EXTENDED TO NOVEMBER 15, 2018

Department of the Treasury

17 503 Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Open to Public Inspection

Form **990** (2017)

Inter	nal Reve	nue Service	■ Go to www.irs.go	v/Form990 for instructions a	and the lates	t information.	Inspection
A F	or the	2017 calen	dar year, or tax year beginning		nd ending		
В	Check if		of organization			D Employer identification	tion number
	Addre	ss NEW	ORLEANS & COMPANY				
T	chang ∏Name		DUSINESS AS	<u> </u>		72-05	40607
<u> </u>	Name chang Initial		.,	alwared to atreat address)	Room/suite		10007
<u> </u>	return ∏Fınal		r and street (or P.0. box if mail is not d ST. CHARLES AVEN	·	Noonivsuite		566-5011
	return/ termin	_	town, state or province, country, an			G Gross receipts \$	35,416,972.
_	ated Amend	ded NTESTAT	ORLEANS, LA 7013			H(a) Is this a group retu	
=	□return □Applic Ition		and address of principal officer J.	· · · · · · · · · · · · · · · · · ·		for subordinates?	Yes X No
	tion pendir		ST. CHARLES AVENU		PLA 670	H(b) Are all subordinates inclu	
	[nv.av	empt status	501(c)(3) X 501(c) (6) 	11 / 10/	I .	
			. NEWORLEANSCVB . COM	/ (III3611 110) [] 404) (#/	1)(0)	H(c) Group exemption r	
				Association Other	I Year	of formation: 1960 M S	
		Summary			1 2 1001	oriormation. 1500 in a	tate or logal dollinoite 2222
			be the organization's mission or mos	st significant activities DEV	ELOPINO	AND MARKETTI	NG THE NEW
Ge .			REGION AS THE PR				
万層			ox if the organization disc				
Š	1		oting members of the governing bod	/	\	3	29
	I		dependent voting members of the g		3/	4	29
Z [®] S	5	Total number	of individuals employed in calendar	vear 20#2 (Part / line 2a)	(E)	5	276
Activities &	6	Total number	of volunteers (estimate if necessary	100), / _	6	0
_ }	7 2	Total unrelate	ed business revenue from Part VIII 4	olumo (c), line 13	K /	7a	76,900.
≨ ₹	. p	Net unrelated	business taxable income from For	n 990 T. line/\$4		7b	0.
		1101 01110101010	of individuals employed in calendar of volunteers (estimate if necessary ed business revenue from Part VIII) d business taxable income from Fort			Prior Year	Current Year
>	1		s and grants (Part VIII, line 1h)	CENT OGDEN		1,701,404.	1,704,394.
	1		vice revenue (Part VIII, line 2g)	% \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		32,638,388.	33,166,269.
Bevenue Revenue	1	_	ncome (Part VIII, column (A), lines 3,	4. and 7d)		345,581.	546,309.
5 č	1		e (Part VIII, column (A), lines 5, 6d, 8			2,058,668.	0.
	1		e - add lines 8 through 11 (must equa		,	36,744,041.	35,416,972.
	1		ımılar amounts paid (Part IX, column		<u> </u>	0.	0.
	1		to or for members (Part IX, column			0.	0.
s	1	•	er compensation, employee benefits		o)	8,643,138.	9,037,566.
Expenses	1		fundraising fees (Part IX, column (A)			0.	0.
je L	1		sing expenses (Part IX, column (D), li	· .	0.		
ũ	1		ses (Part IX, column (A), lines 11a-11	· · · · · · · · · · · · · · · · · · ·		21,430,339.	25,779,766.
	1		es Add lines 13-17 (must equal Part			30,073,477.	34,817,332.
			expenses Subtract line 18 from line			6,670,564.	599,640.
					В	eginning of Current Year	End of Year
	20	Total assets	(Part X, line 16)			50,084,116.	53,316,857.
	21	Total liabilitie	s (Part X, line 26)			4,594,158.	5,702,262.
	22	Net assets or	fund balances Subtract line 21 from	m line 20		45,489,958.	47,614,595 .
	t II	Signatur	e Block			·	
Urid	er pena	lties of perjury,	, I declare that I have examined this return	n, including accompanying sched	ules and staten	nents, and to the best of my k	nowledge and belief, it is
true,	, correc	t, and complete	e. Declaration of preparer Other than offi	cer) is based on all information of	which prepare	r has any knowledge.	
		1	Staplantery			11/12	2/18
Sigi	n	Signatui	re of officer			Date /	/
Her	е	VJ. S	STEPHEN PERRY, PRE	SIDENT & CEO			
_		Type or	print name and title				
		Print/Type pre	parer's name	Preparer's signature		Date Check] PTIN
Paid	ı		PRENDERGAST, MS	, thing !	•	seff-employed	₽00151746
Prep	arer	Firm's name	LAPORTE, APAC	<u> </u>		Firm's EIN	72-1088864
Use	Only	Firm's addres	s 111 VETERANS ME	MORIAL BLVD. #	600		
			METAIRIE, LA 70			Phone no. 504 -	-835-5522
May	the IF	RS discuss th	is return with the preparer shown at	ove? (see instructions)			X Yes No

732001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions.

cyin	990 (2017) NEW ORLEANS & COMPANY	72-0540607 Page	<u>2</u>
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u>X</u>
1	Briefly describe the organization's mission		
	THE MISSION OF THE NEW ORLEANS CONVENTION & VISITORS BU		
	CREATE VIBRANT ECONOMIC GROWTH BY DEVELOPING AND MARKET		
		WOLVING AND	
	LEADING THE DIVERSE ELEMENTS OF THE HOSPITALITY INDUSTR	Y AND THE	
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	10
	If "Yes," describe these new services on Schedule O	? Yes X N	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	?Yes _AN	10
_	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, a		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to otherwise of any for each program assured.	ters, the total expenses, and	
4-	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$) (Reve CONVENTION SALES, SERVICES, AND GROUP LEISURE MARKETING		_ ′
	THE BUREAU CONTACTS MANY ASSOCIATIONS AND CORPORATE BUS		—
	SOLICIT FACILITIES IN NEW ORLEANS; 1,148 CONVENTIONS AND SOLICITES IN NEW ORLEANS IN SOLICITES IN NEW ORLEANS IN SOLICITES IN NEW ORLEANS IN SOLICITES IN SOL		—
	BOOKED BY THE BUREAU IN 2017. THE CONVENTION & LEISURE		
	COMBINED BOOKED A TOTAL OF 2,358,646 ROOM NIGHTS IN 201		
	ALSO PROVIDED ASSISTANCE TO 12,519 TRAVEL AGENTS AND 9		
	2017.		_
			_
4b	(Code) (Expenses \$ including grants of \$) (Reve	nue \$	_)
	PROMOTIONAL MEDIA:		—
	THE BUREAU PRINTS AND DISTRIBUTES BROCHURES AND MAPS WE		—
	INFORMATION ABOUT THE VARIOUS POINTS OF INTEREST AND EVENTS OF THE PROPERTY OF		—
	IN NEW ORLEANS. IN 2017, APPROXIMATELY 504,223 BROCHUE		—
	CIRCULATED. ADDITIONALLY, THE BUREAU ASSISTED MEDIA AF	COUND THE WORLD	—
	FOR A TOTAL RESULT OF 2,656 ASSISTED IN 2017.		
			_
	· · · · · · · · · · · · · · · · · · ·		_
			_
4c	(Code) (Expenses \$ including grants of \$) (Reve	nue \$	_)
	MEMBERSHIP PROMOTION:		
	THE BUREAU CONDUCTS PROMOTIONAL ACTIVITIES THROUGHOUT		
	ATTRACT ADDITIONAL MEMBERS. THE TOTAL MEMBERSHIP FOR 2	2017 WAS 1,087.	
			—
			—
			—
			—
			—
			_
			—
4d	Other program services (Describe in Schedule O)	······································	—
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses		_
		Form 990 (20	17)

Part IV Checklist of Required Schedules & COMPANY

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_	.,	
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		· •
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
• •	as applicable			
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		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	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_	X	
f	·		v	
	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	12a	х	
.	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	128	Λ	-
υ	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	_16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		İ	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		X
	complete Schedule G, Part III	19		Λ

Form **990** (2017)

Form 990 (2017) NEW ORLEANS & COMPANY

Part IV Checklist of Required Schedules (continued)

			res	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		X
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			
	Schedule J	23	Х	
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		
ь	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? 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			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	Ì		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> X</u>	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			l
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	_	ļ <u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_		,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	_	v	
	Note. All Form 990 filers are required to complete Schedule O		X	10015
		Form	330	(2017)

	1990 (2017) NEW ORLEANS & COMPANY 72-054	1000	<u> </u>	age S
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		,	Щ,
	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 13	<u>. 6</u>	1	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0		[
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		1	İ
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 25	16	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	If "Yes," enter the name of the foreign country	_		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	X
¢	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	ļ	ļ
7	Organizations that may receive deductible contributions under section 170(c).		ļ	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	r? <u>7a</u>	ļ	
b	if "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	ļ	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	? <u>7h</u>	<u> </u>	L
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	ļ	ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		1
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	_		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	-	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	
	Note. See the instructions for additional information the organization must report on Schedule O		1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	_		
С	Enter the amount of reserves on hand	+	1	ļ
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ļ	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form **990** (2017)

Par	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O			"No" r	espon	se		
	Check if Schedule O contains a response or note to any line in this Part VI	000	mstractions			X		
Sec	tion A. Governing Body and Management					بعمر		
500	and A. Governing Doay and Management				Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	29					
	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 in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent	1b	29					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with		!				
-	officer, director, trustee, or key employee?	•	•	2		X		
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision					
	of officers, directors, or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 wa	as filed?	4	_X			
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		_X_		
6	Did the organization have members or stockholders?			6	X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or					
	more members of the governing body?			7a	X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or					
	persons other than the governing body?			7b		<u>X</u>		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by tl	ne following:					
а	The governing body?			8a	_X_			
b	Each committee with authority to act on behalf of the governing body?			8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	Х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)					
					Yes	No		
	Did the organization have local chapters, branches, or affiliates?		"	10a		_X_		
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	naptei	rs, affiliates,	40.				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	v			
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly beto	ore filling the form?	11a	X			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			12a	Х			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	to cor	officte?	12b	X			
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			120				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, u	escribe	12c	Х			
	In Schedule O how this was done			13	X			
13	Did the organization have a written whistleblower policy?			14	X			
14	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approve	al hv ii	ndenendent	- '-				
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		посрености					
_	The organization's CEO, Executive Director, or top management official			15a	х			
a	Other officers or key employees of the organization			15b	X			
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			100				
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	with a					
104	taxable entity during the year?			16a		х		
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation	te its	participation					
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga							
	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 ► NONE							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	Γ (Sec	tion 501(c)(3)s only)	availab	le			
	for public inspection. Indicate how you made these available Check all that apply							
	Own website Another's website X Upon request Other (explain		•					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict	of interest policy, and	i finan	cıal			
	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 bo	oks a	nd records 🕨					
	TAMMIE BOTELER - 504-566-5094			<u>-</u>	-			
	2020 ST. CHARLES AVE, NEW ORLEANS, LA 70130			<u> </u>	000	(2017)		
				FORM		C2011/1		

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

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

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

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

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

(ist any hours for related organizations related organizations (W2/1099MISC) (W2/109MISC) (W2/109	(A) Name and Title	(B) Average hours per week	box	not cl unte	ss pe	rtior more rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
1.50		(list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former	the organization	organizations	compensation from the organization and related
1.50	(1) DARRYL BERGER	1.50								_	_
STEVE CAPUTO 1.50	SECRETARY EX-OFFICIO		X		X		_		0.	0.	0
1.50 X	(2) OCTAVIO MANTILLA	1.50									
X	DIRECTOR		X						0.	0.	U
1.50 X	(3) STEVE CAPUTO	1.50									•
X	DIRECTOR	1.50	X						0.	0.	0
1.50 ROBERT BRAY 1.50 X	(4) SUSAN TAYLOR	1.50	∤							•	•
DIRECTOR	DIRECTOR	1.50	X				-		0.	_0.	
1.50	(5) ROBERT BRAY	1.50	١								•
Note	DIRECTOR	1.50	X						0.	0.	<u> </u>
1.50	(6) RON FORMAN	1.50	1								•
X X X X X X X X X X	DIRECTOR - EX OFFICIO	1.50	X	Н			-		0.	U <u>.</u>	U
1.50		1.50	ا ا								•
X X X X X X X X X X		1.50	X		A			_	0.	<u> </u>	
1.50		1.50	١,,		7.					•	^
X		1 50	A		Λ		_		U •	0.	U
1.50		1.50								^	^
DIRECTOR		1 50	A		-					0.	
1.50		1.50	v						0	n	n
PAST CHAIR- EX OFFICIO (12) MELVIN RODRIGUE DIRECTOR - EX OFFICIO (13) GREGORY RUSOVICH CHAIR ELECT (14) DOUG THORNTON DIRECTOR - EX OFFICIO (15) MICKAL ADLER DIRECTOR (16) STEVE PETTUS PREASURER (17) BONNIE BOYD (17) BONNIE BOYD (18) W X X X X X X X X X X X X X X X X X X		1 50	^		-				0.	<u> </u>	
1.50		1.50	v		v				0	0.	n
DIRECTOR - EX OFFICIO		1 50	Α		^		\vdash		0.	•	<u> </u>
1.50		1.50	x						0.	0.	0
X X 0 0 0 0 0 0 0		1.50									
1.50		1.30	x		x				0.	0.	0
DIRECTOR - EX OFFICIO		1.50						_			<u>_</u>
1.50			$ \mathbf{x} $						0.	0.	0
DIRECTOR X 0. 0. 0 0		1.50									· · · · · · · · · · · · · · · · · · ·
(16) STEVE PETTUS TREASURER (17) BONNIE BOYD 1.50 1.50 1.50 1.50			$ \mathbf{x} $						0.	0.	0
TREASURER (17) BONNIE BOYD 1.50		1.50	_								
(17) BONNIE BOYD 1.50					x				0.	0.	0
		1.50									
									0.	0.	0

732007 11-28-17

Form 990 (2017)

Part VII Section A. Officers, Directors,	Trustees, Key Em				iH b	ghes	st C	ompensated Employe	es (continued)	007 Fage 0
	(A) (B) (C)									(F)
Name and title	Average hours per week	box,	not cl unles er an	ss pe	more	than o	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) STAN HARRIS	1.50							_	_	
DIRECTOR - EX OFFICIO		X						0.	0.	0.
(19) KATY CASBARIAN DIRECTOR	1.50	x						0.	0.	0.
(20) KATHIE JACOBS DIRECTOR	1.50	х						0.	0.	0.
(21) DAVID TEICH DIRECTOR	1.50	Х						0.	0.	0.
(22) DIANE LYONS	1.50	X						0.	0.	0.
DIRECTOR (23) AMY REIMER	1.50								0.	0.
DIRECTOR (24) BRANDY CHRISTIAN	1.50	X						0.		
DIRECTOR (25) QUENTIN MESSER	1.50	X						0.	0.	0.
DIRECTOR (26) CAMILLE WHITWORTH DIRECTOR	1.50	X						0.	0.	0.
1b Sub-total	I						<u> </u>	0.	0.	0.
c Total from continuation sheets to P d Total (add lines 1b and 1c)							<u> </u>	2,410,470. 2,410,470.	0.	313,069. 313,069.
2 Total number of individuals (including compensation from the organization		iose	liste	d at	oove	e) wh	no re	eceived more than \$100	0,000 of reportable	21
										Yes No

Yes No

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
AMERICAN EXPRESS, P.O. BOX 360001, FORT		
LAUDERDALE, FL 33336-0001	CREDIT CARDS	874,297.
CHASE CARD SERVICES		
P.O. BOX 94014, PALATINE, IL 60094-0001	CREDIT CARDS	778,477.
TRAHAN ARCHITECTS, 701 POYDRAS, SUITE		
150P, NEW ORLEANS, LA 70139	ARCHITECTURAL	770,508.
DICK CLARK PRODUCTION RIGHTS, LLC		
2900 OLYMPIC BLVD., SANTA MONICA, CA 90404	BROADCASTING	400,000.
COLLINSON & COMPANY, 15 TECHNOLOGY PKWY		
SOUTH, SUITE 250, NOCROSS, GA 30092	ADVERTISING	374,000.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	, e°
\$100,000 of compensation from the organization > 29		
CEE DADE VIII CECHTON A COMMINIMETON CI	מחממו	Form 990 (2017)

SEE PART VII, SECTION A CONTINUATION SHEETS

rendered to the organization? If "Yes," complete Schedule J for such person

Form **990** (2017)

732008 11-28-17

Part VII Section A. Officers, Directors, Tru (A) Name and title	ustees, Key Er (B)	nplo	yee		-	ligh	est			
(A)					-					
•	Average hours	(cl	(C) Position (check all that apply)		(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) KEVIN DOLLIOLE	1.50									
DIRECTOR - EX OFFICIO		X						0.	0.	<u>0.</u>
(28) J.STEPHEN PERRY	60.00									
PRESIDENT/CEO				X				474,882.	0.	132,980.
29) KIM PRIEZ	50.00									
VICE-PRESIDENT OF TOURISM					X			221,724.	0.	15,380.
(30) CARA BANASCH	50.00									
SENIOR VP OF CONVENTION SA					X			319,665.	0.	<u> 15,720.</u>
(31) SALLEE PAVLOVICH	50.00									
DIRECTOR OF CORPORATE AND					X			170,907.	0.	<u>13,599.</u>
(32) ROBERT RESO	50.00									
DIRECTOR OF NEW BUSINESS D					X			151,569.	0.	24,834.
33) CHERYL TEAMER	50.00									
SENIOR VP PUBLIC AFFAIRS					X			221,434.	0.	15,9 <u>66</u> .
(34) KRISTIAN SONNIER	50.00									
/P COMM/PUBLIC RELATIONS					X			178,345.	0.	14,149.
(35) NATHAN PENNISON	50.00									
SENIOR ACCOUNT EXECUTIVE						X		127,428.	0.	21,202.
(36) TAMMIE BOTELER	50.00								_	
/P FINANCE						X		138,734.	0.	6,9 <u>95</u> .
(37) DONNA GLOVER	50.00								_	
DIRECTOR OF ASSOCIATION MEETING SALE						X		135,559.	0.	16,952.
(38) JEFFREY ANDING	50.00								_	
/P EXTERNAL AFFAIRS						X		135,591.	0.	11,282.
(39) BRIAN WALKER	50.00									
/P INFORMATION SYSTEMS						X		134,632.	0.	24,010.
					\dashv		-			
							-			
			\vdash							
				\vdash						
										
otal to Part VII, Section A, line 1c								2,410,470.	+	313,069.

72-0540607 Form 990 (2017) **NEW ORLEANS & COMPANY** Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections
512 - 514 Unrelated Related or Total revenue business exempt function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues 1,704,394 c Fundraising events 1c 1d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 1_704_394 Business Code Program Service Revenue 2 a TOURISM SUPPORT ASSESSMENT REVENU 900099 18,971,976 18,971,976 b STATE OF LA/NOTMC FUNDING 900099 13,049,090 13,049,090 900099 C STAFFING SERVICES 499,199 499,199 d other revenue 900099 312,405. 312,405 INDUSTRY SHOW COST-SHARE 900099 256,699 256,699 All other program service revenue 541800 76,900 g Total. Add lines 2a-2f 33 166 269 Investment income (including dividends, interest, and other similar amounts) 546,309 546.309. Income from investment of tax exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a

12 732009 11-28-17

b

Form **990** (2017)

546 309

76,900

All other revenue Total. Add lines 11a-11d Total revenue. See instructions.

35 416 972

33 089 369

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)								
	Check if Schedule O contains a respoi		this Part IX	(0)	(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	Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments See Part IV, line 21								
2	Grants and other assistance to domestic								
	individuals See Part IV, line 22								
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign		•						
	individuals See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,	1 050 755							
_	trustees, and key employees	1,859,755.							
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
7	persons described in section 4958(c)(3)(B) Other salaries and wages	5,738,786.							
7 8	Pension plan accruals and contributions (include	5,736,760.							
٥	section 401(k) and 403(b) employer contributions	249,985.							
9	Other employee benefits	679,677.							
10	Payroll taxes	509,363.							
11	Fees for services (non-employees)	30373031		·					
a	Management								
b	Legal	81,667.							
С	Accounting								
d	Lobbying	157,000.							
е	Professional fundraising services See Part IV, line 17								
f	Investment management fees								
g	Other (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch O)	37,660.							
12	Advertising and promotion	16,294,631.							
13	Office expenses	330,968.							
14	Information technology	340,700.							
15	Royalties	240 505			-				
16	Occupancy	349,585.	 						
17	Travel	1,725,920.		·					
18	Payments of travel or entertainment expenses								
19	for any federal, state, or local public officials Conferences, conventions, and meetings	1,907,168.							
20	Interest	1,001,100.							
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	631,607.							
23	Insurance	150,512.							
24	Other expenses Itemize expenses not covered								
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)								
	amount, list line 24e expenses on Schedule 0.)								
а	REBRANDING	1,858,599.							
þ	CLIENT SERVICE INITIATI	479,780.							
С	PUBLIC RELATIONS	472,284.							
d	FESTIVAL SPONSORSHIPS	428,321.							
	All other expenses	533,364.							
25_	Total functional expenses Add lines 1 through 24e	34,817,332.							
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								
	Check here if following SOP 98-2 (ASC 958-720)								

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 18,634,248. 18,602,273. 1 Cash - non-interest-bearing 1 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 4,370,286. 6,008,256. 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L Assets 20,225. Notes and loans receivable, net 7 7 34,304. 8 24,867. Inventories for sale or use 617,787. 541,121. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 15,8<u>29,388.</u> basis Complete Part VI of Schedule D 10a <u>5,830,573.</u> 10,025,116. 9,998,815. 10b 10c b Less, accumulated depreciation 16,889,325. 15,234,350. Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 1,200,000. 1,200,000. 14 Intangible assets 14 Other assets See Part IV, line 11 15 15 50,084,116. 53,316,857. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 2,768,926. 2,488,867. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 51,811. 48,935. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of <u>1,776,297.</u> 25 3,161,584. Schedule D 4,594,158. 5,702,262. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 30,127,681 34,404,687. 27 27 Unrestricted net assets 13,209,908. 15,362,277. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 47,614,595. 45,489,958. 33 33 Total net assets or fund balances 53,316,857. 50,084,116. Total liabilities and net assets/fund balances

Form 990 (2017)

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

732012 11-28-17

Form 990 (2017)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

• Section 501(c)(A) (5) or (6) organizations. Complete Part III

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II·B. Do not complete Part II·A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Name of organization	(o) organizations complete rart in		Emple	oyer identification number
ŭ	IEW ORLEANS & COMPAN	rv	L.III.	72-0540607
Part I-A Complete	if the organization is exemp	t under section 501(c)	or is a section 527 or	rganization.
	of the organization's direct and indirect vity expenditures		ın Part IV	
Part I-B Complete	if the organization is exemp	t under section 501(c)	(3).	
1 Enter the amount of an	y excise tax incurred by the organization	on under section 4955	▶\$	
2 Enter the amount of an	ly excise tax incurred by organization in	managers under section 4955	5 ▶\$	
3 If the organization incu	rred a section 4955 tax, did it file Form	4720 for this year?		Yes No
4a Was a correction made	; ?			Yes No
b If "Yes," describe in Pa				\(\alpha\)
Part I-C Complete	if the organization is exemp	t under section 501(c)	, except section 501(c)(3).
1 Enter the amount direct	tly expended by the filing organization	for section 527 exempt func	tion activities > \$	
2 Enter the amount of th	e filing organization's funds contributed	d to other organizations for s		
exempt function activit	ies		▶\$	
•	expenditures Add lines 1 and 2 Enter	here and on Form 1120-POL	., •	
line 17b			▶\$	Yes No
• •	on file Form 1120-POL for this year?			
made payments. For e contributions received	esses and employer identification numl ach organization listed, enter the amou that were promptly and directly deliver	unt paid from the filing organi red to a separate political org	zation's funds Also enter th janization, such as a separat	e amount of political
political action commit	tee (PAC) If additional space is needed	d, provide information in Part	: IV	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
- ·				
For Paperwork Reduction	Act Notice, see the Instructions for F	Form 990 or 990-EZ.	Schedule C	(Form 990 or 990-EZ) 2017

732041 11-09-17

LHA

Schedule C (Form 990 or 990-EZ) 2017] Part II-A Complete if the org	NEW O	RLEANS on is exer	& COMPANY npt under sectio	n 501(c)(3) and file	72- ed Form 5768 (e	0540607 Page 2 election under
section 501(h)).						
A Check if the filing organization	tion belon	gs to an affi	liated group (and list in	Part IV each affiliated	group member's na	me, address, EIN,
expenses, and shar	e of exces	ss lobbying (expenditures).			
3 Check if the filing organization	tion check	ed box A ar	nd "limited control" pro	ovisions apply		
		bying Exper neans amou	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience nut	dic opinion (grass roots lobbying)			
b Total lobbying expenditures to influ						
c Total lobbying expenditures (add li			ay (diloot lobbying)	<u> </u>		
d Other exempt purpose expenditure		u 10,				
• • • • • •		s to and to	N.	<u> </u>		
e Total exempt purpose expenditure			•	h columns		
f Lobbying nontaxable amount Ente						
If the amount on line 1e, column (a) o	r (D) is:		bying nontaxable am			
	Not over \$500,000 20% of the amount on line 1e					
·····	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000					
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000					
Over \$1,500,000 but not over \$17,	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000					
Over \$17,000,000						
g Grassroots nontaxable amount (en	ter 25% c	of line 1f)	· - ·			
h Subtract line 1g from line 1a. If zero		-				
Subtract line 1f from line 1c If zero						
If there is an amount other than zer	-		line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this						Yes No
(Some organizations th	nat made Se	a section 5 the separa	ate instructions for li	have to complete all ones 2a through 2f.)	of the five columns	below.
· · · · · · · · · · · · · · · · · · ·	Lobi	oying Exper	ditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
					<u></u>	
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
1.0						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						
i diassioots loobyiilig experiditules			L	l		

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990 EZ) 2017 NEW ORLEANS & COMPANY 72-0540607 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

g the year, did the filing organization attempt to influence foreign, national, state or legislation, including any attempt to influence public opinion on a legislative matter ferendum, through the use of inteers? staff or management (include compensation in expenses reported on lines 1c through 1i)? a advertisements? ings to members, legislators, or the public? cations, or published or broadcast statements? its to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?	es	Ņo	Amo	unt
legislation, including any attempt to influence public opinion on a legislative matter derendum, through the use of states? staff or management (include compensation in expenses reported on lines 1c through 1i)? a advertisements? ings to members, legislators, or the public? cations, or published or broadcast statements? ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
legislation, including any attempt to influence public opinion on a legislative matter derendum, through the use of states? staff or management (include compensation in expenses reported on lines 1c through 1i)? a advertisements? ings to members, legislators, or the public? cations, or published or broadcast statements? ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
terendum, through the use of staff or management (include compensation in expenses reported on lines 1c through 1i)? a advertisements? ings to members, legislators, or the public? cations, or published or broadcast statements? ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
staff or management (include compensation in expenses reported on lines 1c through 1i)? a advertisements? ings to members, legislators, or the public? cations, or published or broadcast statements? ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
a advertisements? Ings to members, legislators, or the public? cations, or published or broadcast statements? ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
a advertisements? Ings to members, legislators, or the public? cations, or published or broadcast statements? ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
cations, or published or broadcast statements? ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
ts to other organizations for lobbying purposes? t contact with legislators, their staffs, government officials, or a legislative body?				
t contact with legislators, their staffs, government officials, or a legislative body?				
s, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
r activities?				
Add lines 1c through 1i				
ne activities in line 1 cause the organization to be not described in section 501(c)(3)?				
es," enter the amount of any tax incurred under section 4912				
es," enter the amount of any tax incurred by organization managers under section 4912				
filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		•		
)1(c)(5),	or se	ction	
50 I(C)(6).			Yes	No
substantially all (000/, or mars) dues reserved condeductible by members?				X
• • •				<u>x</u>
	יר עם פרי		Y	
answered "Yes."				
			1,/04	, 334.
,, ,		22	157	,000.
·				,981.
over normality year				,981.
egate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				,137.
			=	7
the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	ıl			
nditure next year?		4		
nditure next year? ble amount of lobbying and political expenditures (see instructions)		4 5	<31	,156.
•			<31	,156.
ole amount of lobbying and political expenditures (see instructions)	Part II-A, lı	5		,156.
	the activities in line 1 cause the organization to be not described in section 501(c)(3)? s," enter the amount of any tax incurred under section 4912 s," enter the amount of any tax incurred by organization managers under section 4912 filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 50 to 1(c)(6). substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the price organization agree to carry over lobbying and political campaign activity expenditures from the price of 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." assessments and similar amounts from members on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political ness for which the section 527(f) tax was paid). In year over from last year regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues ces were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	the activities in line 1 cause the organization to be not described in section 501(c)(3)? s," enter the amount of any tax incurred under section 4912 s," enter the amount of any tax incurred by organization managers under section 4912 filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6). substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b answered "Yes." assessments and similar amounts from members on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political inses for which the section 527(f) tax was paid). In year over from last year regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues ces were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	the activities in line 1 cause the organization to be not described in section 501(c)(3)? s," enter the amount of any tax incurred under section 4912 s," enter the amount of any tax incurred by organization managers under section 4912 filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? The organization agree to carry over lobbying and political campaign activity expenditures from the prior year? The organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part answered "Yes." The organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures for which the section 527(f) tax was paid). In tyear The organization is exempt under section 162(e) dues The organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures are section 162(e) for a section 162(e) dues The organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures are section 162(e) dues The organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures are section 162(e) dues The organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures are section 162(e) dues The organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures are section 162(e) dues The organization agree to carry over lobbying and polit	the activities in line 1 cause the organization to be not described in section 501(c)(3)? s," enter the amount of any tax incurred under section 4912 s," enter the amount of any tax incurred by organization managers under section 4912 filling organization incurred a section 4912 tax, did it file Form 4720 for this year? A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, lines answered "Yes." assessments and similar amounts from members on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political inses for which the section 527(f) tax was paid). In tyear over from last year over from last year again and political expenditures of nondeductible section 162(e) dues cause of the amount on line 2c exceeds the amount on line 3, what portion of the excess

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

Employer identification number

Par	NEW ORLEANS & COMP.		s or Accounts Complete if the
· ai			S Of Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
	T. A. J A A A	(a) Donor advised funds	(b) I dilus and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in v	•	
	are the organization's property, subject to the organization's		∐ Yes ☐ No
	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	
Parl	Impermissible private benefit?		Yes No
			Part IV, line /
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		torically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
_	Preservation of open space		
	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	
	day of the tax year		Held at the End of the Tax Year
-	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic stru	• •	2c
	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struc	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, i	handling of violations, and enforcing cor	nservation easements during the year
			
	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	ation easements during the year
	\$		
	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		└── Yes No
	In Part XIII, describe how the organization reports conservation	'	•
I	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes	the organization's accounting for
	conservation easements	Ant Historical Transcript	Nihan Cincilan Assats
Part			other Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under SFAS 116 (AS	,	,
	nistorical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
	f the organization elected, as permitted under SFAS 116 (AS	·	
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
((ii) Assets included in Form 990, Part X		> \$
2	f the organization received or held works of art, historical trea	asures, or other similar assets for financia	
1	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items	
a l	Revenue included on Form 990, Part VIII, line 1		> \$
.	Assets included in Form 990, Part X		▶ \$

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

		EANS & COME							40607	
Par	t III Organizations Maintaining C	collections of Ar	t, Hist	torical Tr	easures,	or Othe	er Simil	<u>ar Asse</u>	ts(continu	ied)
3	Using the organization's acquisition, access	on, and other records	s, check	k any of the	following tha	at are a si	ignıfıcant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d	اليا	Loan or exc	hange progr	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how th	ey further t	he organizati	ion's exei	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of	r receive donations o	f art, his	storical trea	sures, or oth	ier similar	assets	_	_	
	to be sold to raise funds rather than to be m								Yes	No_
Par	t IV Escrow and Custodial Arran	•	te if the	organizatio	n answered	"Yes" on	Form 996	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	•					_			
1a	Is the organization an agent, trustee, custod	ian or other intermedi	ary for	contribution	is or other as	ssets not	ıncluded	_	٦.	
	on Form 990, Part X?							L	_ Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing t	able [.]						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						<u>1d</u>			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on F								」 Yes	∐ No
$\overline{}$	If "Yes," explain the arrangement in Part XIII									<u> </u>
Par	t V Endowment Funds. Complete				T				T	
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance				<u> </u>					
b	Contributions								 	
С	Net investment earnings, gains, and losses								<u></u>	
d	Grants or scholarships				_					
е	Other expenditures for facilities									
	and programs					+				
f	Administrative expenses								 -	
g	End of year balance	LL			<u> </u>	1			L	
2	Provide the estimated percentage of the cur			g, column (a	a)) neid as					
а	Board designated or quasi-endowment		_%							
Ь	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages on lines 2a, 2b, and 2c sho		4 Ab -	م لماميا منت ک			h			
За	Are there endowment funds not in the posse	ession of the organiza	ition tha	it are neio a	no aoministe	erea for ti	ne organi.	Zation	ſ,	res No
	by								3a(ı)	140
	(i) unrelated organizations								3a(II)	
_	(ii) related organizations If "Yes" on line 3a(ii), are the related organizations	stions listed as require	nd on S	chadula P2					3b	_
	Describe in Part XIII the intended uses of the	•								
Par	t VI Land, Buildings, and Equipm		willelit	iuiius		<u> </u>				
	Complete if the organization answere		Part IV	/ line 11a S	See Form 990) Part X	line 10			
	Description of property	(a) Cost or ot			or other		ccumulate	ed	(d) Book	value
	pescription of property	basis (investm			(other)		oreciation		(4) 5000	. 3.00
	Land	320.0 (11.1001111	- ,		3,130.				3,373	,130.
	Land Buildings				$\frac{3,130.}{1,396.}$	٦ ۱	595,7	11.		,685.
b	Leasehold improvements				9,042.		159,0		J , J <u>L</u> J	0.
	Equipment				$\frac{3,042}{4,928}$		334,9			0.
	Other		<u> </u>		0,892.		940,8			0.
	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X. colun			<u> </u>		<u> </u>	9,998	
			, ,							

chedule D (Form 990) 2017 NEW ORLEANS & COMPA	chedule D (Form 990) 2017	NEW	ORLEANS	&	COMPAN
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Part VII Investments - Other Securities. Complete if the organization answered "Yes" of the organization and the organization and the organization and the organization of		/, line 11b See Form 990.	Part X. line 12.	<u> </u>
(a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)			<u> </u>	
(B)			· · · · · · · · · · · · · · · · · · ·	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total (Col (b) must equal Form 990, Part X, cot. (B) line 12)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	on Form 990, Part I			
(a) Description of investment	(b) Book value	(c) Method of v	aluation Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)			_ 	
(5)				
(6)	<u> </u>			
(7)	····			
(8)				
(9)				
Total (Col. (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990, Part IV	/, line 11d See Form 990,	Part X, line 15.	
(a) C	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)			_	
(6)				<u></u>
(7)				
(8)				
(9)			<u></u>	
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)			
Part X Other Liabilities.				
Complete if the organization answered "Yes" of	on Form 990, Part I		n 990, Part X, line 25	·
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) OTHER ACCRUED LIABILITIES		2,531,978.		
(3) PROMISE TO GIVE		627,000.		
(4) LONG TERM DEBT, NET OF DEB	3T			
(5) ISSUANCE COST		2,606.		
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)	3,161,584.		,

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

	LEANS & COMPANY		N Davienie neu F		0540607
\ <u></u>	per Audited Financial State		in Revenue per P	teturi	n.
	ered "Yes" on Form 990, Part IV, line	12a.		1 4	26 701
1 Total revenue, gains, and other support po				1_	36,791,
2 Amounts included on line 1 but not on For		ا ۔ ا	1 27/ 007		
a Net unrealized gains (losses) on investmen	nts	2a	1,374,997.	+	
b Donated services and use of facilities		2b		1	
c Recoveries of prior year grants		2c		1	
d Other (Describe in Part XIII)		2d	·	٦_	1 374
e Add lines 2a through 2d				2e 3	1,374, 35,416,
3 Subtract line 2e from line 1	line 10, but not on line 1.			3	, 33,410,
4 Amounts included on Form 990, Part VIII,	•	امدا			
a Investment expenses not included on For	m 990, Part VIII, line 7b	4a 4b		4	
b Other (Describe in Part XIII)c Add lines 4a and 4b		40		4.	
	ust aqual Form 000. Part I line 12)			4c 5	35,416,
Part XII Reconciliation of Expense	s per Audited Financial Stat	ements W	ith Expenses per		
			itii Expelises pei	Hett	4111.
	ered "Yes" on Form 990, Part IV, line	124		T	34,817,
1 Total expenses and losses per audited fin				1	34,01/,
2 Amounts included on line 1 but not on For	m 990, Part IX, line 25	6-			
a Donated services and use of facilities		2a		1	
b Prior year adjustments		2b		1	
c Other losses d Other (Describe in Part XIII)		2c		┧	
•		2d_		1 20	
e Add lines 2a through 2d				2e	34,817,
3 Subtract line 2e from line 1 4 Amounts included on Form 990 Part IX II	ne 25, but not on line 1			3	<u> </u>
4 Amounts included on Form 990, Part IX, li		ا ـم ا			
a Investment expenses not included on For	in 990, Fart VIII, line 70	4a		1	
b Other (Describe in Part XIII)		4b		1	
c Add lines 4a and 4b	must squal Form 000. Dark I have 40.5			4c	34,817,
5 Total expenses Add lines 3 and 4c. (This Part XIII Supplemental Information				1 3	J-FOTI
					
PART X, LINE 2:					
ACCOUNTING PRINCIPLES GE	NERALLY ACCEPTED I	N THE U	NITED STATE	S O	F AMERIĆ
PROVIDE ACCOUNTING AND D	ISCLOSURE GUIDANCE	ABOUT	POSITIONS T	AKE	N BY AN
ENTITY IN ITS TAX RETURN	S THAT MIGHT BE UN	CERTAIN	. THE BUREA	<u>U</u> B	ELIEVES
THAT IT HAS APPROPRIATE	SUPPORT FOR ANY TA	A POSIT	TONS TAKEN,	AN	ע
MANAGEMENT HAS DETERMINE	D THAT THERE ARE N	O UNCER	TAIN TAX PO	SIT	IONS THA
ARE MATERIAL TO THE FINA	NCIAL STATEMENTS.				
PENALTIES AND INTEREST A	SSESSED BY INCOME	TAXING	AUTHORITIES	;, I	F ANY,
WOULD BE INCLUDED IN INC	OME TAX EXPENSE.				
		•			
32054 10-09-17				Sche	dule D (Form 99
41105 955620 15500	20 2017 05000 NEW	ODT DAY	7 6 003403377		15500
41105 755639 15592	2017.05000 NEW	OKLEANS	& COMPANY		15592

Schedule D (Form 990) 2017	NEW ORLEANS & COMPANY	72-0540607 Page 5
Schedule D (Form 990) 2017 Part XIII Supplemental Inf	ormation (continued)	
	•	
 		
•		
-		
		

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2017
Open to Public

Inspection

Name of the organization

Employer identification number

NEW ORLEANS & C	OMPANY				72-054060)7
		ctivities Ou	tside the United States. Comple	ete if the organ		
Form 990, Part IV						
		n maintain recor	ds to substantiate the amount of its gra	ants and other	assistance,	
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or assi	stance?	Yes No
2 For grantmakers, Desc	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and of	ther assistance out	side the
United States		ŭ		. 5		
3 Activities per Region (T	he following Part	I, line 3 table ca	an be duplicated if additional space is i	needed)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region	(e) If activ	vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to	1	specific type	investments
		in the region	recipients located in the region)	of service	(s) in the region	in the region
		!		MARKET NEW	ORLEANS AS A	
				TOURIST DES	TINATION;	
				EXPENDITURE	S INCLUDE	
CANADA	, 1	1	PROGRAM SERVICES	FEES AND OF	ERATIONAL	156,656,
				MARKET NEW	ORLEANS AS A	
				TOURIST DES	TINATION;	
•				EXPENDITURE	S INCLUDE	
UNITED KINGDOM	1	1	PROGRAM SERVICES	FEES AND OF		213,496,
	Ì			MARKET NEW	ORLEANS AS A	
				TOURIST DES	•	
				EXPENDITURE	S INCLUDE	
FRANCE	1	11_	i	FEES AND OP		168,803,
					ORLEANS AS A	
				TOURIST DES	•	
	_	_		EXPENDITURE		
GERMANY	1	1	PROGRAM SERVICES	FEES AND OP		158,767.
					ORLEANS AS A	
				TOURIST DES	· · · · · · · · · · · · · · · · · · ·	
	_	_		EXPENDITURE		
BRAZIL	1	1		FEES AND OP		43,467,
			1		ORLEANS AS A	
				TOURIST DES	•	
ABA100	,	1	i	EXPENDITURE		15 300
MEXICO	†	1	!	FEES AND OP	ORLEANS AS A	15,300.
				TOURIST DES		
				EXPENDITURE	•	
JAPAN	1	1		FEES AND OP		1,438,
	-	-			ORLEANS AS A	1,450,
				TOURIST DES		
				EXPENDITURE	•	
CHINA	1	1		FEES AND OP		105,737.
3 a Sub-total	8					863,664,
b Total from continuation						
sheets to Part I	o	.0				0.
c Totals (add lines 3a				-		
and 3b)	8	8				863 664

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2017

732071 10-06-17

NEW ORLEANS & COMPANY Schedule F (Form 990) 2017 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed Part II

(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2017
(h) Description of noncash assistance						Sched
(g) Amount of noncash assistance					kempt	
(f) Manner of cash disbursement					recognized as tax-e)	
(e) Amount of cash grant					foreign country, ar	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	
(c) Region					is listed above that are ransel has provided a sect	
(b) IRS code section and EIN (if applicable)					recipient organization the grantee or cour other organizations o	
1 (a) Name of organization			Y		 2 Enter total number of recipient organizations listed a by the IRS, or for which the grantee or counsel has a 3 Enter total number of other organizations or entities 	

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Page 3

Schedule F (Form 990) 2017

Schedule F (Form 990) 2017 NEW ORLEANS & COMPANY
Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed

			r		1	1 6
(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2017
(g) Description of noncash assistance		-	-			Sched
(f) Amount of noncash assistance						
(e) Manner of cash disbursement					•	
(d) Amount of cash grant		:				
(c) Number of recipients						
(b) Region						
(a) Type of grant or assistance					,	

SCHEU	ule F (FOIII 990) 2017 NEW ORDERING & COMPANY	72 0340007	age 4
Part			
1	Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the		
	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign		
	Trust With a U.S. Owner (see Instruction's for Forms 3520 and 3520-A, don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To	, <u> </u>	
	Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund		_
	(see Instructions for Form 8621)	L Yes	X No
			•
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		T
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713, don't file with Form 990)	Yes	LX No

732074 10-06-17

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72-0540607 Schedule F (Form 990) 2017 NEW ORLEANS & COMPANY Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions PART I, LINE 3, COLUMN (E): REGION: CANADA (E) SPECIFIC TYPES OF SERVICES IN REGION: MARKET NEW ORLEANS AS A TOURIST DESTINATION: EXPENDITURES INCLUDE FEES AND OPERATIONAL EXPENSES. REGION: UNITED KINGDOM (E) SPECIFIC TYPES OF SERVICES IN REGION: MARKET NEW ORLEANS AS A TOURIST DESTINATION; EXPENDITURES INCLUDE FEES AND OPERATIONAL EXPENSES. REGION: FRANCE (E) SPECIFIC TYPES OF SERVICES IN REGION: MARKET NEW ORLEANS AS A TOURIST DESTINATION; EXPENDITURES INCLUDE FEES AND OPERATIONAL EXPENSES. REGION: GERMANY (E) SPECIFIC TYPES OF SERVICES IN REGION: MARKET NEW ORLEANS AS A TOURIST DESTINATION; EXPENDITURES INCLUDE FEES AND OPERATIONAL EXPENSES. REGION: BRAZIL (E) SPECIFIC TYPES OF SERVICES IN REGION: MARKET NEW ORLEANS AS A TOURIST DESTINATION; EXPENDITURES INCLUDE FEES AND OPERATIONAL EXPENSES. REGION: MEXICO

(E) SPECIFIC TYPES OF SERVICES IN REGION: MARKET NEW ORLEANS AS A TOURIST DESTINATION; EXPENDITURES INCLUDE FEES AND OPERATIONAL EXPENSES.

REGION: JAPAN

(E) SPECIFIC TYPES OF SERVICES IN REGION: MARKET NEW ORLEANS AS A

732075 10-06-17

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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

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

2017

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

NEW ORLEANS & COMPANY

Employer identification number

72-0540607

Questions Regarding Compensation No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence X Tax indemnification and gross-up payments Health or social club dues or initiation fees X Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or X reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, X trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Compensation committee X Written employment contract X Compensation survey or study Independent compensation consultant X Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b 4c X c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a b Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a 6b b Any related organization? If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

732111 10-17-17

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

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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VIII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(Q)·(i)(B)	in column (B) reported as deferred on prior Form 990
(1) J.STEPHEN PERRY	Ξ	434,074.	16,808.	24,000.	124,426.	8,554.	607,862.	0
	Ξ	0.	0	0	0	4	0	0
7	Ξ	149,354.	48,370.	24,000.	8,845.	6,535.	237,104.	0
VICE-PRESIDENT OF TOURISM	Ξ	0 0	• 0	0	0	, 0	0	0
	()	236,919.	64,746.	18,000.	9,185.	6,535.	335,385.	0
SENIOR VP OF CONVENTION SA	▣	0	0.	0	0	0.		0
(4) SALLEE PAVLOVICH	Ξ	110,013.	36,894.	24,000.	7,064.	6,535.	184,506.	0
DIRECTOR OF CORPORATE AND	▣	0.	0	0.	0	0	0	0
(5) ROBERT RESO	Ξ	113,57	28,916.	9,074.	6,737.	18,097.	176,403.	0
DIRECTOR OF NEW BUSINESS D	Ξ	0.	0.	0.	0	0	0.	.0
(6) CHERYL TEAMER	()	167,589.	42,527.	11,318.	9,431.	6,535.	237,400.	0
SENIOR VP PUBLIC APPAIRS	Ξ	0.	0.	0.	0.	0.	0	0
(7) KRISTIAN SONNIER	Θ	126,01	34,333.	18,000.	7,614.	6,535.	192,494.	0
VP COMM/PUBLIC RELATIONS	▣		0	0	0.	0.	0.	0
(8) DONNA GLOVER	Ξ	84,54	27,014.	24,000.	5,838.	11,114.	152,511.	0
DIRECTOR OF ASSOCIATION MEETING SALE (ii)	Ξ		0.	0	0	0	0	0
(9) BRIAN WALKER	Ξ	96,117.	26,688.	11,827.	5,913.	18,097.	158,642.	0
VP INFORMATION SYSTEMS	≘	0	0	0.	0	0.	0.	0
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Part III | Supplemental Information

PART I, LINE 3:

NOCVB

COMPENSATION COMMITTEE CHARTER

MEMBERSHIP:

ALL OF THE COMPENSATION COMMITTEE SHALL CONSIST OF ALL THREE DIRECTORS, AS WHOM HAVE BEEN DETERMINED BY THE BOARD OF DIRECTORS TO BE "INDEPENDENT"

DEFINED IN THE CHARTER OF THE COMPANY'S AUDIT COMMITTEE

PURPOSE:

THE COMPENSATION COMMITTEE ARE TO DISCHARGE THE THE PURPOSES OF

THE OF THE BOARD OF DIRECTORS RELATING TO COMPENSATION RESPONSIBILITIES OF

COMPANY'S CEO AND OTHER EXECUTIVES.

DUTIES AND RESPONSIBILITES:

THE COMPENSATION COMMITTEE IS DIRECTLY RESPONSIBLE FOR ESTABLISHING ANNUAL

THE AND LONG-TERM PERFORMANCE GOALS AND OBJECTIVES FOR THE CEO.

COMPENSATION COMMITTEE SHALL HAVE THE RESPONSIBILTY TO:

Page 3

10

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Part III Supplemental Information

1. REVIEW AND APPROVE CORPORATE GOALS AND OBJECTIVES RELEVANT TO CEO
COMPENSATION AND EVALUATE THE PERFORMANCE OF THE CEO.
2. REVIEW AND SET THE COMPENSATION OF THE CEO BASED UPON THE EVALUATION,
A. WHETHER THE CHIEF EXECUTIVE OFFICER IS APPROPRIATELY COMPENSATED.
B. WHETHER HIS COMPENSATION IS REASONABLY RELATED TO PERSONAL AND CORPORATE
PERFORMANCE.
C. WHETHER SEVERANCE AND POST EMPLOYMENT BENEFITS ARE PROPERLY RELATED TO
THE COMPANY'S INTERESTS AND REASONABLE IN AMOUNT.
иетнек тне
APPROPRIATE FOR ATTRACTING AND RETAINING A QUALITY EXECUTIVE FOR THE
COMPANY, AND MOTIVATING THE CHIEF EXECUTIVE OFFICER TO ACHIEVE THE
OBJECTIVES OF THE COMPANY.
4. THE COMPENSATION COMMITTEE MAY, IN ITS SOLE DISCRETION, PREPARE OR
OBTAIN COMPENSATION STUDIES OR SURVEYS OR EMPLOY A COMPENSATION CONSULTANT
TO ASSIST IN THE EVALUATION OF THE COMPENSATION OF THE COMPANY'S CHIEF
EXECUTIVE OFFICER. THE COMPENSATION COMMITTEE SHALL HAVE THE SOLE AUTHORITY
TO APPROVE THE FEES AND OTHER RETENTION TERMS WITH RESPECT TO SUCH A
COMPENSATION CONSULTANT. THE COMPENSATION COMMITTEE ALSO HAS THE AUTHORITY,

Part III Supplemental Information

Schedule J (Form 990) 2017

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

TO
ADVISORS
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APPROPRIATE,
AND
NECESSARY
AS

ASSIST IN ITS DUTIES TO THE COMPANY.

MEETINGS:

THE COMPENSATION COMMITTEE SHALL MEET AT LEAST TWICE EACH YEAR AND AT SUCH

OTHER TIMES AS IT DEEMS NECESSARY TO FULFILL ITS RESPONSIBILITES AND SHALL

MAKE PERIODIC REPORTS TO THE BOARD OF DIRECTORS, AS APPROPRIATE

PART I, LINE 4B:

2017 THE BUREAU OFFERED THE PRESIDENT DURING THE YEAR ENDED DECEMBER 31

THE PLAN PROVIDES FOR AND CEO A PARTICIPATION IN EXECUTIVE 457(F) PLAN. EMPLOYER CONTRIBUTIONS EQUAL TO PARTICIPANT'S GROSS ANNUAL BONUS RECEIVED.

2017 WAS \$111,400. CONTRIBUTION FOR THE YEAR ENDED DECEMBER 31,

SCHEDULE O

۹,

(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

NEW ORLEANS & COMPANY

Employer identification number 72-0540607

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
COMMUNITY.					
FORM 990, PART VI, SECTION A, LINE 4:					
AMEND ARTICLE III SECTION 3.1- NUMBER, QUALIFICATION, ELECTION, AND TERM					
LIMITS. THE BOARD OF DIRECTORS SHALL BE CHANGED FROM 20 DIRECTORS ELECTED					
TO 21 DIRECTORS ELECTED BY THE MEMBERS.					
ARTICLE II SECTION 3.1					
EFFECTIVE ON THE DATE OF THE DECEMBER 2017 ANNUAL MEETING OF MEMBERS, THE					
BOARD OF DIRECTORS SHALL BE COMPOSED OF 21 DIRECTORS ELECTED BY THE MEMBERS AND 8 EX OFFICIO DIRECTORS DESCRIBED IN SECTION 3.4.					
AND 8 EX OFFICIO DIRECTORS DESCRIBED IN SECTION 3.4.					
FORM 990, PART VI, SECTION A, LINE 6:					
1.1 ELIGIBILITY FOR ADMISSION. ANY NATURAL PERSON, TRUST, LIMITED LIABILITY					
COMPANY, PARTNERSHIP, CORPORATION OR OTHER JUDICIAL PERSON IS ELIGIBLE FOR					
ADMISSION AS A MEMBER OF THE ORGANIZATION.					
1.2 ADMISSION TO MEMBERSHIP. ADMISSION TO MEMBERSHIP SHALL BE BY					
APPLICATION IN ACCORDANCE WITH PROCEDURES FROM TIME TO TIME APPROVED BY THE					
BOARD OF DIRECTORS AND UPON PAYMENT OF DUES ASSESSED. THE EXECUTIVE					
COMMITTEE MAY DENY ADMISSION TO MEMBERSHIP TO ANY APPLICANT THAT THE					
COMMITTEE REASONABLY BELIEVES TO HAVE INTERESTS THAT, ON THE WHOLE, ARE NOT					
SUBSTANTIALLY ALIGNED WITH THE INTERESTS OF THE TOURISM, HOSPITALITY,					
SPECIAL EVENTS, SPORTS, ENTERTAINMENT, AND OTHER RELATED INDUSTRIES IN THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017) 732211 08-07-17					

PARISHES OF ORLEANS, JEFFERSON, ST. BERNARD, ST. CHARLES, ST. TAMMANY,
PLAQUEMINES OR ST. JOHN THE BAPTIST (THE "GREATER NEW ORLEANS AREA").

1.3 DUES AND ASSESSMENTS. THE MEMBERS SHALL BE DIVIDED INTO SUCH CLASSES

AND SERIES AS ARE SHOWN ON EXHIBIT A TO THESE BYLAWS. THE RIGHTS,

PRIVILEGES AND OBLIGATIONS OF MEMBERS SHALL BE IDENTICAL IN ALL RESPECTS

OTHER THAN (I) WITH RESPECT TO DUES AND ASSESSMENTS TO WHICH MEMBERS OF THE RESPECTIVE CLASSES AND SERIES ARE LIABLE AS SPECIFIED IN EXHIBIT A AND (II) WITH RESPECT TO THE MEMBERSHIP BENEFITS ACCORDED BASIC AND ADVANCE MEMBERS

(CLASSES I AND II, RESPECTIVELY). THE BOARD OF DIRECTORS SHALL FIX BY RESOLUTION THE AMOUNT, DUE DATES AND METHODS OF PAYMENT OF THE DUES AND THE ASSESSMENTS TO BE PAID BY THE MEMBERS TO THE ORGANIZATION.

1.4 AFFILIATES. A PERSON IS ELIGIBLE TO BE A MEMBER ONLY FOR SO LONG AS ALL A OTHER ENTITIES THAT ARE (I) OWNED, CONTROLLED OR MANAGED BY OR UNDER COMMON OWNERSHIP OR MANAGEMENT WITH THE MEMBER AND (II) ARE ENGAGED IN OPERATING ONE OR MORE RESTAURANTS, HOTELS OR OTHER HOSPITALITY COMPANIES IN THE GREATER NEW ORLEANS AREA ("AFFILIATES") ARE MEMBERS IN GOOD STANDING. FOR THESE PURPOSES, "CONTROL" MEANS THE ABILITY TO INFLUENCE MANAGEMENT IN THE DAY-TO-DAY OPERATION OF A BUSINESS. THIS PROVISION SHALL BE CONSTRUED TO ACCOMPLISH ITS PRINCIPAL PURPOSE OF ASSURING THAT ALL AFFILIATED PARTIES IN A POSITION TO BENEFIT FROM MEMBERSHIP SHOULD BE MEMBERS IN PROPORTION TO THAT POTENTIAL BENEFIT. ALL PERSONS THAT ARE PART OF A GROUP WHOSE MEMBERS SHARE OR APPEAR LIKELY TO SHARE MARKETING INFORMATION WITH ONE ANOTHER MUST BE MEMBERS IF ANYONE OF THEM IS A MEMBER. FOR EXAMPLE, HOTELS AND RESTAURANTS THAT ARE UNDER COMMON MANAGEMENT SHALL BE CONSIDERED TO BE PART OF SUCH A GROUP AND, THEREFORE, TO BE AFFILIATES; WHILE HOTELS OR RESTAURANTS OPERATED AS SEPARATE FRANCHISES UNDER THE SAME FLAG WOULD NOT.

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

1.5 DISCIPLINARY PROCEDURES. THE BOARD OF DIRECTORS SHALL AT ALL TIMES

MAINTAIN IN EFFECT A STATEMENT OF DISCIPLINARY PROCEDURES CONCERNING

STANDARDS AND PROCEDURES FOR IMPOSITION OF SANCTIONS, INCLUDING SUSPENSION

AND EXPULSION, BY THE EXECUTIVE COMMITTEE AGAINST MEMBERS FOR NONPAYMENT OF

DUES AND OTHER ACTS AND OMISSIONS THE BOARD IDENTIFIES IN THE STATEMENT OF

DISCIPLINARY PROCEDURES AS INIMICAL TO THE INTERESTS OF THE ORGANIZATION OR

THE INDUSTRY. UNLESS THE EXECUTIVE COMMITTEE EXPRESSLY PROVIDES OTHERWISE,

SUSPENSION OR EXPULSION OF A MEMBER SHALL AUTOMATICALLY EFFECT THE

SUSPENSION OR EXPULSION, AS THE CASE MAY BE, OF ALL THE MEMBER'S

AFFILIATES.

1.6 REINSTATEMENT. THE EXECUTIVE COMMITTEE, IN ITS DISCRETION, MAY RE-ADMIT AN EXPELLED MEMBER AT ANY TIME EXCEPT THAT AN EXPELLED MEMBER AND ITS

AFFILIATES SHALL BE INELIGIBLE FOR RE-ADMISSION FOR A TWO YEAR PERIOD

FOLLOWING EXPULSION IN THE FOLLOWING CIRCUMSTANCES: (I) A MEMBER THAT HAS

BEEN EXPELLED MORE THAN ONCE FOR NON-PAYMENT OF DUES OR ASSESSMENTS AND

(II) A MEMBER THAT HAS BEEN EXPELLED FOR ANY REASON OTHER THAN NON-PAYMENT

OF DUES. RE-ADMISSION SHALL BE BY APPLICATION ONLY AND SHALL BE GOVERNED BY

SECION 1.2.

FORM 990, PART VI, SECTION A, LINE 7A:

VOTING. EACH MEMBER IN GOOD STANDING IS ENTITLED TO ONE VOTE. THE MEMBERS

MUST VOTE BY A BALLOT. A MAJORITY OF THE VOTES CAST AT ANY MEETING AT WHICH

A QUORUM IS PRESENT SHALL SUFFICE TO CONSTITUTE THE APPROVAL OR OTHER

ACTION OF THE MEMBERS.

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

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990·EZ) (2017)	Page 2
Name of the organization NEW ORLEANS & COMPANY	Employer identification number 72-0540607
PROMOTIONAL FUND GRANT	150,000.
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	
,	
	<u> </u>

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Open to Public Inspection

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

2017

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OMB No 1545-0047

Employer identification number IEW ORLEANS CONVENTION Direct controlling VISITORS BUREAU 72-0540607 entity ε End-of-year assets 8,571,935. <u>e</u> o Total income Legal domicile (state or Identification of Disregarded Entitles. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 foreign country) LOUISIANA BUREAU'S OPERATING CENTER TO MANAGE THE PROPERTY AT Primary activity THE LOCATION OF THE NEW ORLEANS & COMPANY WELCOME CENTER BUILDING LLC - 52-2182916 Name, address, and EIN (if applicable) of disregarded entity 2020 ST. CHARLES AVENUE 70130 Name of the organization NEW ORLEANS LA Partl

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year Part II

(g) Section 512(b)(13) controlled entity?	Š			_		 		
Section	Yes						'	
(f) Direct controlling entity								
(e) Public charity status (if section	501(c)(3))							
(d) Exempt Code section				· . <u>-</u>				
(c) Legal domicile (state or foreign country)								
(b) Primary activity								
(a) Name, address, and EIN of related organization								

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

72-0540607 Page 2-3

Schedule R (Form 990) 2017 NEW ORLEANS & COMPANY

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

Page 3

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Κe	Yes No
1 During the tax year, did the organization engage in any of the following transactior	s with one or more re	transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?		_
a Receipt of (i) interest, (ii) annurties, (iii) royalties, or (iv) rent from a controlled entity	>			ta ,	
 Gift, grant, or capital contribution to related organization(s) 				1b	
c Giff, grant, or capital contribution from related organization(s)				10	
d Loans or loan guarantees to or for related organization(s)				Pt-	
e Loans or loan guarantees by related organization(s)				1e	-
Dividends from related organization(s)				+	
				ţ	
				20 4	1
n Purchase of assets from refated organization(s)				=	1
i Exchange of assets with related organization(s)				;=	
J. Lease of facilities, equipment, or other assets to related organization(s)				÷	
k Lease of facilities, equipment, or other assets from related organization(s)				+	
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			£	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			1h	
o Shanng of paid employees with related organization(s)				9	
p Heimbursement paid to related organization(s) for expenses				۵,	1
q Heimbursement paid by related organization(s) for expenses				D.	-
r Other transfer of cash or property to related organization(s)					
s Other transfer of cash or property from related organization(s)				18	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	nvolved	
1)					
6					
9)					
					1
				1	
(9					
32163 09-11-17	40		Schedule	Schedule R (Form 990) 2017	0) 2017

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Page 4

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

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

that was not a related organization. See instructions regarding exclusion for certain investment partnerships	structions regarding exciu	Sion for certain inve	estment partnersnips	-						
(a)	(Q)	(O)	(d)	Are all	E		Ξ	(E)	9	3
Name, address, and EIN of entity	Primary activity	흜튫	(related, unrelated, 5 seconds of 5 seconds	partners sec 501(c)(3) orgs ?	Share of total	Share of end-of-year	Unspropor- tonate allocations?	Usproport Code V-UBI General or Percentage Usuale amount in box 20 managing ownership allocations?	General o managing partner?	Percentage
		country)	sections 512-514) Y	Yes No	ıncome	assets	Yes No	(Form 1065)	Yes No	
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Chedule R (Form 990) 2017 NEW ORLEANS & COMPANY	72-0540607 Page 5
Part VII Supplemental Information.	
Provide additional information for responses to questions on Schedule R. See in	structions
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