

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Go to www.irs.gov/Form990EZ for instructions and the latest information

2023

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning January 01, 2023, and ending December 31, 2023

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

PARIS AMERICAN CLUB INC

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

1 MINETTA ST APT 2E

Room/suite

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

NEW YORK, NY 10012-1277

D Employer identification number

52-2306187

E Telephone number

(212) 888-5050

F Group Exemption Number

G Accounting Method: ☒ Cash ☐ Accrual Other (specify):I Website Parisamericanclub.orgH Check ☐ if the organization is not required to attach Schedule B (Form 990).J Tax-exempt status (check only one) - ☐ 501(c)(3) ☒ 501(c)(7) ☐ 4947(a)(1) or ☐ 527K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ

63,073

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I ☒

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	37,084
3	Membership dues and assessments	3	25,000
4	Investment income	4	989
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
6	Gaming and fundraising events:		
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less: direct expenses from gaming and fundraising events	6c	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
7a	Gross sales of inventory, less returns and allowances	7a	
b	Less: cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	
8	Other revenue (describe in Schedule O)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	63,073
10	Grants and similar amounts paid (list in Schedule O)	10	1,000
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	
15	Printing, publications, postage, and shipping	15	747
16	Other expenses (describe in Schedule O)	16	59,447
17	Total expenses. Add lines 10 through 16	17	61,194
18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	1,879
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	47,432
20	Other changes in net assets or fund balances (explain in Schedule O)	20	7,039
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	56,350

Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☒

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	46,949	22	55,148
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	483	24	1,202
25 Total assets	47,432	25	56,350
26 Total liabilities (describe in Schedule O)		26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	47,432	27	56,350

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☐

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 Periodic meetings of the Franco American Community of New York to continue the tradition of Benjamin Franklin. (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	61,194
29 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	61,194

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
John F Bennett President	10	0	0	0
Hilary J James Vice President	10	0	0	0
Francis Dubois Speaker Committee	10	0	0	0
Veronique Chamrolle Program Committee	10	0	0	0
Ludovic Dubrana Program Committee	10	0	0	0
Beth Harrison Secretary	10	0	0	0
Cathleen Mangan Treasurer	10	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.)Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	<input type="checkbox"/>	<input checked="" type="checkbox"/>
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	<input type="checkbox"/>	<input checked="" type="checkbox"/>
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	<input type="checkbox"/>	<input type="checkbox"/>
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	<input type="checkbox"/>	<input type="checkbox"/>
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	<input type="checkbox"/>	<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0		
b Did the organization file Form 1120-POL for this year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes," complete Schedule L, Part II, and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a 1,425	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: _____ section 4912: _____ section 4955: _____		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	<input type="checkbox"/>
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	<input type="checkbox"/>
41 List the states with which a copy of this return is filed:		
42a The organization's books are in care of: <u>John F Bennett</u> Telephone no <u>(212) 752-6700</u>		
Located at: <u>1 MINETTA ST APT 2E, NEW YORK, NY</u> ZIP + 4 <u>10012-1277</u>		
b 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)?	42b	<input checked="" type="checkbox"/>
If "Yes," enter the name of the foreign country: _____		
If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
c At any time during the calendar year, did the organization maintain an office outside the United States?	42c	<input checked="" type="checkbox"/>
If "Yes," enter the name of the foreign country: _____		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	<input type="checkbox"/>	
and enter the amount of tax-exempt interest received or accrued during the tax year	43	
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	<input checked="" type="checkbox"/>
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	<input checked="" type="checkbox"/>
c Did the organization receive any payments for indoor tanning services during the year?	44c	<input checked="" type="checkbox"/>
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	<input type="checkbox"/>
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	<input checked="" type="checkbox"/>
b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b	<input checked="" type="checkbox"/>

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the Organization

PARIS AMERICAN CLUB INC

Employer identification number

52-2306187

Part and Line Number: Part I - Line 10

Description	Amount
Jerome Lohez 9/11 Scholarship Foundation	\$1,000

Part and Line Number: Part I - Line 16

Description	Amount
Bank Fees	\$95
Paypal Fees	\$841
Memberships & Subscriptions	\$500
Room Rent	\$699
Music	\$800
Telephone	\$540
Supplies	\$154
Accounting	\$51
Administration	\$4,200
Advertising & Promotion	\$1,543
Program Expense	\$48,720
Other	\$285
Information & Technology	\$1,019

Part and Line Number: Part I - Line 20

Description	Amount
Increase in Market Value	\$7,039

Part and Line Number: Part II - Line 24

Description	BOY Amount	EOY Amount
Accounts Receivable	\$483	\$1,202

Part and Line Number: Part III - Primary Exempt Purpose

Periodic meetings of Franco American Community to continue the tradition of Benjamin Franklin

FINAN

Paris American Club P+L

Actual	December Plan	PY	Revenue	YTD		Var Plan	Var PL%	Var PY	Var PY %
				Actual	Plan				
250	500	#ERROR!	Initiation Fees	1,425	900	525	58	#ERROR!	#ERROR!
2,700	3,000	#ERROR!	Membership Dues Single	7,275	6,800	475	7	#ERROR!	#ERROR!
1,500	2,000	#ERROR!	Membership Dues Family	4,300	4,800	(500)	(10)	#ERROR!	#ERROR!
	300	#ERROR!	Membership Dues Jr	425	600	(175)	(29)	#ERROR!	#ERROR!
500	3,500	#ERROR!	Membership Dues Corp	1,500	0	1,500	#DIV/0!	#ERROR!	#ERROR!
4,575		#ERROR!	Membership Dues Sr	10,575	7,600	2,975	39	#ERROR!	#ERROR!
1,245		#ERROR!	Investments	7,936	0	7,936	#DIV/0!	#ERROR!	#ERROR!
(298)	(100)	#ERROR!	PayPal Fee	(841)	(800)	(41)	5	#ERROR!	#ERROR!
		#ERROR!	Other	(500)	0	(500)	#DIV/0!	#ERROR!	#ERROR!
10,472	9,200	#ERROR!	Subtotal (Fixed)	32,095	19,900	12,195	61	#ERROR!	#ERROR!
		#ERROR!	Lunches	0	0	0	#DIV/0!	#ERROR!	#ERROR!
	350	#ERROR!	Cocktails	783	3,950	(3,167)	(80)	#ERROR!	#ERROR!
4,537	3,000	#ERROR!	Dinners	24,588	24,000	588	2	#ERROR!	#ERROR!
1,907		#ERROR!	Events	11,714	10,500	1,214	12	#ERROR!	#ERROR!
		#ERROR!	Tours	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Other	0	0	0	#DIV/0!	#ERROR!	#ERROR!
6,444	3,350	#ERROR!	Subtotal (Variable)	37,084	38,450	(1,366)	(4)	#ERROR!	#ERROR!
16,916	12,550	#ERROR!	Total Revenue	69,179	58,350	10,829	19	#ERROR!	#ERROR!
		#ERROR!	Lunches	0	0	0	#DIV/0!	#ERROR!	#ERROR!
	350	#ERROR!	Cocktails	1,734	4,450	(2,716)	(61)	#ERROR!	#ERROR!
4,908	3,500	#ERROR!	Dinners	27,329	25,000	2,329	9	#ERROR!	#ERROR!
		#ERROR!	Events	22,874	10,500	12,374	118	#ERROR!	#ERROR!
		#ERROR!	Equipment Rental	579	0	579	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Wine & Spirits	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Room Rental	699	2,000	(1,301)	(65)	#ERROR!	#ERROR!
800	1,000	#ERROR!	Music	800	1,000	(200)	(20)	#ERROR!	#ERROR!
		#ERROR!	Tours	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Other	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Transportation	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Other	0	0	0	#DIV/0!	#ERROR!	#ERROR!
5,708	4,850	#ERROR!	Total Variable Expenses	54,014	42,950	11,064	26	#ERROR!	#ERROR!
		#ERROR!	Accounting	510	0	510	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Advertising	0	1,000	(1,000)	(100)	#ERROR!	#ERROR!
		#ERROR!	Bad Debt	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Capital Expenses	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Entertainment	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	HR & Recruiting	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Insurance	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Internet Connectivity	540	600	(60)	(10)	#ERROR!	#ERROR!
45	50	#ERROR!	IT	825	600	225	37	#ERROR!	#ERROR!
201	50	#ERROR!	Legal	0	0	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Marketing Email	336	360	(24)	(7)	#ERROR!	#ERROR!
28	50	#ERROR!	Marketing	1,207	600	607	101	#ERROR!	#ERROR!
	100	#ERROR!	Meals	(285)	1,200	(915)	(76)	#ERROR!	#ERROR!
		#ERROR!	Meetings	0	0	0	#DIV/0!	#ERROR!	#ERROR!
500	400	#ERROR!	Memberships & Subscript	500	400	100	25	#ERROR!	#ERROR!
45	50	#ERROR!	Phone	540	600	(60)	(10)	#ERROR!	#ERROR!

K- Report
0- Schedule
0- AG RES TO Remedia

Paris American Club P+L

Actual	December Plan	PY	Revenue	Actual	YTD Plan	PY	Var Plan	Var PL%	Var PY	Var PY %
545	50	#ERROR!	Postage	747	600	#ERROR!	147	25	#ERROR!	#ERROR!
		#ERROR!	Professional Fees	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
350	350	#ERROR!	Rent	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Administration	4,200	4,200	#ERROR!	0	0	#ERROR!	#ERROR!
		#ERROR!	Administration (Taxes)	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
	50	#ERROR!	Supplies	154	600	#ERROR!	(446)	(74)	#ERROR!	#ERROR!
		#ERROR!	Travel	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Other	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Other	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Other	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Scholarship	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
1,000		#ERROR!	Total Fixed Expenses	1,000	1,000	#ERROR!	0	0	#ERROR!	#ERROR!
2,714	1,180	#ERROR!		10,385	11,760	#ERROR!	(1,375)	(12)	#ERROR!	#ERROR!
8,422	6,030	#ERROR!	Total Expenses	64,399	54,710	#ERROR!	9,689	18	#ERROR!	#ERROR!
8,494	6,520	#ERROR!	EBITA	4,780	3,640	#ERROR!	1,140	31	#ERROR!	#ERROR!
		#ERROR!	Income Taxes	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Amortization	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
		#ERROR!	Exchange Gain (Loss)	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
8,494	6,520	5,710	PFO	4,780	3,640	#ERROR!	1,140	31	#ERROR!	#ERROR!
50.2	52.0	87.8	PFO %	6.9	6.2	#ERROR!				
		#ERROR!	Venmo Collections	0	0	#ERROR!	0	#DIV/0!	#ERROR!	#ERROR!
8,919	5,000	#ERROR!	Bank Collections	41,670	35,000	#ERROR!	6,670	19	#ERROR!	#ERROR!
6,752	5,000	#ERROR!	PayPal Collections	19,574	21,000	#ERROR!	(1,426)	(7)	#ERROR!	#ERROR!
1,245	0	#ERROR!	UBS	7,933	0	#ERROR!	7,933	#DIV/0!	#ERROR!	#ERROR!
16,916	10,000	#ERROR!	Total Collections	69,177	56,000	#ERROR!	13,177	24	#ERROR!	#ERROR!
		#ERROR!	Venmo Balance			#ERROR!				
15,680		#ERROR!	Bank Balance			#ERROR!				
1,202		#ERROR!	PayPal Balance			#ERROR!				
39,468		#ERROR!	UBS Balance			#ERROR!				
56,350	0	#ERROR!	Total			#ERROR!				
	2,500	0	PayPal Transfer to Bank	6,602	10,000	#ERROR!	(3,398)	(34)	#ERROR!	#ERROR!

12/23 56350
 47432
 Δ 8918
 (4039) UBS
 1879 P4L