part IX, Line 11g - Other Fees for Services

Description	Tot/Prog Service	Mgt & General	Fundraising	
Independent Contractor Fees				
\$	164,392	\$	0	
Business Registration Fees				
\$	0	\$	20,875	
Stripe Processing Fee				
\$	0	\$	0	
Special Event				
\$	0	\$	2,641	
Donor Management Program				
\$	0	\$	821	
\$	0	\$	468	
Total				
\$	164,392	\$	20,875	
			\$	3,930

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation	
Book / Tax Depreciation Difference	\$ -5,260
Prior Year Adjustment	\$ 0
Total	\$ -5,260

Form **4562**

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Depreciation and Amortization
(Including Information on Listed Property)
Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2024
Attachment Sequence No. **179**

The Lakou NFP

Identifying number
82-2703338

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	60,415

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	10,123
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	12,265
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	82,803
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V

Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?

☒ Yes☐ No

24b If "Yes," is the evidence written?

☒ Yes☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25	Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions						25	
26	Property used more than 50% in a qualified business use:							
See Statement 1		%	98,835	98,835			12,265	
		%						
27	Property used 50% or less in a qualified business use:							
		%				S/L-		
		%				S/L-		
28	Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28	12,265
29	Add amounts in column (i), line 26. Enter here and on line 7, page 1							29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30	Total business/investment miles driven during the year (don't include commuting miles)					
31	Total commuting miles driven during the year					
32	Total other personal (noncommuting) miles driven					
33	Total miles driven during the year. Add lines 30 through 32					
34	Yes	No	Yes	No	Yes	No
35						
36						

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		X
39	Do you treat all use of vehicles by employees as personal use?		X
40	Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		X
41	Do you meet the requirements concerning qualified automobile demonstration use? See instructions		X

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42	Amortization of costs that begins during your 2024 tax year (see instructions):				
43	Amortization of costs that began before your 2024 tax year				43
44	Total. Add amounts in column (f). See the instructions for where to report				44

82-2703338

Federal Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:												
64	Laptop computers	1/17/23	1,850			X	370	5	MQ200DB		1,610	96
65	Rough Terrain Crane	1/23/23	55,000			X	11,000	5	MQ200DB		47,850	2,860
66	Skidsteer VIN 21502905	11/14/23	30,000			X	6,000	5	MQ200DB		24,300	2,280
67	2013 Caterpillar Telehandler	11/22/23	64,300			X	12,860	5	MQ200DB		52,083	4,887
			<u>151,150</u>				<u>30,230</u>				<u>125,843</u>	<u>10,123</u>
Other Depreciation:												
1	Mixer 9 cu ft Mortar Honda	1/20/20	3,200				3,200	5	MO S/L		1,920	640
2	Plate compactor	1/21/20	2,781				2,781	3	MO S/L		2,781	0
3	STIHL generator	1/21/20	1,230				1,230	3	MO S/L		1,230	0
4	Plasma cutter	1/23/20	2,000				2,000	3	MO S/L		2,000	0
5	Welding helmet, compressor, grinder, etc.	1/23/20	1,050				1,050	3	MO S/L		1,050	0
6	2 concrete mixers with 13HP Honda GX390	7/16/20	7,628				7,628	5	MO S/L		4,577	1,525
8	Yamaha motorcycle	8/27/20	2,200				2,200	7	MO S/L		943	314
9	Temp housing earthquake relief supplies	8/18/21	22,404				22,404	3	MO S/L		17,425	4,979
10	Electric 4 wheeler - Haiti	8/20/21	1,300				1,300	5	MO S/L		607	260
11	Generator - Haiti	8/20/21	7,660				7,660	6	MO S/L		2,979	1,277
12	Chainsaw - Haiti	8/20/21	750				750	3	MO S/L		583	167
13	Honda generator	8/20/21	600				600	3	MO S/L		467	133
14	Cement mixer - Haiti	8/20/21	800				800	5	MO S/L		373	160
15	Delta table saw - Haiti	8/20/21	250				250	5	MO S/L		117	50
16	Miller welder - Haiti	8/20/21	1,300				1,300	5	MO S/L		607	260
17	Chainsaw - Haiti	8/20/21	250				250	3	MO S/L		194	56
18	Table saw - Haiti	8/20/21	800				800	5	MO S/L		373	160
19	Drone - Haiti	8/20/21	400				400	3	MO S/L		311	89
20	Go-Pro camera - Haiti	8/20/21	150				150	3	MO S/L		117	33
21	Trailer	9/15/21	15,358				15,358	7	MO S/L		5,119	2,194
22	Trailer tires	9/21/21	778				778	3	MO S/L		583	195
23	Tables, chairs	9/23/21	1,871				1,871	5	MO S/L		842	374
24	Welder/generator	9/28/21	5,795				5,795	7	MO S/L		1,863	828
25	Scaffolding	9/28/21	3,531				3,531	7	MO S/L		1,135	504
26	Welding cable	9/28/21	750				750	3	MO S/L		563	187
27	EZ grout wall braces, box and pallet	9/29/21	11,000				11,000	7	MO S/L		3,536	1,571
28	Mortar/grout mixer	9/29/21	8,000				8,000	5	MO S/L		3,600	1,600
29	Rebar cutter	9/29/21	1,012				1,012	5	MO S/L		456	202
30	Scaffold frames	9/29/21	1,750				1,750	7	MO S/L		563	250
31	Concrete shoot	9/29/21	500				500	3	MO S/L		375	125
32	16' planks	9/29/21	3,840				3,840	3	MO S/L		2,880	960
33	2 mortar tubs	9/29/21	500				500	5	MO S/L		225	100
34	Level, 48" crick	10/04/21	702				702	3	MO S/L		526	176
35	Laser with tripod, transit with tripod	10/05/21	3,860				3,860	5	MO S/L		1,737	772
36	Welding cable	10/07/21	750				750	3	MO S/L		563	187
37	Atlas Bobcat	10/08/21	51,419				51,419	7	MO S/L		16,527	7,346
38	Concrete saws, power washer, generator	10/13/21	14,482				14,482	7	MO S/L		4,655	2,069
39	Wheelbarrow	10/18/21	2,048				2,048	3	MO S/L		1,479	569
40	Concrete mixer	10/18/21	4,849				4,849	5	MO S/L		2,101	970
41	Generator	10/28/21	1,800				1,800	3	MO S/L		1,300	500
44	Suzuki truck	7/31/19	5,000				5,000	7	MO S/L		5,000	0
45	MacBook (Randy's)	5/28/19	2,672				2,672	5	MO S/L		2,672	0
47	Solar panels	10/01/19	2,500				2,500	7	MO S/L		2,500	0
48	Large generator (Baliles)	10/23/19	1,000				1,000	7	MO S/L		1,000	0
49	Small generator (Baliles)	10/23/19	150				150	7	MO S/L		150	0
50	Compressor (Baliles)	10/23/19	500				500	7	MO S/L		500	0
51	Trash pump (Baliles)	10/23/19	350				350	5	MO S/L		350	0
52	T-shirts	10/29/19	439				439	3	MO S/L		439	0
53	Camera - Phantom 3	4/25/22	353				353	3	MO S/L		196	118
54	Drone - DJI Mavic	5/27/22	480				480	3	MO S/L		254	160
55	Fuel Transfer Pump	5/27/22	452				452	3	MO S/L		239	150
56	Excavator - FF2405X605835	7/01/22	62,500				62,500	7	MO S/L		13,393	8,928
57	Neville Built Trailier - INDD432XCH1750	7/09/22	35,320				35,320	7	MO S/L		7,569	5,045
58	Freightliner Tractor Truck	7/09/22	43,500				43,500	7	MO S/L		9,321	6,215
59	Concrete Bucket	9/27/22	6,027				6,027	7	MO S/L		1,076	861
60	Concrete Bucket	9/27/22	6,027				6,027	7	MO S/L		1,076	861
61	Concrete Side Chute	9/27/22	1,042				1,042	7	MO S/L		186	149
62	Electric rebar	9/28/22	5,025				5,025	7	MO S/L		897	718
63	Conrete Mixer Truck	9/30/22	38,000				38,000	7	MO S/L		6,786	5,428

Federal Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Total Other Depreciation			<u>402,685</u>			<u>402,685</u>		<u>142,886</u>	<u>60,415</u>
Total ACRS and Other Depreciation			<u>402,685</u>			<u>402,685</u>		<u>142,886</u>	<u>60,415</u>
Listed Property:									
7	2015 F550 Truck	8/27/20	30,310			30,310	7 MO S/L	12,990	4,330
42	Truck	10/21/21	42,900			42,900	7 MO S/L	13,279	5,860
43	Ford Ranger Truck	12/31/18	25,625			25,625	7 MO S/L	23,550	2,075
			<u>98,835</u>			<u>98,835</u>		<u>49,819</u>	<u>12,265</u>
Grand Totals			652,670			531,750		318,548	82,803
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>652,670</u>			<u>531,750</u>		<u>318,548</u>	<u>82,803</u>

82-2703338

IL Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
Prior MACRS:								
64	Laptop computers	1/17/23	1,850	370	1,610	96	96	0
65	Rough Terrain Crane	1/23/23	55,000	11,000	47,850	2,860	2,860	0
66	Skidsteer VIN 21502905	11/14/23	30,000	6,000	24,300	2,280	2,280	0
67	2013 Caterpillar Telehandler	11/22/23	64,300	12,860	52,083	4,887	4,887	0
			<u>151,150</u>	<u>30,230</u>	<u>125,843</u>	<u>10,123</u>	<u>10,123</u>	<u>0</u>
Other Depreciation:								
1	Mixer 9 cu ft Mortar Honda	1/20/20	3,200	3,200	1,920	640	640	0
2	Plate compactor	1/21/20	2,781	2,781	2,781	0	0	0
3	STIHL generator	1/21/20	1,230	1,230	1,230	0	0	0
4	Plasma cutter	1/23/20	2,000	2,000	2,000	0	0	0
5	Welding helmet, compressor, grinder, etc.	1/23/20	1,050	1,050	1,050	0	0	0
6	2 concrete mixers with 13HP Honda GX390	7/16/20	7,628	7,628	4,577	1,525	1,525	0
8	Yamaha motorcycle	8/27/20	2,200	2,200	943	314	314	0
9	Temp housing earthquake relief supplies	8/18/21	22,404	22,404	17,425	4,979	4,979	0
10	Electric 4 wheeler - Haiti	8/20/21	1,300	1,300	607	260	260	0
11	Generator - Haiti	8/20/21	7,660	7,660	2,979	1,277	1,277	0
12	Chainsaw - Haiti	8/20/21	750	750	583	167	167	0
13	Honda generator	8/20/21	600	600	467	133	133	0
14	Cement mixer - Haiti	8/20/21	800	800	373	160	160	0
15	Delta table saw - Haiti	8/20/21	250	250	117	50	50	0
16	Miller welder - Haiti	8/20/21	1,300	1,300	607	260	260	0
17	Chainsaw - Haiti	8/20/21	250	250	194	56	56	0
18	Table saw - Haiti	8/20/21	800	800	373	160	160	0
19	Drone - Haiti	8/20/21	400	400	311	89	89	0
20	Go-Pro camera - Haiti	8/20/21	150	150	117	33	33	0
21	Trailer	9/15/21	15,358	15,358	5,119	2,194	2,194	0
22	Trailer tires	9/21/21	778	778	583	195	195	0
23	Tables, chairs	9/23/21	1,871	1,871	842	374	374	0
24	Welder/generator	9/28/21	5,795	5,795	1,863	828	828	0
25	Scaffolding	9/28/21	3,531	3,531	1,135	504	504	0
26	Welding cable	9/28/21	750	750	563	187	187	0
27	EZ grout wall braces, box and pallet	9/29/21	11,000	11,000	3,536	1,571	1,571	0
28	Mortar/grout mixer	9/29/21	8,000	8,000	3,600	1,600	1,600	0
29	Rebar cutter	9/29/21	1,012	1,012	456	202	202	0
30	Scaffold frames	9/29/21	1,750	1,750	563	250	250	0
31	Concrete shoot	9/29/21	500	500	375	125	125	0
32	16' planks	9/29/21	3,840	3,840	2,880	960	960	0
33	2 mortar tubs	9/29/21	500	500	225	100	100	0
34	Level, 48" crick	10/04/21	702	702	526	176	176	0
35	Laser with tripod, transit with tripod	10/05/21	3,860	3,860	1,737	772	772	0
36	Welding cable	10/07/21	750	750	563	187	187	0
37	Atlas Bobcat	10/08/21	51,419	51,419	16,527	7,346	7,346	0
38	Concrete saws, power washer, generator	10/13/21	14,482	14,482	4,655	2,069	2,069	0
39	Wheelbarrow	10/18/21	2,048	2,048	1,479	569	569	0
40	Concrete mixer	10/18/21	4,849	4,849	2,101	970	970	0
41	Generator	10/28/21	1,800	1,800	1,300	500	500	0
44	Suzuki truck	7/31/19	5,000	5,000	5,000	0	0	0
45	MacBook (Randy's)	5/28/19	2,672	2,672	2,672	0	0	0
47	Solar panels	10/01/19	2,500	2,500	2,500	0	0	0
48	Large generator (Baliles)	10/23/19	1,000	1,000	1,000	0	0	0
49	Small generator (Baliles)	10/23/19	150	150	150	0	0	0
50	Compressor (Baliles)	10/23/19	500	500	500	0	0	0
51	Trash pump (Baliles)	10/23/19	350	350	350	0	0	0
52	T-shirts	10/29/19	439	439	439	0	0	0
53	Camera - Phantom 3	4/25/22	353	353	196	118	118	0
54	Drone - DJI Mavic	5/27/22	480	480	254	160	160	0
55	Fuel Transfer Pump	5/27/22	452	452	239	150	150	0
56	Excavator - FF2405X605835	7/01/22	62,500	62,500	13,393	8,928	8,928	0
57	Neville Built Trailier - INDD432XCH1750	7/09/22	35,320	35,320	7,569	5,045	5,045	0
58	Freightliner Tractor Truck	7/09/22	43,500	43,500	9,321	6,215	6,215	0
59	Concrete Bucket	9/27/22	6,027	6,027	1,076	861	861	0
60	Concrete Bucket	9/27/22	6,027	6,027	1,076	861	861	0
61	Concrete Side Chute	9/27/22	1,042	1,042	186	149	149	0
62	Electric rebar	9/28/22	5,025	5,025	897	718	718	0
63	Conrete Mixer Truck	9/30/22	38,000	38,000	6,786	5,428	5,428	0

IL Asset Report**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Basis for Depr</u>	<u>IL Prior</u>	<u>IL Current</u>	<u>Federal Current</u>	<u>Difference Fed - IL</u>
Total Other Depreciation			<u>402,685</u>	<u>402,685</u>	<u>142,886</u>	<u>60,415</u>	<u>60,415</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>402,685</u>	<u>402,685</u>	<u>142,886</u>	<u>60,415</u>	<u>60,415</u>	<u>0</u>
Listed Property:								
7	2015 F550 Truck	8/27/20	30,310	30,310	12,990	4,330	4,330	0
42	Truck	10/21/21	42,900	42,900	13,279	5,860	5,860	0
43	Ford Ranger Truck	12/31/18	25,625	25,625	23,550	2,075	2,075	0
			<u>98,835</u>	<u>98,835</u>	<u>49,819</u>	<u>12,265</u>	<u>12,265</u>	<u>0</u>
Grand Totals			652,670	531,750	318,548	82,803	82,803	0
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>652,670</u>	<u>531,750</u>	<u>318,548</u>	<u>82,803</u>	<u>82,803</u>	<u>0</u>

82-2703338

AMT Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:												
64	Laptop computers	1/17/23	1,850			X	370	5	MQ	200DB	1,610	96
65	Rough Terrain Crane	1/23/23	55,000			X	11,000	5	MQ	200DB	47,850	2,860
66	Skidsteer VIN 21502905	11/14/23	30,000			X	6,000	5	MQ	200DB	24,300	2,280
67	2013 Caterpillar Telehandler	11/22/23	64,300			X	12,860	5	MQ	200DB	52,083	4,887
			<u>151,150</u>				<u>30,230</u>				<u>125,843</u>	<u>10,123</u>
Other Depreciation:												
1	Mixer 9 cu ft Mortar Honda	1/20/20	3,200				3,200	5	MO	S/L	1,920	640
2	Plate compactor	1/21/20	2,781				2,781	3	MO	S/L	2,781	0
3	STIHL generator	1/21/20	1,230				1,230	3	MO	S/L	1,230	0
4	Plasma cutter	1/23/20	2,000				2,000	3	MO	S/L	2,000	0
5	Welding helmet, compressor, grinder, etc.	1/23/20	1,050				1,050	3	MO	S/L	1,050	0
6	2 concrete mixers with 13HP Honda GX390	7/16/20	7,628				7,628	5	MO	S/L	4,577	1,525
8	Yamaha motorcycle	8/27/20	2,200				2,200	7	MO	S/L	943	314
9	Temp housing earthquake relief supplies	8/18/21	22,404				22,404	3	MO	S/L	17,425	4,979
10	Electric 4 wheeler - Haiti	8/20/21	1,300				1,300	5	MO	S/L	607	260
11	Generator - Haiti	8/20/21	7,660				7,660	6	MO	S/L	2,979	1,277
12	Chainsaw - Haiti	8/20/21	750				750	3	MO	S/L	583	167
13	Honda generator	8/20/21	600				600	3	MO	S/L	467	133
14	Cement mixer - Haiti	8/20/21	800				800	5	MO	S/L	373	160
15	Delta table saw - Haiti	8/20/21	250				250	5	MO	S/L	117	50
16	Miller welder - Haiti	8/20/21	1,300				1,300	5	MO	S/L	607	260
17	Chainsaw - Haiti	8/20/21	250				250	3	MO	S/L	194	56
18	Table saw - Haiti	8/20/21	800				800	5	MO	S/L	373	160
19	Drone - Haiti	8/20/21	400				400	3	MO	S/L	311	89
20	Go-Pro camera - Haiti	8/20/21	150				150	3	MO	S/L	117	33
21	Trailer	9/15/21	15,358				15,358	7	MO	S/L	5,119	2,194
22	Trailer tires	9/21/21	778				778	3	MO	S/L	583	195
23	Tables, chairs	9/23/21	1,871				1,871	5	MO	S/L	842	374
24	Welder/generator	9/28/21	5,795				5,795	7	MO	S/L	1,863	828
25	Scaffolding	9/28/21	3,531				3,531	7	MO	S/L	1,135	504
26	Welding cable	9/28/21	750				750	3	MO	S/L	563	187
27	EZ grout wall braces, box and pallet	9/29/21	11,000				11,000	7	MO	S/L	3,536	1,571
28	Mortar/grout mixer	9/29/21	8,000				8,000	5	MO	S/L	3,600	1,600
29	Rebar cutter	9/29/21	1,012				1,012	5	MO	S/L	456	202
30	Scaffold frames	9/29/21	1,750				1,750	7	MO	S/L	563	250
31	Concrete shoot	9/29/21	500				500	3	MO	S/L	375	125
32	16' planks	9/29/21	3,840				3,840	3	MO	S/L	2,880	960
33	2 mortar tubs	9/29/21	500				500	5	MO	S/L	225	100
34	Level, 48" crick	10/04/21	702				702	3	MO	S/L	526	176
35	Laser with tripod, transit with tripod	10/05/21	3,860				3,860	5	MO	S/L	1,737	772
36	Welding cable	10/07/21	750				750	3	MO	S/L	563	187
37	Atlas Bobcat	10/08/21	51,419				51,419	7	MO	S/L	16,527	7,346
38	Concrete saws, power washer, generator	10/13/21	14,482				14,482	7	MO	S/L	4,655	2,069
39	Wheelbarrow	10/18/21	2,048				2,048	3	MO	S/L	1,479	569
40	Concrete mixer	10/18/21	4,849				4,849	5	MO	S/L	2,101	970
41	Generator	10/28/21	1,800				1,800	3	MO	S/L	1,300	500
44	Suzuki truck	7/31/19	5,000				5,000	7	MO	S/L	5,000	0
45	MacBook (Randy's)	5/28/19	2,672				2,672	5	MO	S/L	2,672	0
47	Solar panels	10/01/19	2,500				2,500	7	MO	S/L	2,500	0
48	Large generator (Baliles)	10/23/19	1,000				1,000	7	MO	S/L	1,000	0
49	Small generator (Baliles)	10/23/19	150				150	7	MO	S/L	150	0
50	Compressor (Baliles)	10/23/19	500				500	7	MO	S/L	500	0
51	Trash pump (Baliles)	10/23/19	350				350	5	MO	S/L	350	0
52	T-shirts	10/29/19	439				439	3	MO	S/L	439	0
53	Camera - Phantom 3	4/25/22	0				0	0	HY		0	0
54	Drone - DJI Mavic	5/27/22	0				0	0	HY		0	0
55	Fuel Transfer Pump	5/27/22	0				0	0	HY		0	0
56	Excavator - FF2405X605835	7/01/22	0				0	0	HY		0	0
57	Neville Built Trailier - INDD432XCH1750	7/09/22	0				0	0	HY		0	0
58	Freightliner Tractor Truck	7/09/22	0				0	0	HY		0	0
59	Concrete Bucket	9/27/22	0				0	0	HY		0	0
60	Concrete Bucket	9/27/22	0				0	0	HY		0	0
61	Concrete Side Chute	9/27/22	0				0	0	HY		0	0
62	Electric rebar	9/28/22	0				0	0	HY		0	0
63	Conrete Mixer Truck	9/30/22	0				0	0	HY		0	0

AMT Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Total Other Depreciation			<u>203,959</u>			<u>203,959</u>		<u>101,893</u>	<u>31,782</u>
Total ACRS and Other Depreciation			<u>203,959</u>			<u>203,959</u>		<u>101,893</u>	<u>31,782</u>
Listed Property:									
7	2015 F550 Truck	8/27/20	30,310			30,310	7 MO S/L	12,990	4,330
42	Truck	10/21/21	42,900			42,900	7 MO S/L	13,279	5,860
43	Ford Ranger Truck	12/31/18	25,625			25,625	7 MO S/L	23,550	2,075
			<u>98,835</u>			<u>98,835</u>		<u>49,819</u>	<u>12,265</u>
Grand Totals			453,944			333,024		277,555	54,170
Less: Dispositions and Transfers			0			0		0	0
Net Grand Totals			<u>453,944</u>			<u>333,024</u>		<u>277,555</u>	<u>54,170</u>

Bonus Depreciation Report**Form 990, Page 1**

<u>Asset</u>	<u>Property Description</u>	<u>Date In Service</u>	<u>Tax Cost</u>	<u>Bus Pct</u>	<u>Tax Sec 179 Exp</u>	<u>Current Bonus</u>	<u>Prior Bonus</u>	<u>Tax - Basis for Depr</u>
64	Laptop computers	1/17/23	1,850		0	0	1,480	370
65	Rough Terrain Crane	1/23/23	55,000		0	0	44,000	11,000
66	Skidsteer VIN 21502905	11/14/23	30,000		0	0	24,000	6,000
67	2013 Caterpillar Telehandler	11/22/23	64,300		0	0	51,440	12,860
Grand Total			<u>151,150</u>		<u>0</u>	<u>0</u>	<u>120,920</u>	<u>30,230</u>

Depreciation Adjustment Report
All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACRS Adjustments:						
Page 1	1	64	Laptop computers	96	96	0
Page 1	1	65	Rough Terrain Crane	2,860	2,860	0
Page 1	1	66	Skidsteer VIN 21502905	2,280	2,280	0
Page 1	1	67	2013 Caterpillar Telehandler	4,887	4,887	0
				10,123	10,123	0

82-2703338

Future Depreciation Report**FYE: 12/31/25**

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
64	Laptop computers	1/17/23	1,850	57	57
65	Rough Terrain Crane	1/23/23	55,000	1,716	1,716
66	Skidsteer VIN 21502905	11/14/23	30,000	1,368	1,368
67	2013 Caterpillar Telehandler	11/22/23	64,300	2,932	2,932
			<u>151,150</u>	<u>6,073</u>	<u>6,073</u>

Other Depreciation:

1	Mixer 9 cu ft Mortar Honda	1/20/20	3,200	640	640
2	Plate compactor	1/21/20	2,781	0	0
3	STIHL generator	1/21/20	1,230	0	0
4	Plasma cutter	1/23/20	2,000	0	0
5	Welding helmet, compressor, grinder, etc.	1/23/20	1,050	0	0
6	2 concrete mixers with 13HP Honda GX390 eng.	7/16/20	7,628	1,526	1,526
8	Yamaha motorcycle	8/27/20	2,200	314	314
9	Temp housing earthquake relief supplies	8/18/21	22,404	0	0
10	Electric 4 wheeler - Haiti	8/20/21	1,300	260	260
11	Generator - Haiti	8/20/21	7,660	1,276	1,276
12	Chainsaw - Haiti	8/20/21	750	0	0
13	Honda generator	8/20/21	600	0	0
14	Cement mixer - Haiti	8/20/21	800	160	160
15	Delta table saw - Haiti	8/20/21	250	50	50
16	Miller welder - Haiti	8/20/21	1,300	260	260
17	Chainsaw - Haiti	8/20/21	250	0	0
18	Table saw - Haiti	8/20/21	800	160	160
19	Drone - Haiti	8/20/21	400	0	0
20	Go-Pro camera - Haiti	8/20/21	150	0	0
21	Trailer	9/15/21	15,358	2,194	2,194
22	Trailer tires	9/21/21	778	0	0
23	Tables, chairs	9/23/21	1,871	374	374
24	Welder/generator	9/28/21	5,795	827	827
25	Scaffolding	9/28/21	3,531	505	505
26	Welding cable	9/28/21	750	0	0
27	EZ grout wall braces, box and pallet	9/29/21	11,000	1,572	1,572
28	Mortar/grout mixer	9/29/21	8,000	1,600	1,600
29	Rebar cutter	9/29/21	1,012	203	203
30	Scaffold frames	9/29/21	1,750	250	250
31	Concrete shoot	9/29/21	500	0	0
32	16' planks	9/29/21	3,840	0	0
33	2 mortar tubs	9/29/21	500	100	100
34	Level, 48" crick	10/04/21	702	0	0
35	Laser with tripod, transit with tripod	10/05/21	3,860	772	772
36	Welding cable	10/07/21	750	0	0
37	Atlas Bobcat	10/08/21	51,419	7,345	7,345
38	Concrete saws, power washer, generator	10/13/21	14,482	2,069	2,069
39	Wheelbarrow	10/18/21	2,048	0	0
40	Concrete mixer	10/18/21	4,849	970	970
41	Generator	10/28/21	1,800	0	0
44	Suzuki truck	7/31/19	5,000	0	0
45	MacBook (Randy's)	5/28/19	2,672	0	0
47	Solar panels	10/01/19	2,500	0	0
48	Large generator (Baliles)	10/23/19	1,000	0	0
49	Small generator (Baliles)	10/23/19	150	0	0
50	Compressor (Baliles)	10/23/19	500	0	0
51	Trash pump (Baliles)	10/23/19	350	0	0
52	T-shirts	10/29/19	439	0	0
53	Camera - Phantom 3	4/25/22	353	39	0
54	Drone - DJI Mavic	5/27/22	480	66	0
55	Fuel Transfer Pump	5/27/22	452	63	0
56	Excavator - FF2405X605835	7/01/22	62,500	8,929	0
57	Neville Built Trailier - INDD432XCH175047	7/09/22	35,320	5,046	0
58	Freightliner Tractor Truck	7/09/22	43,500	6,214	0
59	Concrete Bucket	9/27/22	6,027	861	0
60	Concrete Bucket	9/27/22	6,027	861	0
61	Concrete Side Chute	9/27/22	1,042	149	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
62	Electric rebar	9/28/22	5,025	718	0
63	Concrete Mixer Truck	9/30/22	38,000	5,429	0
Total Other Depreciation			<u>402,685</u>	<u>51,802</u>	<u>23,427</u>
Total ACRS and Other Depreciation			<u><u>402,685</u></u>	<u><u>51,802</u></u>	<u><u>23,427</u></u>
Listed Property:					
7	2015 F550 Truck	8/27/20	30,310	4,330	4,330
42	Truck	10/21/21	42,900	5,860	5,860
43	Ford Ranger Truck	12/31/18	25,625	0	0
			<u>98,835</u>	<u>10,190</u>	<u>10,190</u>
Grand Totals			<u><u>652,670</u></u>	<u><u>68,065</u></u>	<u><u>39,690</u></u>

82-2703338

IL Future Depreciation Report**FYE: 12/31/25**

FYE: 12/31/2024

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>IL</u>
<u>Prior MACRS:</u>				
64	Laptop computers	1/17/23	1,850	57
65	Rough Terrain Crane	1/23/23	55,000	1,716
66	Skidsteer VIN 21502905	11/14/23	30,000	1,368
67	2013 Caterpillar Telehandler	11/22/23	64,300	2,932
			<u>151,150</u>	<u>6,073</u>

Other Depreciation:

1	Mixer 9 cu ft Mortar Honda	1/20/20	3,200	640
2	Plate compactor	1/21/20	2,781	0
3	STIHL generator	1/21/20	1,230	0
4	Plasma cutter	1/23/20	2,000	0
5	Welding helmet, compressor, grinder, etc.	1/23/20	1,050	0
6	2 concrete mixers with 13HP Honda GX390 eng.	7/16/20	7,628	1,526
8	Yamaha motorcycle	8/27/20	2,200	314
9	Temp housing earthquake relief supplies	8/18/21	22,404	0
10	Electric 4 wheeler - Haiti	8/20/21	1,300	260
11	Generator - Haiti	8/20/21	7,660	1,276
12	Chainsaw - Haiti	8/20/21	750	0
13	Honda generator	8/20/21	600	0
14	Cement mixer - Haiti	8/20/21	800	160
15	Delta table saw - Haiti	8/20/21	250	50
16	Miller welder - Haiti	8/20/21	1,300	260
17	Chainsaw - Haiti	8/20/21	250	0
18	Table saw - Haiti	8/20/21	800	160
19	Drone - Haiti	8/20/21	400	0
20	Go-Pro camera - Haiti	8/20/21	150	0
21	Trailer	9/15/21	15,358	2,194
22	Trailer tires	9/21/21	778	0
23	Tables, chairs	9/23/21	1,871	374
24	Welder/generator	9/28/21	5,795	827
25	Scaffolding	9/28/21	3,531	505
26	Welding cable	9/28/21	750	0
27	EZ grout wall braces, box and pallet	9/29/21	11,000	1,572
28	Mortar/grout mixer	9/29/21	8,000	1,600
29	Rebar cutter	9/29/21	1,012	203
30	Scaffold frames	9/29/21	1,750	250
31	Concrete shoot	9/29/21	500	0
32	16' planks	9/29/21	3,840	0
33	2 mortar tubs	9/29/21	500	100
34	Level, 48" crick	10/04/21	702	0
35	Laser with tripod, transit with tripod	10/05/21	3,860	772
36	Welding cable	10/07/21	750	0
37	Atlas Bobcat	10/08/21	51,419	7,345
38	Concrete saws, power washer, generator	10/13/21	14,482	2,069
39	Wheelbarrow	10/18/21	2,048	0
40	Concrete mixer	10/18/21	4,849	970
41	Generator	10/28/21	1,800	0
44	Suzuki truck	7/31/19	5,000	0
45	MacBook (Randy's)	5/28/19	2,672	0
47	Solar panels	10/01/19	2,500	0
48	Large generator (Baliles)	10/23/19	1,000	0
49	Small generator (Baliles)	10/23/19	150	0
50	Compressor (Baliles)	10/23/19	500	0
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<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>IL</u>
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7	2015 F550 Truck	8/27/20	30,310	4,330
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43	Ford Ranger Truck	12/31/18	25,625	0
			<u>98,835</u>	<u>10,190</u>
Grand Totals			<u><u>652,670</u></u>	<u><u>68,065</u></u>

Form 990	Two Year Comparison Report	2023 & 2024
For calendar year 2024, or tax year beginning , ending		

Name	Taxpayer Identification Number
The Lakou NFP	82-2703338

		2023	2024	Differences
Revenue	1. Contributions, gifts, grants	1. 567,983	471,640	-96,343
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3.		
	4. Program service revenue	4. 429,042	116,682	-312,360
	5. Investment income	5. 96	5,956	5,860
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7.		
	8. Net income or (loss) from fundraising events	8. 35,000		-35,000
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 563	5,881	5,318
	12. Total revenue. Add lines 1 through 11	12. 1,032,684	600,159	-432,525
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15. 37,500	83,888	46,388
	16. Salaries, other compensation, and employee benefits	16. 122,803	101,848	-20,955
	17. Professional fundraising fees	17. 17,903		-17,903
	18. Other professional fees	18. 61,494	191,907	130,413
	19. Occupancy, rent, utilities, and maintenance	19. 54,505	58,000	3,495
	20. Depreciation and Depletion	20. 206,289	82,803	-123,486
	21. Other expenses	21. 294,670	282,928	-11,742
	22. Total expenses. Add lines 13 through 21	22. 795,164	801,374	6,210
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 237,520	-201,215	-438,735
	24. Total exempt revenue	24. 1,032,684	600,159	-432,525
Other Information	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 429,701	128,519	-301,182
	27. Total assets	27. 1,045,075	838,600	-206,475
	28. Total liabilities	28.		
	29. Retained earnings	29. 1,045,075	838,600	-206,475
	30. Number of voting members of governing body	30. 7	7	
	31. Number of independent voting members of governing body	31. 5	5	
	32. Number of employees	32. 4	4	
	33. Number of volunteers	33.		

Form 990	Tax Return History	2024
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Name The Lakou NFP	Employer Identification Number 82-2703338
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	2020	2021	2022	2023	2024	2025
Contributions, gifts, grants		750,132	519,238	567,983	471,640	
Membership dues						
Program service revenue		48,801	84,515	429,042	116,682	
Capital gain or loss						
Investment income		28	55	96	5,956	
Fundraising revenue (income/loss)				35,000		
Gaming revenue (income/loss)						
Other revenue			1,973	563	5,881	
Total revenue		798,961	605,781	1,032,684	600,159	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.		30,000	37,500	37,500	83,888	
Other compensation		84,294	140,523	122,803	101,848	
Professional fees		21,179	30,292	79,397	191,907	
Occupancy costs		48,100	47,100	54,505	58,000	
Depreciation and depletion		22,920	64,160	206,289	82,803	
Other expenses		244,037	274,717	294,670	282,928	
Total expenses		450,530	594,292	795,164	801,374	
Excess or (Deficit)		348,431	11,489	237,520	-201,215	
Total exempt revenue		798,961	605,781	1,032,684	600,159	
Total unrelated revenue						
Total excludable revenue		48,829	86,543	429,701	128,519	
Total Assets		623,206	687,960	1,045,075	838,600	
Total Liabilities						
Net Fund Balances		623,206	687,960	1,045,075	838,600	

Federal Statements

Taxable Interest on Investments

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
Interest	\$					
BoA 9531	5,878					
BoA 7870	78					
Total	\$ 5,956					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Independent Contractor Fees	\$ 164,392	\$ 164,392	\$	\$
Business Registration Fees	20,875		20,875	
Stripe Processing Fee	2,641			2,641
Special Event	821			821
Donor Management Program	468			468
Total	<u>\$ 189,197</u>	<u>\$ 164,392</u>	<u>\$ 20,875</u>	<u>\$ 3,930</u>

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Operations	\$ 20,025	\$ 20,025	\$	\$
General Operations	3,464		3,464	
Technology	2,564	2,564		
Total	<u>\$ 26,053</u>	<u>\$ 22,589</u>	<u>\$ 3,464</u>	<u>\$ 0</u>

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
Contributions - Other	\$
Annual Appeal	276,947
Individual Contributions	140,647
Recurring Contributions	54,046
Gifts in Kind	
Total	\$ 471,640

Schedule A, Part II, Line 12 - Current year

Description	Amount
Reimbursements	\$ 78,682
Special Events	38,000
Interest	
BoA 9531	5,878
BoA 7870	78
Other Revenue	5,881
Golf Tournament	
Total	\$ 128,519

Illinois Return Summary

For calendar year 2024, or tax year beginning , and ending

82-2703338

The Lakou NFP

Amount you are paying (IL-990T)

Apportionment

Total sales everywhere
Total Illinois sales
Apportionment factor

Net income or loss
Investment credits
Net replacement tax

Income tax credits
Net income tax

Credit from prior year overpayment
Total estimated payments
Extension payment
Pass-through withholding payments
Pass-through entity tax credits
Gambling withholding

Total payments

Overpayment
Amount to credit forward

Refund

Tax due before penalty and interest
Late payment interest
Failure to pay penalty
Failure to file penalty

Total amount due

Next Year's Estimates

1st quarter
2nd quarter
3rd quarter
4th quarter
Total

Charitable Registration

Filing fee
Return / extended due date

Miscellaneous Information

Amended return
IL-990T due date /extended date

For Office Use Only

PMT #

AMT

INIT

Illinois Attorney General Kwame Raoul
Charitable Trust Bureau, 115 S. LaSalle St
Chicago, IL 60603

CO # 01074505

Report for the Fiscal Period:

Beginning 01/01/2024

& Ending 12/31/2024

MO DAY YR

Make Checks
Payable to
Illinois Charity
Bureau Fund

Check all items attached:

☐

Copy of IRS Return

☐

Audited Financial Statements

☐

Reviewed Financial Statements

☐

Copy of Form IFC

☒

\$15 Annual Report Filing Fee

☐

\$100 Late Report Filing Fee

Federal ID # 82-2703338

Are contributions to the organization tax deductible? Yes ☐ No ☐

Date organization was created: 09/01/2017

MO DAY YR

Legal Name: The Lakou NFP	YEAR-END AMOUNTS	
Mail Address: 805 W. Touhy Ave	A) ASSETS	A) \$ 838,600
City, State: Park Ridge IL	B) LIABILITIES	B) \$ 0
Zip Code: 60068	C) NET ASSETS	C) \$ 838,600
Email Address: dave@lakou.org		
I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
D) PUBLIC SUPPORT, CONTRIBUTIONS AND PROGRAM SERVICE REV.(GROSS AMTS.)	98 %	D) \$ 588,322
E) GOVERNMENT GRANTS AND MEMBERSHIP DUES	0 %	E) \$ 0
F) OTHER REVENUES	2 %	F) \$ 11,837
G) TOTAL REVENUES, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E & F)	100%	G) \$ 600,159
II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR	84 %	H) \$ 673,949
H) OPERATING CHARITABLE PROGRAM EXPENSE	%	I) \$
I) EDUCATION PROGRAM SERVICE EXPENSE	84 %	J) \$ 673,949
J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)		
J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J) \$	%	K) \$
K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	84 %	L) \$ 673,949
L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	15 %	M) \$ 119,295
M) MANAGEMENT AND GENERAL EXPENSE	1 %	N) \$ 8,130
N) FUNDRAISING EXPENSE	100%	O) \$ 801,374
O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M & N)		
III. SUMMARY OF ALL PAID FUNDRAISER & CONSULTANT ACTIVITIES		
(Attach Attorney General Report of Individual Fundraising Campaign (Form IFC). One for each PFR.)		
PROFESSIONAL FUNDRAISERS:		
P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100%	P) \$
Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$
R) NET RECEIVED BY THE CHARITY (P MINUS Q = R)	%	R) \$
PROFESSIONAL FUNDRAISING CONSULTANTS:		
S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$
IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:		
T) NAME, TITLE:		T) \$
U) NAME, TITLE:		U) \$
V) NAME, TITLE:		V) \$
V. CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED) CODE CATEGORIES		List on back side of Instructions CODE
W) DESCRIPTION:		W) #
X) DESCRIPTION:		X) #
Y) DESCRIPTION:		Y) #

The Lakou NFP**82-2703338**

THE QUESTIONS BELOW ARE APPLICABLE TO THE CURRENT REPORTING PERIOD. IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS YES, ATTACH A DETAILED EXPLANATION:

	YES	NO
1. WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGEMENT?		X
2. DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PART TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?		X
3. HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?		X
4. IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?		X
5. DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC.)		X
6a. DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?		X
6b. IF "YES", ENTER (I) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$ _____ ; (II) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$ _____ ; (III) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$ _____ ; AND (IV) THE AMOUNT ALLOCATED TO FUNDRAISING \$ _____ .		
7. DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?		X
8. HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?		X
9. DID THE ORGANIZATION LEARN OR BECOME AWARE OF ANY KICKBACK, BRIBE OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS IN THE CURRENT OR PREVIOUS FISCAL YEARS?		X
10. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS: _____ _____ _____		
11. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: David E. Haracz 773-718-9978		

• ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT – SEE INSTRUCTIONS •

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS, AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

BE SURE TO INCLUDE ALL FEES DUE:

- 1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
- 2.) FOR FEES DUE, SEE INSTRUCTIONS.
- 3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.

Randal J. Meyer

PRESIDENT OR OTHER AUTHORIZED OFFICE OR TRUSTEE (PRINT NAME)

SIGNATURE

DATE

David E. Haracz

CHIEF FISCAL OFFICER OR TRUSTEE (PRINT NAME)

SIGNATURE

DATE

Jeffery A. Rozovics

PREPARER (PRINT NAME)

SIGNATURE

DATE

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

2024

Open to Public Inspection

A

For the 2024 calendar year, or tax year beginning

, and ending

B

Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☒ Amended return

☐ Application pending

C

Name of organization

The Lakou NFP

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

805 W. Touhy Ave

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Park Ridge IL 60068

D

Employer identification number

82-2703338

E Telephone number

847-699-7600

G Gross receipts\$

600,159

F

Name and address of principal officer:

Randal J. Meyer

1934 State Route 26

Metamora IL 61548

H(a) Is this a group return for subordinates?

☐ Yes

☒ No

H(b) Are all subordinates included?

☐ Yes

☐ No

If "No," attach a list. See instructions

H(c) Group exemption number

I

Tax-exempt status:

☒ 501(c)(3)

☐ 501(c) () (insert no.)

☐ 4947(a)(1) or

☐ 527

J Website:

www.lakou.org

K Form of organization:

☒ Corporation

☐ Trust

☐ Association

☐ Other

L Year of formation:

2017

M State of legal domicile:

IL

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:

See Schedule 0

2 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)

5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, Part I, line 11

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25)

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)

19 Revenue less expenses. Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Prior Year

Current Year

Beginning of Current Year

End of Year

3	7	
4	5	
5	4	
6	0	
7a	0	
7b	0	
8	567,983	471,640
9	429,042	116,682
10	96	5,956
11	35,563	5,881
12	1,032,684	600,159
13		0
14		0
15	160,303	185,736
16a	17,903	0
b	8,130	
17	616,958	615,638
18	795,164	801,374
19	237,520	-201,215
20	1,045,075	838,600
21	0	0
22	1,045,075	838,600

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.

Sign Here

Signature of officer

Randal J. Meyer

President

Type or print name and title

Date

Paid Preparer Use Only

Preparer's name

Jeffery A. Rozovics

Preparer's signature

Date

08/27/25

Check ☐ if self-employed

PTIN

P00227382

Firm's name

Rozovics Group, LLP

Firm's EIN

80-0955974

Firm's address

805 W. Touhy Ave

Park Ridge, IL 60068

Phone no.

847-699-7600

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

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form 990 (2024)

Part 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:
See Schedule O
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
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 services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.
- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **551,305** including grants of \$) (Revenue \$)

Construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families and communities.

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

N/A

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

N/A

4d Other program services (Describe on Schedule O.)
(Expenses \$ **122,644** including grants of \$) (Revenue \$)

4e Total program service expenses **673,949**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 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? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		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 entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	1	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	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	X
b	If "Yes," enter the name of the foreign country Haiti 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	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	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	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).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
c	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	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
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.		
a	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:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, 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? If "Yes," complete Form 6069.	17	

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 7 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 5		
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 direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 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:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
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		X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe 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	
c 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?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b	X	
If "Yes" to line 15a or 15b, describe the process 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? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☐ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

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

David E. Haracz
Park Ridge

805 W. Touhy Ave

IL 60068

773-718-9978

Form 990 (2024)

The Lakou NFP**82-2703338**Page **7****Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Lanae B Meyer Director	40.00 0.00	X		X				41,944	0	0
(2) Randal J. Meyer President	40.00 0.00	X						41,944	0	0
(3) Darryl August Director	0.00 0.00	X						0	0	0
(4) Franco Cobite Director	0.00 0.00	X						0	0	0
(5) Steve Cook Director	0.00 0.00	X						0	0	0
(6) Luvthageline Jean Director	0.00 0.00	X						0	0	0
(7) Thomas Keenan Director	0.00 0.00	X						0	0	0
(8) William C. Murphy Secretary	0.00 0.00	X						0	0	0
(9) Mike Petersen Director	0.00 0.00	X						0	0	0
(10) Carl Sajous Director	0.00 0.00	X						0	0	0
(11) Jack Scapin Director	0.00 0.00	X						0	0	0

Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								83,888		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								83,888		

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	0						
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>3</td><td></td><td>X</td></tr></table>		Yes	No	3		X
	Yes	No						
3		X						
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>4</td><td></td><td>X</td></tr></table>		Yes	No	4		X
	Yes	No						
4		X						
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>5</td><td></td><td>X</td></tr></table>		Yes	No	5		X
	Yes	No						
5		X						

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		0

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Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	471,640			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		471,640			
Program Service Revenue	2a	Reimbursements	Business Code	78,682	78,682		
	b	Special Events		38,000	38,000		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		116,682			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		5,956	5,956	
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
6a		Gross rents	(i) Real (ii) Personal				
b		Less: rental expenses					
c		Rental inc. or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
b		Less: cost or other basis and sales exps.					
c		Gain or (loss)					
d		Net gain or (loss)					
8a		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a				
b		Less: direct expenses	8b				
c		Net income or (loss) from fundraising events					
9a		Gross income from gaming activities. See Part IV, line 19	9a				
b		Less: direct expenses	9b				
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11a	Other Revenue	Business Code	5,881	5,881		
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		5,881			
	12	Total revenue. See instructions		600,159	128,519	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

X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	83,888	83,888		
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	76,628		76,628	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	11,251	9,602	1,649	
10 Payroll taxes	13,969		13,969	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	2,710		2,710	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	189,197	164,392	20,875	3,930
12 Advertising and promotion	1,059			1,059
13 Office expenses	3,141			3,141
14 Information technology	2,243	2,243		
15 Royalties				
16 Occupancy	58,000	58,000		
17 Travel	4,757	4,757		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	82,803	82,803		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a Building & Equipment	117,032	117,032		
b Administration	85,436	85,436		
c Vehicles	22,934	22,934		
d Travel	20,273	20,273		
e All other expenses	26,053	22,589	3,464	
25 Total functional expenses. Add lines 1 through 24e	801,374	673,949	119,295	8,130
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)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	267,785	1	210,531
	2 Savings and temporary cash investments	321,874	2	262,415
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,699	4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 652,670		
	b Less: accumulated depreciation	10b 287,016	10c	365,654
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,045,075	16	838,600	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	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	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26 Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,045,075	27	838,600
	28 Net assets with donor restrictions		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		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	1,045,075	32	838,600
33 Total liabilities and net assets/fund balances	1,045,075	33	838,600	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	600,159
2	Total expenses (must equal Part IX, column (A), line 25)	2	801,374
3	Revenue less expenses. Subtract line 2 from line 1	3	-201,215
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,045,075
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	-5,260
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	838,600

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Federal Statements

Statement 1 - Form 4562, Line 26 - Property Used More Than 50% in a Qualified Business

		Property Type							
		Date	Business %	Cost	Depr Basis	Period	Method	Deduction	Section 179
2015	F550 Truck	8/27/20	100.00	\$ 30,310	\$ 30,310	7.0	S/L-	\$ 4,330	\$
	Truck	10/21/21	100.00	42,900	42,900	7.0	S/L-	5,860	
	Ford Ranger Truck	12/31/18	100.00	25,625	25,625	7.0	S/L-	2,075	
Total				\$ 98,835	\$ 98,835			\$ 12,265	\$ 0

SCHEDULE A
(Form 990)

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

2024

Open to Public
Inspection

Name of the organization

The Lakou NFP

Employer identification number

82-2703338

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f

☐

Enter the number of supported organizations
- g

☐

Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	321,529	750,132	519,238	567,983	471,640	2,630,522
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	321,529	750,132	519,238	567,983	471,640	2,630,522
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						2,630,522

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	321,529	750,132	519,238	567,983	471,640	2,630,522
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	10	28				38
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						2,630,560
12 Gross receipts from related activities, etc. (see instructions)					12	728,592

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 for 2024 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test — 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support test — 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
17a 10%-facts-and-circumstances test — 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐		
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 ☐		

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests — 2024. 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 — 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b 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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described 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		
c 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		

Section 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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section 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		

Section 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		
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 supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to each of its 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.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.			
3a			
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			

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

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	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-functionally integrated Type III supporting organization (see instructions).

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

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
Open to Public Inspection

Name of the organization	Employer identification number
The Lakou NFP	82-2703338

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conversation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

Part III

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

3

Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange program

e

☐

Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐

Yes

☐

No

Part IV

Escrow and Custodial Arrangements

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐

Yes

☐

No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐

Yes

☐

No

b

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

☐

Part V

Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

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

a

Board designated or quasi-endowment

%

b

Permanent endowment

%

c

Term endowment

%

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

3a

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

(i)

Unrelated organizations?

(ii)

Related organizations?

3a(i)

Yes

No

3a(ii)

Yes

No

3b

Yes

No

4

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

Part VI

Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land			
b	Buildings			
c	Leasehold improvements			
d	Equipment	255,192	159,017	96,175
e	Other	397,478	127,999	269,479
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				365,654

Schedule D (Form 990) (Rev. 12-2024)

DAA

Part VIIInvestments – Other Securities

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

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

Part VIIIInvestments – Program Related

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

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

Part IXOther Assets

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

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

Part XOther Liabilities

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

1.

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

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

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

SCHEDULE O (Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 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 The Lakou NFP		Employer identification number 82-2703338

Amended Return Explanation
Return amended to update answers to questions in Part VI, Section B & C and Schedule O Part VI Line 19.

Form 990 - Organization's Mission or Most Significant Activities
The organization's mission is to provide construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families, and communities.

Form 990 - Organization's Mission
The organization's mission is to provide construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families, and communities.

Form 990, Part III, Line 4d - All Other Accomplishments
Construction training to launch development in Haiti, where with skills and opportunity, Haitians can create their own sustainable solutions for individuals, families and communities.

Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries
Haiti

Form 990, Part VI, Line 2 - Related Party Information Among Officers	
Randal J. Meyer	Lanae Meyer
President	Director
Married	

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
Tax returns will be reviewed by the board of directors.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
There is a Conflicts of Interests policy which is distributed annually and each board member is required to fill out and re-sign said disclosure.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
A wage comparison is made by the Director of Finance of similar Non profits through 990 comparisons, talking to industry experts and recruiters. All staff, including the Executive Director are then budgeted, which is approved by the Board. All salaries and wages are clearly defined by position, so that the Board has a clear understanding of the compensation. Wage reviews are completed once a year at Budget approval

Form 990, Part VI, Line 15b - Compensation Process for Officers
A wage comparison is made by the Director of Finance of similar Non profits through 990 comparisons, talking to industry experts and recruiters. All staff, including the Executive Director are then budgeted, which is approved by the Board. All salaries and wages are clearly defined by position, so that the Board has a clear understanding of the compensation.

SCHEDULE O (Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.	OMB No. 1545-0047 Open to Public Inspection
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Name of the organization The Lakou NFP	Employer identification number 82-2703338
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Wage reviews are completed once a year at Budget approval

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
The Organazation's governing documents and Conflict of Interest Policy are made available upon request. The Financial Statements are made available upon request and are on the Organization's website.

Form 990, Part IX, Line 11g - Other Fees for Services

Description	Tot/Prog Service	Mgt & General	Fundraising
Independent Contractor Fees			
\$ 164,392	\$ 0	\$ 0	
Business Registration Fees			
\$ 0	\$ 20,875	\$ 0	
Stripe Processing Fee			
\$ 0	\$ 0	\$ 2,641	
Special Event			
\$ 0	\$ 0	\$ 821	
Donor Management Program			
\$ 0	\$ 0	\$ 468	
Total			
\$ 164,392	\$ 20,875	\$ 3,930	

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation	
Book / Tax Depreciation Difference	\$ -5,260
Prior Year Adjustment	\$ 0
Total	\$ -5,260