Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print 72-1136068 NEW ORLEANS FILM & VIDEO SOCIETY, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 1215 PRYTANIA STREET, 371 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. NEW ORLEANS, LA 70130 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Code Is For Is For Code Form 990 or Form 990-EZ Form 1041-A 01 80 Form 4720 (other than individual) Form 4720 (individual) 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) THE ORGANIZATION The books are in the care of > 1215 PRYTANIA STREET - NEW ORLEANS, LA 70130 Telephone No. ► 504-309-6633 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)

If this is for the whole group, check this . If it is for part of the group, check this box 🕨 🔳 and attach a list with the names and TINs of all members the extension is for. MAY 15, 2023 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ☐ calendar year ► X tax year beginning JUL 1, 2021 , and ending JUN 30, 2022 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За **b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form **8868** (Rev. 1-2022)

instructions.

EXTENDED TO MAY 15, 2023

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

Α	For the	e 2021 calendar year, or tax year beginning JUL I, ZUZI	and ending	<u>JUN 30, 2022</u>	
В	Check if applicabl	C Name of organization		D Employer identifi	cation number
	Addre	NEW ORLEANS FILM & VIDEO SOCIETY,	INC		
F	Name chang			72-11360	68
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/sui		
Г	Final		371	504-309-	
	termin ated	City or town, state or province, country, and ZIP or foreign postal co	<u> </u>	G Gross receipts \$	2,018,659.
	Amen			H(a) Is this a group r	
	Application	F Name and address of principal officer: MONINA DESIGN		for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates i	
			47(a)(1) or 5	27 If "No," attach a	list. See instructions
		te: WWW.NEWORLEANSFILMSOCIETY.ORG		H(c) Group exemption	
K	Form of	organization: X Corporation Trust Association Other	L Ye	ar of formation: 1989	M State of legal domicile: $\mathbf{L}\mathbf{A}$
P	art I	Summary			
ø	1	Briefly describe the organization's mission or most significant activities:	NEW ORLEA	NS FILM FEST	IVAL,
anc	1	FRENCH FILM FESTIVAL, AND FILMMAKER			
& Governance	1	Check this box if the organization discontinued its operations of	or disposed of mo	ı	
ઠ્ઠ				3	25
<u>«</u>		Number of independent voting members of the governing body (Part VI, I			25
Activities		Total number of individuals employed in calendar year 2021 (Part V, line 2			10
ΞΞ	6	Total number of volunteers (estimate if necessary)		6	158
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			16,507.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u>,</u>		
		Contributions and growth (Dout VIII line 11)	\ <u> </u>	Prior Year 771,262.	Current Year 1,537,941.
ne			·	505,348.	
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		25.	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		105,257.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 3, out, etc., and VIII, column (A), lines 1, out of the column (B), lines 1, out of the column (B), lines 2, out, etc., and VIII, column (A), lines 3, out, etc., and VIII, column (A), lines 3, out, etc., and VIII, column (B), lines 3, out, etc., and		1,381,892.	1,783,855.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	98,800.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ý		Salaries, other compensation, employee benefits (Part IX, column (A), line		525,242.	587,848.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	17,937.
g	b	Total fundraising expenses (Part IX, column (D), line 25)	11,729.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		714,804.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,240,046.	
	19	Revenue less expenses. Subtract line 18 from line 12		141,846.	437,217.
Net Assets or Find Balances				Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		1,227,106.	1,629,791.
t As	21	Total liabilities (Part X, line 26)		345,578.	311,047.
		Net assets or fund balances. Subtract line 21 from line 20		881,528.	1,318,744.
	art II	Signature Block			
	-	Ilties of perjury, I declare that I have examined this return, including accompanying			y knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all informat	ion of which prepa	rer nas any knowledge.	
۵.		Signature of officer		I Date	
Sig		MONIKA LESKA, MANAGING DIRECTOR		Duto	
He	re	Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	VALERIE LOWRY		if if	D01266145
	u parer	Firm's name WEGMANN DAZET, APC		self-employ Firm's EIN ▶	72-0870824
	Only		500	THIIISLIN	00,004
500		METAIRIE, LA 70005	-	Phone no (5	04)837-8844
Ma	v the II	RS discuss this return with the preparer shown above? See instructions		1. 110110 110. (3	X Ves No

ı u	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 FOR DETAIL.
	SEE SCHEDULE O FOR DETAIL.
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 X No
	1
_	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 X 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 \$666,309 • _ including grants of \$13,000 •) (Revenue \$207,894 •)
	NEW ORLEANS FILM FESTIVAL - THE 32ND NEW ORLEANS FILM FESTIVAL TOOK A
	HYBRID FORMAT, INCLUDING INDOOR VENUES WITH SOCIALLY DISTANCED SEATED
	AND MASK REQUIREMENTS, OUTDOOR SCREENINGS, AND AN ONLINE CINEMA TO
	PRESENT 150+ FILMS PLUS PANELS, FILMMAKER Q&AS, A KEYNOTE ADDRESS, AND
	MORE TO THOUSANDS OF ATTENDEES FROM AROUND THE WORLD.
4b	(Code:) (Expenses \$ 108,952 • including grants of \$) (Revenue \$ 27,313 •)
	FRENCH FILM FESTIVAL - THE ANNUAL FRENCH FILM FESTIVAL PRESENTED 22
	FILMS-A COMBINATION OF FEATURES AND SHORTS-BOTH IN PERSON AT THE
	PRYTANIA THEATRE AND ONLINE THROUGH A VIRTUAL PLATFORM. THE FILMS
	REPRESENTED FRENCH-LANGUAGE CINEMA FROM AROUND THE GLOBE.
4c	(Code:) (Expenses \$ 97,716 • including grants of \$ 44,500 •) (Revenue \$
	SOUTHERN PRODUCERS LAB THE SOUTHERN PRODUCERS LAB SUPPORTED 10
	EMERGING PRODUCED WORKING IN THE AMERICAN SOUTHEAST THROUGH AN
	INTENSIVE FOUR-DAY VIRTUAL LAB FILLED WITH PANELS, MENTORING SESSIONS,
	AND INDUSTRY MEETINGS, FOLLOWED BY FOLLOW-UP MENTORING SESSIONS AFTER
	THE LAB ITSELF. PARTICIPANTS WERE INVITED TO WORKSHOP A PROJECT THEY'RE
	PRODUCING AND TAKE ADVANTAGE OF THE THOUGHT PARTNERSHIP OF THE COHORT
	AND PARTICIPATING INDUSTRY MENTORS. THE 10 PRODUCERS WERE ALSO INVITED
	TO THE IN-PERSON NEW ORLEANS FILM FESTIVAL
	TO THE TH LEWOON MEN OWNERS LITTLE RESILENCE
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 245,149 · including grants of \$ 41,300 ·) (Revenue \$ 35,373 ·)
<u>4e</u>	Total program service expenses ► 1,118,126.

Form 990 (2021) NEW ORLEANS Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			х
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	•		
	Schedule D, Part III	8		х
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? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401-		X
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		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			<u></u> -
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		
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? If "Yes," complete Schedule I, Parts I and II	21	Х	

Form 990 (2021) NEW ORLEANS FILM & Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			37
	Schedule J	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? If "Yes," answer lines 24b through 24d and complete	 		
	Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?	24c 24d	-	-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		 -
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			7.7
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	١		
OF -	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
55	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	00		
٥.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

NEW ORLEANS FILM & VIDEO SOCIETY, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1.0			
	filed for the calendar year ending with or within the year covered by this return	2a	10		37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns the control of t			2b	X	
0-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions			0-	X	
	, , , , , , , , , , , , , , , , , , , ,			3a 3b	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule At any time during the calendar year, did the organization have an interest in, or a signature or other in the second se			SD	21	
44	financial account in a foreign country (such as a bank account, securities account, or other financial		•	4a		Х
h	If "Yes," enter the name of the foreign country	accoun	9:	 a		
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	s (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	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 contribut	ions or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pr	ovided to the payor?	7a	X	
				7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	iired			
	to file Form 8282?	 I I		7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_			v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		Λ
g	If the organization received a contribution of qualified intellectual property, did the organization file For			7g 7h		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining donor advised funds. Did a donor advised fund maintained			711		
0				8		
9	Sponsoring organizations maintaining donor advised funds.			0		
а				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	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:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			120		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
-	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	-				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	nt incon	ne?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	$\textbf{Section 501(c)(21) organizations.} \ \textbf{Did the trust, any disqualified person, or mine operator engage in}$					
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la			
	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 25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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	Х	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar 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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup$			
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) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finai	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 504-309-6633 1215 PRYTANIA STREET, 371, NEW ORLEANS, LA 70130			
	TAIS INTIMUTA SINDDI, SII, NEW CHURANS, DA IVIS			

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

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

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

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

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition) than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week (list any	├.	Joi di		1 0010	1	1	from the	from related organizations	other compensation
	hours for	ndividual trustee or director				D.		organization	(W-2/1099-MISC/	from the
	related	tee or	ıstee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tr		loyee	dwoc		1099-NEC)		and related
	below	lividu	nstitutional trustee	Officer	key employee	ighest compensated mployee	Former			organizations
(1) FALLON YOUNG	line) 40.00	Ĕ	SU.	₽	å	E H	2			
EXECUTIVE DIRECTOR	40.00			x				82,810.	0.	0.
(2) MONIKA LESKA	40.00		<u> </u>	4				02,010.	•	
INTERIM EXECUTIVE DIRECTOR		_		x				60,547.	0.	0.
(3) VALERIE GRUBB	1.00							, .		
BOARD MEMBER		х						0.	0.	0.
(4) KARON REESE	1.00									
PRESIDENT-ELECT		Х		Х				0.	0.	0.
(5) ELSTON HOWARD	1.00									
VICE PRESIDENT	1	X		X				0.	0.	0.
(6) W. HOWARD THOMPSON	1.00									
TREASURER		Х		Х				0.	0.	0.
(7) LAURA ASHLEY	1.00	ľ								
SECRETARY	1 00	Х		Х				0.	0.	0.
(8) MONICA FROIS	1.00								0	0
BOARD MEMBER	1 00	Х				_		0.	0.	0.
(9) NATHAN GRANT	1.00	,,							0	0
BOARD MEMBER	1 00	Х				_		0.	0.	0.
(10) JOSH MAYER	1.00	X						0.	0.	0
BOARD MEMBER	1.00	^						0.	0.	0.
(11) VIRGINIA MCCOLLAM BOARD MEMBER	1.00	Х						0.	0.	0.
(12) LORI OCHSNER	1.00	^				\vdash		0.	0.	<u> </u>
BOARD MEMBER	1.00	х						0.	0.	0.
(13) MICHAEL COLLINS	1.00									
BOARD MEMBER		x						0.	0.	0.
(14) KATHERINE GELDERMAN	1.00									
BOARD MEMBER		х						0.	0.	0.
(15) MAMTA MELWANI	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) DONNA SANTIAGO	1.00									
PRESIDENT		Х	L	Х	L	L	L	0.	0.	0.
(17) MARK EL-AMM	1.00									
BOARD MEMBER		Х						0.	0.	0.

Part VII Section A. Officers, Directors, Trus	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)				(0				(D)	(F)				
Name and title	Average	(do	not cl	Posi			one	Reportable	Reportable		Estimated		ed
	hours per	box	, unles	ss per	rson i	is bot	h an	compensation	compensation	۱		ount	of
	week (list any	\vdash	CCI AII	u a u	ii ecto	n/ ii us	100)	from	from related			other	41
	hours for	directo				_		the organization	organizations (W-2/1099-MIS)			oensa om th	
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	,		anizat	
	organizations	trust	nal tru		yee	ompe		1099-NEC)	,		•	l relat	
	below	Individual trustee or director	Institutional trustee	ser	Key employee	Highest compensated employee	Former				orga	nizati	ons
	line)	Indi	Inst	Officer	Key	Hig	윤						
(18) BEVERLY NORWOOD-MATHENY	1.00	,,								,			0
BOARD MEMBER	1 00	Х						0.		0.			0.
(19) MONIQUE GOUGISHA DOUCETTE	1.00	X						0.		0.			0.
BOARD MEMBER	1.00	Δ						0.		٠.			<u> </u>
(20) ROBIN MARROUCHE	1.00	X						0.		0.			0.
BOARD MEMBER (21) DOUG SPEARMAN	1.00	^						0.		٠.			<u> </u>
BOARD MEMBER	1.00	X						0.		0.			0.
(22) CARLOS CARMONA	1.00	Δ					_	0.		٠.			<u> </u>
BOARD MEMBER	1.00	X						0.		0.			0.
(23) GINA MONETTE	1.00							0.		•			<u> </u>
BOARD MEMBER	1.00	x						0.		0.			0.
(24) JEFF TEAGUE	1.00					4		Ů,		-			
BOARD MEMBER		x						0.		0.			0.
(25) JASON P WAGUESPACK	1.00												
BOARD MEMBER		Х						0.		0.			0.
(26) JAMES "JAY" HUFFSTATLER, JR	1.00												
BOARD MEMBER		X				7	ľ	0.		0.			0.
1b Subtotal							<u> </u>	143,357.		0.			0.
c Total from continuation sheets to Part VI					Z.			0.		0.			0.
d Total (add lines 1b and 1c)							•	143,357.		0.			0.
2 Total number of individuals (including but n						e) wł	no r	eceived more than \$100	,000 of reportable)			
compensation from the organization				\angle									0
										_		Yes	No
3 Did the organization list any former officer,	director, trust	ee, I	кеу е	empl	loye	e, oı	hig	ghest compensated emp	oloyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual)								[3		_X_
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J 1	for such individual		[4		X
5 Did any person listed on line 1a receive or a	•				•			•					
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch _l	pers	son .					5		<u> </u>
Section B. Independent Contractors													
1 Complete this table for your five highest co										oensa	ation fi	rom	
the organization. Report compensation for	the calendar y	ear	endii	ng w	vith	or w	ithir		year.		- (0		
(A) Name and business	address	NIC	ONE	7				(B) Description of s	ervices	C	(C omper		n
Traine and sasmoss		11/	JIVI				\dashv	- Decemption of a	10171000		ompor	- Ioutio	
							\dashv						
							+						
							- 1						

Total number of independent contractors (including but not limited to those listed above) who received more than

								CIETY, INC.	72-113	6068
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mplo	oyee	es, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(ci	heck	Pos			oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) CARY M GRANT BOARD MEMBER	1.00	x						0.	0.	0
SOARD MEMBER								0.	0.	
						,	4			
		_								
		-								
otal to Part VII, Section A, line 1c	1	<u> </u>								

72-1136068 NEW ORLEANS FILM & VIDEO SOCIETY, INC. Page 9 Form 990 (2021) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 119,811. **b** Membership dues 1b 295,279 c Fundraising events 1c d Related organizations 1d 642,889. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 479,962 similar amounts not included above 1f 128,574. g Noncash contributions included in lines 1a-1f 1g \$,537,941. h Total. Add lines 1a-1f **Business Code** 900099 133,600. 133,600. 2 a SPONSORSHIPS Program Service Revenue **SUBMISSION FEES** 126,712. 900099 126,712. 107,542. 33,303. 107,542. TICKET SALES 900099 d MEMBERSHIPS 900099 33,303. е All other program service revenue 401,157. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3,385. 3,385. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) ▶ (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses 7b c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 295,279. of contributions reported on line 1c). See 56,646. Part IV, line 18 8b 234,804. **b** Less: direct expenses

	С	Net income or (loss) from fundraising events	>	-178,158.			-178,158.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities	>				
	10 a	Gross sales of inventory, less returns and allowances10:	507.				
	b	Less: cost of goods sold10l	0.				
	С	Net income or (loss) from sales of inventory	>	507.		507.	
S			Business Code				
e go	11 a		900099	16,000.		16,000.	
an	b	MISCELLANEOUS REVENUE	900099	3,023.	3,023.		
Miscellaneou Revenue	С						
is H	d	All other revenue					
	е	Total. Add lines 11a-11d		19,023.			
	12	Total revenue. See instructions	>	1,783,855.	270,580.	16,507.	-41,173.
13200	9 12-09	9-21					Form 990 (2021)

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).

3601	Section 50 I(c)(3) and 50 I(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
_	Check if Schedule O contains a respor			(C) 1	(D)						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21	38,750.	38,750.								
2	Grants and other assistance to domestic	60.050	60.050								
	individuals. See Part IV, line 22	60,050.	60,050.								
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,	61 010	40 206	0 200	1 221						
	trustees, and key employees	61,918.	48,296.	9,288.	4,334.						
6	Compensation not included above to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	424 000	252 505	26 001	E 4 224						
7	Other salaries and wages	434,000.	353,585.	26,091.	54,324.						
8	Pension plan accruals and contributions (include										
_	section 401(k) and 403(b) employer contributions)	54,098.	39,699.	8,661.	<u> </u>						
9	Other employee benefits			-	5,738. 4,687.						
10	Payroll taxes	37,832.	31,645.	1,500.	4,00/.						
11	Fees for services (nonemployees):										
	Management										
	Legal	67,018.	54,898.	4,070.	8,050.						
	Accounting	07,010.	34,030.	4,070.	0,030.						
	Lobbying	17,937.			17,937.						
	Professional fundraising services. See Part IV, line 17	11,931.			17,937.						
f	Investment management fees										
g	Other. (If line 11g amount exceeds 10% of line 25,	170,173.	161,175.	8,775.	223.						
40	column (A), amount, list line 11g expenses on Sch 0.)	41,482.	36,653.	518.	4,311.						
12	Advertising and promotion	36,885.	33,850.	2,032.	1,003.						
13 14	Office expenses	14,393.	13,496.	717.	180.						
15	Information technology	11,333.	13,4300	7 ± 7 •	100.						
16	Royalties	20,471.	15,206.	3,428.	1,837.						
17	Occupancy	18,981.	16,484.	2,280.	217.						
18	Travel Payments of travel or entertainment expenses										
10	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	2,415.	474.	1,941.							
20	Interest	_,		=,,,==,							
21	Payments to affiliates										
22	Depreciation, depletion, and amortization										
23	Insurance	1,838.	1,146.	553.	139.						
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.)										
а	FILM FESTIVAL AND VENUE	149,124.	146,612.	2,101.	411.						
b	HONORARIUMS AWARDS	57,375.	57,375.								
С	RECRUITMENT	44,805.	746.	43,721.	338.						
d	BOARD DEVELOPMENT	8,513.		513.	8,000.						
е	All other expenses	8,580.	7,986.	594.							
25	Total functional expenses. Add lines 1 through 24e	1,346,638.	1,118,126.	116,783.	111,729.						
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)										
	0 10 00 01				Form 990 (2021)						

Form 990 (2021) Part X Balance Sheet

Га	IL A	balance Sheet				
		Check if Schedule O contains a response or note t	o any line in this Part X			<u> </u>
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		827,428.	1	947,419.
	2	Savings and temporary cash investments		305,969.	2	305,999.
	3	Pledges and grants receivable, net		9,500.	3	0.
	4	Accounts receivable, net		1,375.	4	365,251.
	5	Loans and other receivables from any current or fo				
		trustee, key employee, creator or founder, substan				
		controlled entity or family member of any of these		5		
	6	Loans and other receivables from other disqualified	d persons (as defined			
		under section 4958(f)(1)), and persons described in	n section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7		
Assets	8	Inventories for sale or use		8		
Ř	9	Prepaid expenses and deferred charges		0.	9	11,122.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D1	0a			
	b	Less: accumulated depreciation1	0b		10c	
	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	82,834.	15	0.	
	16	Total assets. Add lines 1 through 15 (must equal I	ine 33)	1,227,106.	16	1,629,791.
	17	Accounts payable and accrued expenses		21,615.	17	57,468.
	18	Grants payable			18	
	19	Deferred revenue	139,914.	19	235,970.	
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Pal	t IV of Schedule D		21	
es	22	Loans and other payables to any current or former				
Liabilities		trustee, key employee, creator or founder, substan				
ja de		controlled entity or family member of any of these		00.005	22	
_	23	Secured mortgages and notes payable to unrelate		93,005.	23	0.
	24	Unsecured notes and loans payable to unrelated t			24	
	25	Other liabilities (including federal income tax, paya				
		parties, and other liabilities not included on lines 1	7-24). Complete Part X	01 044		17 600
		of Schedule D		91,044.		17,609.
	26	Total liabilities. Add lines 17 through 25		345,578.	26	311,047.
S		Organizations that follow FASB ASC 958, check	here 🕨 🔼			
ű		and complete lines 27, 28, 32, and 33.		0// 216		1 152 556
ala	27	Net assets without donor restrictions		844,316. 37,212.	27	1,153,556.
Β	28	Net assets with donor restrictions		31,414.	28	103,100.
μ		Organizations that do not follow FASB ASC 958	, check here 🕨 📖			
ō		and complete lines 29 through 33.				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29	
\SS(30	Paid-in or capital surplus, or land, building, or equip			30	
et ⊿	31	Retained earnings, endowment, accumulated inco		001 500	31	1 210 7//
ž	32	Total net assets or fund balances	881,528. 1,227,106.	32	1,318,744.	
	33	Total liabilities and net assets/fund balances		1,44/,100.	33	1,629,791.

Form **990** (2021)

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form 990 (2021)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization NEW ORLEANS FILM & VIDEO SOCIETY, 72-1136068 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

(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.)

Sec	ction A. Public Support						_
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the			/			
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3)	
	organization, check this box and stop	here					<u></u> ▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2021 (I	ine 6, column (f), c	divided by line 11,	column (f))		14	%
	Public support percentage from 2020					15	%
16a	33 1/3% support test - 2021. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	ox and
	$\ensuremath{\mathbf{stop}}$ here. The organization qualifies	as a publicly supp	orted organization	١			▶□
b	33 1/3% support test - 2020. If the o	organization did no	ot check a box on l	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2021. If the org	anization did not o	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstand	ces test, check this	s box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	on qualifies as a pu	ublicly supported o	organization		▶□
b	10% -facts-and-circumstances tes	t - 2020. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circur	nstances test, che	eck this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu		- ·				▶∐
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	and see instruction	s ▶∟

Schedule A (Form 990) 2021

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.)

qualify under the tests listed below, please complete Part II.)											
Section A. Public Support											
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not include any "unusual grants.")	835,265.	572,882.	1116897.	771,421.	1537941.	4834406.				
2	Gross receipts from admissions,	033,203.	372,002.	1110057.	771,4210	13373410	4034400				
2	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the										
_	organization's tax-exempt purpose	381,428.	443,186.	441,861.	321,098.	160,015.	1747588.				
3	Gross receipts from activities that										
	are not an unrelated trade or bus-		1/7 011	159,826.	184,250.	53,562.	545,449.				
	iness under section 513		14/,011.	139,020.	104,230.	33,302.	343,443.				
4	Tax revenues levied for the organ-										
	ization's benefit and either paid to or expended on its behalf										
_	The value of services or facilities										
3	furnished by a governmental unit to			4							
	the organization without charge										
6	Total. Add lines 1 through 5	1216693.	1163879.	1718584.	1276769.	1751518.	7127443.				
	Amounts included on lines 1, 2, and	12100331	11030730	1770301	12707030	17313101	71271134				
ı a	3 received from disqualified persons			14,500.	35,000.	11,560.	61,060.				
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	F1 F0F	00 765	722	100 543	127 247	400 000				
	amount on line 13 for the year	51,585. 51,585.	98,765. 98,765.	4,722. 19,222.	143,543.	137,347.					
	Add lines 7a and 7b	51,585.	98,765.	19,222.	143,543.	148,907.	462,022. 6665421.				
	Public support. (Subtract line 7c from line 6.)						0003421.				
	etion B. Total Support	() 2245	#120040	() 22/2	(0 0000	() 0004	(0 =				
	ndar year (or fiscal year beginning in)	(a) 2017 1216693.	(b) 2018 1163879.	(c) 2019 1718584.	(d) 2020 1276769.	(e) 2021 1751518.	(f) Total 7127443.				
	Amounts from line 6	1210093.	1103073.	1/10304.	12/0/09.	1/31310.	/12/443.				
IUa	dividends, payments received on securities loans, rents, royalties, and income from similar sources	104.	36.	18.	25.	3,385.	3,568.				
b	Unrelated business taxable income					, , , , ,	,				
_	(less section 511 taxes) from businesses										
	acquired after June 30, 1975	104.	36.	18.	25.	3,385.	3,568.				
	Add lines 10a and 10b Net income from unrelated business	104.	30.	10.	45.	3,303.	3,300.				
•••	activities not included on line 10b, whether or not the business is										
	regularly carried on	21,517.	66,870.	47,845.	9,000.	16,507.	161,739.				
12	Other income. Do not include gain										
	or loss from the sale of capital assets (Explain in Part VI.)		1,002.	2,472.	96,098.	3,023.	102,595.				
13	Total support. (Add lines 9, 10c, 11, and 12.)	1238314.	1231787.	1768919.	1381892.	1774433.	7395345.				
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	on,				
_							> L				
	ction C. Computation of Publ						00 10				
	Public support percentage for 2021 (I			column (f))		15	90.13 %				
	Public support percentage from 2020					16	92.76 %				
Sec	ction D. Computation of Inves										
17	Investment income percentage for 20			ne 13, column (f))		17	.05 %				
18	Investment income percentage from 2					18	%				
19a	33 1/3% support tests - 2021. If the	-									
	more than 33 1/3%, check this box a										
b	33 1/3% support tests - 2020. If the line 18 is not more than 33 1/3%, che	-									
20	Private foundation. If the organization		-	· ·		-					
	and organization	a.a . iot oi ioon a	37. 0.7 1110 17, 10	, c			/Form 000\ 2001				

Part IV | Supporting Organizations

(Complete only if you checked a box in 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

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

		Yes	No
	1		
	2		
	3a		
	3b		
	_		
	3с		
	4a		
	-1 a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	6		
	8		
	9a		
	01-		
	9b		
	9c		
	10a		
lula	10b		2021

Par	t IV	Supporting Organizations (continued)			
		- Comment of the comm		Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
b	A fami	ily member of a person described on line 11a above?	11b		
С	A 35%	5 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		
Sec	tion E	3. Type I Supporting Organizations			
				Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	_	rted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did th	e organization operate for the benefit of any supported organization other than the supported			
	organi	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	super	vised, or controlled the supporting organization.	2		
Sec	tion C	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 trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mar	nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sec	tion [D. All Type III Supporting Organizations			
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organi	ization'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			
	organi	zation'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			
	organi	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	son of the relationship described on line 2, above, did the organization's supported organizations have a			
	signific	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		rted organizations played in this regard.	3		
Sec		E. Type III Functionally Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).	•		
а		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.	_44!_	1	
C		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	Structio		NI.
2		ies Test. Answer lines 2a and 2b below.		Yes	No
а		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		pported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify supported organizations and explain how these activities directly furthered their exempt purposes,			
		the organization was responsive to those supported organizations, and how the organization determined			
		nese activities constituted substantially all of its activities.	2a		
h		e activities described on line 2a, above, constitute activities that, but for the organization's involvement,	Za		
D		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		If the reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's position that its supported organization(s) would have engaged in	2b		
3		t of Supported Organizations. Answer lines 3a and 3b below.	2.0		
		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
-		supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

72-1136068 Page 6 NEW ORLEANS FILM & VIDEO SOCIETY, INC. Schedule A (Form 990) 2021 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain Recoveries of prior-year distributions 2 2 Other gross income (see instructions) 3 4 Add lines 1 through 3. Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount 4 see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035. 6 6 Recoveries of prior-year distributions 7 7 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	integr	ated Type III supporting orga	anization (see
	instructions).			

Schedule A (Form 990) 2021

Par	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ıed)	
Secti	ion D - Distributions	Current Year			
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpos	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsiv	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	ıs	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

NEW ORLEANS FILM & VIDEO SOCIETY, INC.

Employer identification number 72-1136068

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir		•
		(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 advi	sed funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
			·
Pa	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (for example, recrea		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified 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
а	Total number of conservation easements		2a
b			2b
С	Number of conservation easements on a certified historic str		
d			
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		-
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic 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 cor	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	D(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	e statement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial staten	nents that describes the
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections o		other Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	· ·	
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		> \$
h	Assets included in Form 990 Part Y		A

_	/	ANS FILM							36068	9-
Pai	t III Organizations Maintaining Co									ıed)
3	Using the organization's acquisition, accession	n, and other record	ds, checl	k any of the	following that	t make sigr	nificant	use of its		
	collection items (check all that apply):									
а	Public exhibition	C			hange progra	m				
b	Scholarly research	6	• 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's college							ose in Par	t XIII.	
5	During the year, did the organization solicit or r								7	
D	to be sold to raise funds rather than to be main								Yes	No_
Pai	Escrow and Custodial Arrange		ete if the	organizatio	n answered "	Yes" on Fo	orm 990), Part IV,	line 9, or	
	reported an amount on Form 990, Part	<u> </u>								
1a	Is the organization an agent, trustee, custodiar								٦.,	п
	on Form 990, Part X?								Yes	└── No
b	If "Yes," explain the arrangement in Part XIII ar	na complete the to	ollowing 1	able:					Amount	
	B								Amount	
	Beginning balance						1c			
	Additions during the year						1d			
_	Distributions during the year						1e			
f O-	Ending balance						1f		Yes	□ Na
	Did the organization include an amount on For If "Yes," explain the arrangement in Part XIII. C					-				No
Par										
. u.	· ·	(a) Current year		rior year	(c) Two years			ears back	(e) Four v	ears back
12	Beginning of year balance	(4, 5 4, 1 5, 1 1) 5 4.	(-,-		(3)	(-)	,		(-)	
	Contributions					•				
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
Ŭ	and programs									
f	Administrative expenses									
g g	End of year balance									
2	Provide the estimated percentage of the current	nt vear end baland	ce (line 1	a. column (a	a)) held as:	<u> </u>				
	Board designated or quasi-endowment		%	9,	.,,,					
	Permanent endowment	%								
	Term endowment ▶ %	_								
	The percentages on lines 2a, 2b, and 2c shoul	d equal 100%.								
За	Are there endowment funds not in the possess	sion of the organiz	ation tha	at are held a	nd administer	red for the	organiz	zation		
	by:						-			res No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ons listed as requi	red on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the o		owment	funds.						
Par	t VI Land, Buildings, and Equipme									
	Complete if the organization answered	"Yes" on Form 99	0, Part I\	/, line 11a. S	See Form 990	, Part X, lin	ie 10.			
	Description of property	(a) Cost or o			or other	(c) Accı		ed	(d) Book	value
		basis (investi	ment)	basis	(other)	depre	ciation			
	Land									
	Buildings									
С	Leasehold improvements									
d	Equipment									
_	Othor	1								

Schedule D (Form 990) 2021

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2021 NEW ONDEANS	LIDE & AIDEC	72-1130000 Page
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 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. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 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)	4	

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.

(6) (7) (8) (9)

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, col. (B) line 15.)	

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)	OTHER CURRENT LIABILITIES	7,609.
(3)	GRANT PAYABLE	10,000.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	17,609.

^{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..

		(Form 990) 2021						VIDEC						<u> 1136068</u>	Page
Pai	t XI	Reconciliation		-						Vith I	Reven	ue per	Retur	٦.	
		Complete if the orga							12a.					2 200	020
1		revenue, gains, and o	• • •	•									1	2,309	,838
2		nts included on line 1			,	,			1						
а		nrealized gains (losse										4	_		
b	Donat	ted services and use	of facilities	3					2b		29	1,179	<u> </u>		
С	Recov	veries of prior year gra	ants						2c						
d	Other	(Describe in Part XIII.)						2d		23	4,804	<u>•</u>		
е	Add lir	nes 2a through 2d											2e		,983
3	Subtra	act line 2e from line 1											3	1,783	<u>,855</u>
4	Amou	nts included on Form	990, Part	VIII, line 12	2, but	not or	n line 1:	:		_					
а	Invest	tment expenses not ir	ncluded or	n Form 990), Part	VIII, li	ne 7b		4a						
b	Other	(Describe in Part XIII.)						4b						
С	Add lir	nes 4a and 4b											4c		0
		revenue. Add lines 3 a												1,783	<u>,855</u>
Pai	rt XII	Reconciliation	of Expe	nses pei	r Au	dited	i Fina	ncial Sta	tements	With	Expe	nses pe	er Retu	ırn.	
		Complete if the orga	ınization a	nswered "\	Yes" c	on For	m 990,	Part IV, line	12a.						
1	Total e	expenses and losses	per audite	ed financial	state	ments							. 1	1,872	,622
2	Amou	nts included on line 1	but not o	n Form 990	0, Par	t IX, lir	ne 25:								
а	Donat	ted services and use	of facilities	·					2a		29	1,179	•		
b	Prior y	year adjustments							2b						
С		losses													
d		(Describe in Part XIII.									23	4,804	•		
е	Add lir	nes 2a through 2d											2e	525	,983
3	Subtra	act line 2a from line 1											3	1.346	.639

Part XIII Supplemental Information.

b Other (Describe in Part XIII.) c Add lines 4a and 4b

4 Amounts included on Form 990, Part IX, line 25, but not on line 1; a Investment expenses not included on Form 990, Part VIII, line 7b

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

4a

4c

1,346,639.

PART X, LINE 2:

THE ORGANIZATION ADOPTED THE PROVISIONS OF ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. MANAGEMENT OF THE ORGANIZATION BELIEVES IT HAS NO MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY IT HAS NOT RECOGNIZED ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. WITH FEW EXCEPTIONS, THE ORGANIZATION IS NOT SUBJECT TO U.S. FEDERAL, STATE AND LOCAL, OR INCOME TAX EXAMINATIONS BY TAX AUTHORITIES BEYOND THREE YEARS FROM THE FILING OF THOSE RETURNS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES

234,804.

Schedule D (Form 990) 2021 Part XIII Supplemental Info	NEW ORLEANS	FILM & VIDEO	SOCIETY,	INC.	72-1136068	Page 5
Part XIII Supplemental Info	rmation (continued)					
PART XII, LINE 2D -	- OTHER ADJUST	MENTS:				
FUNDRAISING EXPENSE	ES				234	,804.
			4			
			_			
		()	•			

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Employer identification number

NEW ORLEANS FILM & VIDEO SOCIETY, INC. 72-1136068 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants Mail solicitations X Internet and email solicitations f X Solicitation of government grants X Phone solicitations **d** X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) JOLENE PINDER - 1416 KENTUCKY SOLICIATION OF CORPORATE Yes No STREET, NEW ORLEANS, LA SPONSORSHIPS Λ 17,937 -17,937. 17,937. -17937Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990) 2021 NEW ORLEANS FILM & VIDEO SOCIETY, INC. 72-1136068 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events NEW ORLEANS NONE (add col. (a) through FILM SOCIETY col. (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 351,925 351,925. 295,279 295,279. 2 Less: Contributions 56,646. 56,646. 3 Gross income (line 1 minus line 2) 4 Cash prizes 117,058. 117,058. 5 Noncash prizes Direct Expenses 6 Rent/facility costs 3,718. 3,718. 7 Food and beverages 8 Entertainment 114,028. 114,028. 9 Other direct expenses 234,804. 10 Direct expense summary. Add lines 4 through 9 in column (d) -178,158. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III | Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? No **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No

b If "Yes," explain:

Sch	edule G (Form 990) 2021 NEW ORLEANS FILM & VIDEO SOCIETY, INC. 72-1	<u>.1360</u>	68	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	es	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	es	O No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Y	es	O No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party \$\bigs\\$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address ▶			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Essential of services provided p			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
u	retain the state gaming license?	☐ Y	es	☐ No
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	— -		
_	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	art III. line	s 9. 9	b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	,	, ,
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISEF	≀S:		
(I) NAME OF FUNDRAISER: JOLENE PINDER			
(I) ADDRESS OF FUNDRAISER: 1416 KENTUCKY STREET, NEW ORLEANS, LA	<u> </u>	117	7

132083 10-21-21 Schedule G (Form 990) 2021

Schedule G	G (Form 990)	NEW ORL	EANS	FILM 8	WIDEO	SOCIETY,	INC.	72-1136068	Page 4
Part IV	i (Form 990) Supplemental Info i	rmation (contin	nued)						
			-						
						4			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							Employer identification number
NEW ORLEA	72-1136068						
Part I General Information on Grants a							
1 Does the organization maintain records		e amount of the grant	s or assistance, the	e grantees' eligibili	ty for the grants or as	sistance, and the selec	
criteria used to award the grants or ass							X Yes No
2 Describe in Part IV the organization's pr							
Part II Grants and Other Assistance to recipient that received more than						Yes" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							EMERGING VOICES DIRECTORS
							PROGRAM ALUMNI GRANT TO
							SUPPORT EARLY DEVELOPMENT
MARION HILL FILMS LLC	86-3151912		7,250.	. 0.			OF A NEW FILM PROJECT
							SOUTHERN PRODUCERS LAB
				K			ALUMNI GRANT TO SUPPORT
							PRODUCTION OF A NEW FILM
SANTIAGUERES LLC	88-1333151		7,250.	0.			PROJECT
							SOUTHERN PRODUCERS LAB
							ALUMNI GRANT TO SUPPORT
							POST-PRODUCTION OF A NEW
THEINBETWEENFILM LLC	83-4239983		7,250.	. 0.	,		FILM PROJECT
2 Enter total number of section 501(c)(3):	and government or	ganizations listed in t	he line 1 table				

3 Enter total number of other organizations listed in the line 1 table

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
DEVELOPMENT AND POST-PRODUCTION GRANT FOR FILM	27	60,050.	0.		
Part IV Supplemental Information. Provide the information re	quired in Part I, lin	ne 2; Part III, column	(b); and any other a	dditional information.	
PART II, LINE 1, COLUMN (H):		4			
NAME OF ORGANIZATION OR GOVERNMEN	T: INSTIT	UTE OF WOM	IEN AND ETH	NIC STUDIES	
(H) PURPOSE OF GRANT OR ASSISTANC	E: COMMIS	SIONING GR	ANT TO SUP	PORT THE	
DEVELOPMENT AND PRODUCTION OF A S	HORT DOCU	MENTARY FI	LM TO PREM	IERE AT THE	
2021 NEW ORLEANS FILM FESTIVAL					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Open to Public Inspection

Name of the organization Employer identification number NEW ORLEANS FILM & VIDEO SOCIETY, 72-1136068 Part I Types of Property (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1q Art - Works of art 1 Art - Historical treasures Art - Fractional interests 3 Books and publications _____ 4 Clothing and household goods 5 6 Cars and other vehicles 7 Boats and planes Intellectual property 8 Securities - Publicly traded 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures 14 Qualified conservation contribution - Other Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 X 3,718.FAIR VALUE Food inventory 19 20 Drugs and medical supplies 21 Taxidermy Historical artifacts 22 Scientific specimens 23 24 Archeological artifacts 95,558. FAIR VALUE (PRIZE PACKAGE 25 (AUCTION ITEMS 9 21,500.FAIR VALUE 26 Other SOFTWARE X 7,798.FAIR VALUE \triangleright 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes." describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2021

Schedule M	(Form 990) 2021					SOCIETY,		72-1136068	Page 2
Part II	Supplemental is reporting in Part	I Infori	mation. Provident (b), the number	de the inforn er of contrib	nation required	d by Part I, lines 3 Imber of items red	0b, 32b, and 3	33, and whether the organiz mbination of both. Also con	ation nplete
	this part for any a	dditional	l information.		,				
						4			

SCHEDULE O (Form 990)

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.

2021
Open to Public Inspection

OMB No. 1545-0047

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

Name of the organization

NEW ORLEANS FILM & VIDEO SOCIETY, INC.

Employer identification number 72-1136068

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE NEW ORLEANS FILM SOCIETY DISCOVERS, CULTIVATES, AND AMPLIFIES

DIVERSE VOICES OF FILMMAKERS WHO TELL THE STORIES OF OUR TIME. WE

PRODUCE THE OSCAR-QUALIFYING NEW ORLEANS FILM FESTIVAL ANNUALLY AND

INVEST YEAR-ROUND IN BUILDING A VIBRANT FILM CULTURE IN THE SOUTH TO

SHARE TRANSFORMATIVE CINEMATIC EXPERIENCES WITH AUDIENCES, AND CONNECT

DYNAMIC FILMMAKERS TO CAREER-ADVANCING RESOURCES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

YEAR ROUND PROGRAMMING- THE NEW ORLEANS FILM SOCIETY PRESENTED A NUMBER

OF PRE-RELEASE SCREENINGS FREE FOR MEMBERS, AS WELL AS A FILM TRIVIA

COMPETITION TO ENGAGE AUDIENCES OUTSIDE OF NOFF AND OUR OTHER SIGNATURE

EVENTS.

EMERGING VOICES- THE EMERGING VOICES DIRECTORS LAB SUPPORTED 10

EMERGING DIRECTORS OF COLOR BASED IN LOUISIANA THROUGH A FOUR-DAY LAB

FOCUSING ON DEFINING THEIR CREATIVE VOICE AND LEARNING FILMMAKING TOOLS

TO BETTER POSITION THEM AND THEIR PROJECTS FOR SUCCESS. THE LAB

INCLUDED MENTORING SESSIONS THAT CONTINUED AFTER THE CONCLUSION OF THE

LAB WITH HAND-PICKED INDUSTRY VETERANS TO HELP ADVANCE THEIR PROJECTS.

MEMBERSHIP - PROVIDES SPECIAL DISCOUNTS AND FEATURES FOR MEMBERS OF THE SOCIETY. THE MEMBERSHIP CONTRIBUTIONS HELP THE SOCIETY TO FULFILL THE MISSION TO ENGAGE, EDUCATE, AND INSPIRE THROUGH THE ART OF FILM.

Schedule O (Form 990) 2021 Page **2**

Name of the organization

NEW ORLEANS FILM & VIDEO SOCIETY, INC.

Employer identification number 72-1136068

SOUTH SUMMIT- OVER THE COURSE OF THREE DAYS, THE SOUTH SUMMIT CONVENED
LOCAL, REGIONAL, AND NATIONAL MEDIA MAKERS, ARTS FUNDERS, AND
INSTITUTIONAL STAKEHOLDERS FOR A SERIES OF PANELS AND CONVERSATIONS
INTENDED TO SEED ACTION AROUND CREATING, RESOURCING, AND AMPLIFYING
STORYTELLING THROUGH FILM AND MEDIA THAT SHAPES THE PERSPECTIVE OF THE
AMERICAN SOUTH FOR THOSE BOTH OUTSIDE AND WITHIN IT. THIS VIRTUAL
SUMMIT WAS ENHANCED BY AN IN-PERSON SCREENING OF THE WORK OF
LOUISIANA-BASED ARTIST ZAC MANUEL, WHO PRESENTED FOUR TITLES FROM HIS
FILMOGRAPHY.

EXPENSES \$ 245,149. INCLUDING GRANTS OF \$ 41,300. REVENUE \$ 35,373.

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

THE FORM 990 IS REVIEWED AND APPROVED BY THE BOARD AND EXECUTIVE DIRECTOR PRIOR TO FILING.

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

THE EXECUTIVE DIRECTOR, AS PART OF HER HUMAN RESOURCE DUTIES, HAS DIRECT

CHARGE OF THE TASK. ANY CONFLICTS ARE REPORTED TO THE BOARD VIA THE

EXECUTIVE DIRECTOR.

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

COMPARABILITY DATA FROM OTHER FILM FESTIVALS AROUND THE COUNTRY AND
REGIONAL ARTS NON-PROFITS ARE USED TO ENSURE COMPENSATION IS REASONABLE.

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

ALL PERTINENT DOCUMENTS ARE AVAILABLE UPON REQUEST.

Schedule O (Form 990) 2021 Page **2**

Name of the organization NEW ORLEANS FILM & VIDEO SOCIETY, INC.	Employer identification number 72-1136068
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONTRACT SERVICES:	_
PROGRAM SERVICE EXPENSES	161,175.
MANAGEMENT AND GENERAL EXPENSES	8,775.
FUNDRAISING EXPENSES	223.
TOTAL EXPENSES	170,173.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	170,173.
FORM 990, PART XII, LINE 2C:	
THE PROCESS USED BY THE COMMITTEE THAT ASSUMES OVERSIGHT	OF THE AUDIT
HAS NOT CHANGED SINCE THE PRIOR YEAR.	