2016

Department of the Treasury

990T debached

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.

Inte	rnal Revenue					JO and its institu	ictions is at W		/10/11/990.	1709		
A	For the 2	016 calen	dar year, or ta	x year begir	nning 10/	01	, 2016,	and endin	g 9/3	30	,	2017
В	Check if app	licable	С							D Employ	er identi	fication number
	Addres	s change	ArklaTex	Invest	ent and	Develop	ment Cor	or		72-	09774	439
	Name o	change	po box 3	7005		-		•		E Telepho	ne numb	per
	Initial r	eturn	Shrevepor	st, LA 7	1133					318	632	2022
	Final retu	ırn/terminated	<b>\</b>									
	<del>  </del>	ed return	l							G Gross r	eceints \$	\$ 1,047,549.
		ition pending	F Name and ad	dress of princip	al officer	<del></del>			H(a) is this a			
		tion penang							H(b) Are all If 'No,'			
ī	Tax-exem	nnt etatus	501(c)(3)	X 501(c) (	6 ) <b>∢</b> (I	nsert no )	4947(a)(1) or	1526	If 'No,'	attach a list	(see inst	tructions)
<u> </u>	Websit	<del></del>		N 301(c) (	6 ) 1	ilser( ilo )	14347(0)(1) (1	1850				
<del>"</del>				<del></del>	<del>                                     </del>	lau b	Λ [• •		H(c) Group			
ľ		rganization	X Corporation	Trust	Association	Other ►	<u></u>	ear of formation	on		tate of le	egal domicile LA
	3	Summar	<b>y</b>	-41			1					<del></del>
	1 ===	eny descri	be the organiz	ation's miss	sion or most	significant ac	INITIES ECO	nomic I	<u>Seve Tol</u>	<u>oment</u>	<u>of 10</u>	O parishes in
ģ	<u>N</u> M	La										<del>-</del>
<u> </u>											- <b></b> -	
5 2010 Governance	2		ox ► If the							F		
Ca o	2 Che 3 Nur	mber of w	oting members	of the gove	ornina body (	Part VI Ime	• • 1 1	OSEGGIGIG	HO MANYZ		net ass   <b>3</b>	
<b>□</b> •	4 Nur		dependent vot					15 <u>%</u> N 0	3 2018	ő	4	<u>33</u> 33
c)	5 Tot		of individuals						. a 2010	(S)	5	0
FED Activitie	6 Tot		of volunteers						EN, UT	그뜨!	6	
- to	7a Tot	al unrelati	ed business re	venue from	Part VIII, co	lumn (C), line	12	OGNE	sm, u i	CECHCIANO.	7a	-611,056.
8		unrelated	d business taxa	able income	from Form 9	990-T, line 34	Ļ				7b	-611,056.
製一									P	rior Year		Current Year
SCANNED PARTICIPATE	8 Cor	ntributions	and grants (F	art VIII, line	1h)		_	$\overline{}$				
5 5	<b>9</b> Pro	gram serv	vice revenue (F	art VIII, line	e 2g)		Ĺ	25	···	68,4	64.	88,603.
<b>⋽</b> ₹	10 Inv	estment ır	ncome (Part VI	II, column (	A), lines 3, 4	l, and 7d)					53.	365,876.
~ ~	11 Oth	er revenu	e (Part VIII, co	ılumn (A), lı	nes 5, 6d, 8	c, 9c, 10c, an	d 11e)			19,2	26.	-611,056.
	<b>12</b> Tot	al revenue	e – add li <u>n</u> es 8	3 through 11	(must equa	l Part VIII, co	ılumn (A), lır	ne 12)		87,9	43.	-156,577.
	<b>13</b> Gra	ints and s	ımılar amounts	paid (Part	IX, column (	A), lines 1-3)						
	<b>14</b> Ber	nefits paid	I to or for mem	ibers (Part I	X, column (/	4), line 4)				,		
	15 Sal	aries, oth	er compensation	on, employe	e benefits (F	Part IX, colum	nn (A), lines	<b>5</b> -10)				
868	<b>16a</b> Pro	fessional	fundraising fee	es (Part IX.	column (A).	line 11e)						<del></del> .
Ĕ	h Tot		sing expenses							,		
Expenses				-								, , , ,
_	17 Oth		ses (Part IX, co							144,5		9,628.
	1		es Add lines 1				), line 25)	•		144,5		9,628.
<del></del>	.+	venue less	expenses Su	btract line	18 from line	12		·	<b></b>	<u>-56, 6</u>		-166,205.
b 8	21	-1 -	(D-191 - 1							g of Curren		End of Year
t j	<b>=</b>		(Part X, line 16					•	3	,374,9		3,480,079.
\$ 5 2 2 3	2		s (Part X, line	· ·				•		<u>775, 6</u>	_	1,046,977.
ž			fund balances	s. Subtract I	ine 21 from	line 20			2	,599,3	07.	2,433,102.
P	art II	Signatur	re Block									
Und	ier penalties o	of perjury, Jac	clare that I have e	camined this ret	urn, including ac	companying sche	dules and staten	nents, and to t	he best of m	knowledge	and belie	ef, it is true, correct, and
corr		ation of prepa	arer (other man onle	ery's based ou	air information o	which preparer	mas any knowied	nge 				
			——————————————————————————————————————	1								
	gn	l.	of officer	1 h		,			Dat	e		
He	ere	<u>Jac</u>	k Skaggs/	1//					CE0			
			print name and titl	° V								
		Print/Type p	preparer's lame	$I \wedge$	Preparer's sig	nature		Date		Check 2	ا ا <sub>ا</sub> ا	PTIN
Pa	aid	George	E./McGov	<u>tern III</u>	George	E. McGov	ern III	<b>\</b>	i	self-employ	ed]	P00668378
Pr	eparer	Firm's name			Govern 1			フ				
	se Only	Firm's addr	ess 1300/	Grimmet		-				Fırm's EIN	<b>72-</b>	-1109362
					LA 71107	-6502				Phone no		222-7555
Ma	y the IRS	discuss th	nis return with				ructions) .				<u> </u>	X Yes No
_			Reduction Act					TEE	A0113L 11/1	6/16		Form <b>990</b> (2016)
		•	,		•							

2.4	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III					П
	<del></del>					
•	Economic Development of 10 parishes in NW La					
					-	
2	Did the organization undertake any significant program services during the year which were not listed on the prior					
	Form 990 or 990-EZ?			Yes	X	No
	If 'Yes,' describe these new services on Schedule O	_				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	ices		Yes	X	No
	If 'Yes,' describe these changes on Schedule O			د د المالد		
	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations and revenue, if any, for each program service reported.	to other	s, the to	otal e	xpens	ses,
4 a	(Code) (Expenses \$ including grants of \$) (Ref	venue	\$		_	)
	industrial and economic devl in nw la					
				. <b>_</b>		
				- <b>-</b> -		
4	(Code ) (Expenses \$ including grants of \$ ) (Re	venue	<u>\$</u>			
	(Code) (Expenses \$\frac{1}{2}	veriue	Ť——			—′
			<del></del>			
4 (	(Code) (Expenses \$ including grants of \$) (Re	venue	\$			)
40	d Other program services (Describe in Schedule O )					
	(Expenses \$ including grants of \$ ) (Revenue \$		_		)	_
4 6	e Total program service expenses ► 0.					
BAA	TEEA0102L 11/16/16			Form	990	(2016)

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
0	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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	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	11 b		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	11 c		_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	11 d	$\overline{}$	Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		X
	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		_X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X

	,		Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
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 17 If 'Yes,' complete Schedule I, Parts I and II	21		Х
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 <sup>9</sup> 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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	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
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		<b> </b>
25 a	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	L	<u> </u>
t	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		<u> </u>
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		Х
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)			,
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_X_
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		_X_
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	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		<u> </u>
36	<b>Section 501(c)(3) organizations.</b> 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		х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38		Х
BAA		Form	990 (	2016)

omisso (2016) Arkialex investment and Development Colp	12-09 7	1433	<u>-</u>		aye :
Statements Regarding Other IRS Filings and Tax Compliance					
Check if Schedule O contains a response or note to any line in this Part V		<u></u>			
1	ı	_		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<del> </del>	0			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<del></del>	0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reporta	able gamıng				
(gambling) winnings to prize winners?		•	1 c		
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					
b If at least one is reported on line 2a, did the organization file all required federal employment tax		0	2 b		
			20		
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruct	uoris)		3.	X	_
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		· F	3a	$\frac{\hat{x}}{x}$	
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q		F	3 Ь	-^-	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other autifinancial account in a foreign country (such as a bank account, securities account, or other financial	hority over, a cial account)?		4 a		Х
<b>b</b> If 'Yes,' enter the name of the foreign country. ▶					
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acco	unts (FBAR)				
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	ar? .	L	5 a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra	ansaction?		5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		. [	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and di	id the organization				-
solicit any contributions that were not tax deductible as charitable contributions?		. [	6a	. 1	_ X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions of	or gifts were				
not tax deductible?		L	6 b		
7 Organizations that may receive deductible contributions under section 170(c).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly services provided to the payor?	for goods and		7 a		
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	•	·	7 b	$\longrightarrow$	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re	onwed to file	ŀ	<del>-/5</del>	<del> </del>	
Form 8282?	equired to file	)	7 c	ļ	
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	ıl				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene	efit contract?		7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of		- 1	7 f		
g if the organization received a contribution of qualified intellectual property, did the organization file Form					
as required?		. [	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	anization file a	Γ			
Form 1098-C?		Ĺ	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	ne sponsoring	1			
organization have excess business holdings at any time during the year?	•	<b>L</b>	8		
9 Sponsoring organizations maintaining donor advised funds.					
a Did the sponsoring organization make any taxable distributions under section 4966?		٠ ١	9 a		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	•		9 b		-
10 Section 501(c)(7) organizations. Enter	1		Πæ.	1	
a Initiation fees and capital contributions included on Part VIII, line 12	<del></del>				
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<u> </u>		1.00	7.0	
11 Section 501(c)(12) organizations. Enter	1		1 184	1	
a Gross income from members or shareholders	<del> </del> -	[	2		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	j				200
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For			12a	85. W	-
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		- 1	120		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>			· . 64	<b>,.</b>
a is the organization licensed to issue qualified health plans in more than one state?		<u> </u> -	13a		
Note. See the instructions for additional information the organization must report on Schedule O	•	}	134		
				}	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b	s	- 1		Į	
c Enter the amount of reserves on hand . 13c				1	
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Scheen	dula O	1	14b		

Form 990 (2016) ArklaTex Investment and Development Corp Page 6 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year ... 33 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 . . 33 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х See Schedule O X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule O 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, See Sch O X stockholders, or persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Х X b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See Schedule O Х 13 Did the organization have a written whistleblower policy? 13 Х X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official See Schedule 0 15 a Х X b Other officers or key employees of the organization See Schedule 0 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19

the public during the tax year

Shreveport La 71006 318 222 7555

See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

George E McGovern 1300 Grimmett Drive

orm 990 (2016)	ArklaTex	Investment	and	Development	Corp

BAA

72-0977439

age 7

Form 990 (2016)

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

- 1 a 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

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

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

Check this box in heither the organization flor any relati	J si gui	1		(C)				, , , , , , , , , , , , , , , , , , , ,		
(A) Name and Title		Position (do not check n than one box, unless pe is both an officer and director/trustee)						(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Jack Skaggs	50_	Γ								
CEO	0	<u>  X</u>	$\vdash$	X		<u> </u>	-	0.	0.	0.
(2) J kelly Vice President	<u> 40</u> _	X		х				0.	0.	0.
(3) Walter Savage	00	]								
Director	0	<u> </u>						0.	0.	0.
(4) Bob Brown	0									
Director	0	X	Н			_	<u> </u>	0.	0.	0.
_(5) L Walker	0	١,,						0.	0.	_
Director (6)	0	X						0.	<u> </u>	0.
<u>_</u> ( <u>7</u> )							-		<u></u>	
		-								
(9)								,		
(10)		<del>                                     </del>								
(11)								-,,		<del>_</del>
(12)		ļ —							<u> </u>	
(13)										
(14)										<u></u>
<del></del>				_		—	_		<del></del>	

TEEA0107L 11/16/16

Form 990 (2016) ArklaTex Investment and Section A. Officers, Directors, Tro	l Devel	.opi	en Fn	t (	Cor	p es	and	1 Highest Con	72-097743	
(A) Name and title	Average hours per week	(do	not o	Pos check	sition more erson direct	e than is boti or/trus	one h an tee)	(D)  Reportable compensation from	(E)  Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)										
(16)										
(17)									<u> </u>	
(18)		<del>                                     </del>								
(19)		$\vdash$								
(20)		+								
(21)		$\vdash$								
(22)		-								
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Secti d Total (add lines 1b and 1c)	on A	!				<b>!</b>	<b>&gt;</b>	0. 0. 0.	0. 0. 0.	0.
2 Total number of individuals (including but not limited from the organization ▶ 0	to those I	ısted	abo	ve) v	vho	recei	ved	more than \$100,00	0 of reportable comp	
Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for such	tor, or tru	stee, ial	key	/ em	ploy	yee,	or h	nghest compensa	ted employee	Yes No
4 For any individual listed on line 1a, is the sum o the organization and related organizations greate such individual	f reportab er than \$1	le co 50,0	тре 00?	ensa If 'Y	tion ⁄es,	and com	oth ple	er compensation te Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	e comper s,' comple	satio	n fr	om a lule	any <i>J fo</i>	unre r suc	late h p	d organization or erson	ındıvıdual 	5 X
Section B. Independent Contractors  1 Complete this table for your five highest comper compensation from the organization Report comper	sated ind	epen	den	t cor	ntra	ctors	tha	t received more t	han \$100,000 of	,
(A) Name and business add		uie c	aicii	uai j	year	enun	ng v	Description	)	(C) Compensation
Total number of independent contractors (including language)     \$100,000 of compensation from the organization		ited to	o the	se l	istec	abo	ve)	who received more	than	
BAA		TEFAC	1081	11/1	6/16					Form <b>990</b> (2016

Parl	VII	Statement of Rev	/enue	<u> </u>	una pove	<u></u>				
		Check if Schedule O	contains a	respo	nse or note to	any li	ne in this Part VIII		<u> </u>	
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इ इ	1 a	Federated campaigns		1 a						
돌등	b	Membership dues		1 b				Ī		
8 E		Fundraising events.		1 c		_				
탈필		Related organizations		1 d		_		ļ		
S E	е	Government grants (contribution	ons)	1 e		_		1		
를 위	f	All other contributions, gifts, c	grants, and	ا ، ،				1		
들됨		similar amounts not included.  Noncash contributions included	L	1f		-				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f	1 111 111162 14-1	'' <del>-</del>		•				
		Total. Add lines Ta-11		T	Business Code	+			<del></del>	
Program Service Revenue	2 a	loan_serv				1	87,966.	87,966.		
P.		interest					637.	637.		
ice	С									
Se S	d								<u> </u>	
Ē	е			_						
8		All other program service	ce revenue	L						
ᆸ		Total. Add lines 2a-2f				1	88,603.			
	3	Investment income (incother similar amounts)	luding divi	dends	interest and	•	-1,808.	-1,808.		
		Income from investmen	it of tax-ex	empt	ond proceeds.	•	1,000.	1,000.		
		Royalties		·	•	•				
			(ı) Re	al	(II) Personal					
	6 a	Gross rents	504,	988.				Ì		
		Less rental expenses	1,116,			_				
		Rental income or (loss)	-611,	<u>056.</u>		_				
	d	Net rental income or (lo	(ı) Secui	utuan	(ii) Other		-611,056.		-611,056.	
	7 a	Gross amount from sales of assets other than inventory	455,		(II) Other	$\dashv$				
		-	455,	700.						
		Less cost or other basis and sales expenses	88.	082.	!	ŀ				
	С	Gain or (loss)	367,			┨				
	d	Net gain or (loss)				•	367,684.	367,684.		
<b>Q</b>	8a	Gross income from fund	draising ev	vents						
골		(not including \$	al an line i	1-2						
ě		of contributions reporte	a on line	10)			1			
<u> </u>		See Part IV, line 18 Less direct expenses		a h		$\dashv$	1			
Other Revenue	ı	Net income or (loss) from	om fundra	ısına e	L /ents	•		1		
J	i	Gross income from gan See Part IV, line 19		_					<del></del>	
	ı	Less direct expenses		b		$\dashv$				
	ı	Net income or (loss) from	om gaming	activi	ties	•				
			-			$\neg$				
		Gross sales of inventor and allowances		а						
		Less cost of goods sol		b						
	<u> </u>	Net income or (loss) fro		of inver			···-			
	11.	Miscellaneous Reven	ue		Business Code	+			· <del></del>	
	11a h			+		+				<del></del>
	"									
	4	All other revenue				+				
	_	Total. Add lines 11a-11	d	L		-				
	12	Total revenue. See inst	tructions			-	-156,577.	454,479.	-611,056.	0.

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 r				T
Do 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)		<del></del>	-	
	Management	ļ			
	Legal	<del></del>			
		<del></del>		·	<del></del>
	Accounting		<del></del>		
	Lobbying			_	
	Professional fundraising services. See Part IV, line 17		<u> </u>	·	
g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion				
13	Office expenses		. — — — — — — — — — — — — — — — — — — —		<del></del>
14	Information technology				<del></del>
15	Royalties				
			<del></del>		_ <del></del>
16	Occupancy	<del></del>			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
	Payments to affiliates				
21				<del></del>	
22	Depreciation, depletion, and amortization				
23 24	Insurance Other expenses Itemize expenses not	A. B. S.		<del></del>	The state of the s
24	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 O)		The state of the s		***
a	bad debt	8,991.	8,991.		
	misc	637.	637.		
c					
c		· · · · · · · · · · · · · · · · · · ·		<del></del>	<del></del>
•	All other expenses .		<del></del>		
	Total functional expenses. Add lines 1 through 24e	9,628.	9,628.	0.	0.
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	3,020.	3, 020.	<u> </u>	0.
	Check here ► ☐ if following	}	•		
	SOP 98-2 (ASC 958-720)	_ <u></u>			
BAA		TEEA0110L 11	/16/16		Form 990 (2016)

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	•	Check if Schedule O contains a response or note to	o any line in	this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			75,016.	1	358,564.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			593.	4	984.
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	officers, dire	ectors, Complete		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)( employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions) Complete	ontributina 1		6		
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		ŀ		8	
8	9	Prepaid expenses and deferred charges		ŀ	<del></del>	9	
	-	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	4,796,815.		J	
	h	Less: accumulated depreciation.	10b	1,715,494.	3,257,661.	10 c	3,081,321.
1	11	Investments — publicly traded securities.		1,713,434.	3,231,001.	11	3,001,321.
İ	12	Investments – other securities See Part IV, line 11		ŀ	40,035.	12	37,590.
	13	Investments – program-related See Part IV, line 11		ŀ	40,033.	13	31,030.
	14	Intangible assets		ŀ		14	
	15	Other assets See Part IV, line 11			1,620.	15	1,620.
	16	Total assets. Add lines 1 through 15 (must equal line	34)	Ì	3,374,925.	16	3,480,079.
$\dashv$	17	Accounts payable and accrued expenses			12,954.	17	35,387.
	18	Grants payable		ľ		18	
1	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Ø)	21	Escrow or custodial account liability Complete Part I	IV of Schedu	ıle D		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, directors d disqualifie	s, trustees, d persons.		22	
-	23	Secured mortgages and notes payable to unrelated th	hird parties		757,574.	23	1,008,652.
	24	Unsecured notes and loans payable to unrelated third	d parties			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to related aplete Part X	third parties, of Schedule D	5,090.	25	2,938.
	26	Total liabilities. Add lines 17 through 25			775,618.	26	1,046,977.
ces		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	ere ► X	and complete			
lan	27	Unrestricted net assets			2,599,307.	27	2,433,102.
Ba	28	Temporarily restricted net assets				28	
힏	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), chand complete lines 30 through 34.	heck here ►				
ţ	30	Capital stock or trust principal, or current funds				30	
8	31	Paid-in or capital surplus, or land, building, or equipn				31	
Å	32	Retained earnings, endowment, accumulated income	, or other fu	nds		32	
é	33	Total net assets or fund balances			2,599,307.	33	2,433,102.
	34	Total liabilities and net assets/fund balances			3,374,925.	34	3,480,079.
BA	Α						Form <b>990</b> (2016)

Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI  1 Total revenue (must equal Part VIII, column (A), line 12)  2 Total expenses (must equal Part IX, column (A), line 25)  3 Revenue less expenses Subtract line 2 from line 1  4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  5 Net unrealized gains (losses) on investments  6 Donated services and use of facilities  7 Investment expenses  8 Prior period adjustments  9 Other changes in net assets or fund balances (explain in Schedule O)  10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Financial Statements and Reporting	e <b>12</b>
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 2,433,10	_
Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	$\square$
Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  10  2,433,10	77.
Revenue less expenses Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).  5 Net unrealized gains (losses) on investments  6 Donated services and use of facilities  7 Investment expenses  8 Prior period adjustments  9 Other changes in net assets or fund balances (explain in Schedule O)  10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  10 2,433,10	
5 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 8 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 2,433,10	<del>7</del> 7.
7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 2,433,10	
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 2,433,10	
9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 2,433,10	
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  10 2,433,10	
column (B)) 10 2,433,10	0.
	<u> </u>
Check if Schedule O contains a response or note to any line in this Part XII	П
Yes	No
1 Accounting method used to prepare the Form 990. Cash X Accrual Other	
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both	3
Separate basis Consolidated basis Both consolidated and separate basis	1
b Were the organization's financial statements audited by an independent accountant?	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate	
basis, consolidated basis, or both	
X Separate basis Consolidated basis Both consolidated and separate basis	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  3a	Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	
BAA Form 990 (2)	016)

## SCHEDULE D (Form 990)`

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	ArklaTex Investment and De	velopment Corp	72-0977439		
3° - 3	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.				
	Complete if the organization ans	wered 'Yes' on Form 990, Part IV, II	ne 6.		
		(a) Donor advised funds			
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year	L	<u> </u>		
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in organization's exclusive legal control?	n donor advised funds Yes No		
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No				
	Conservation Easements.	<del></del>			
	Complete if the organization ans	wered 'Yes' on Form 990, Part IV, I	ne 7.		
1	Purpose(s) of conservation easements held b	y the organization (check all that apply)			
	Preservation of land for public use (e.g.,	· 🗀	on of a historically important land area		
	Protection of natural habitat	Preservation	on of a certified historic structure		
_	Preservation of open space				
2	Complete lines 2a through 2d if the organization last day of the tax year	held a qualified conservation contribution in the	form of a conservation easement on the		
	last day of the tan your		Held at the End of the Tax Year		
a	Total number of conservation easements		2 a		
ŀ	Total acreage restricted by conservation ease	ments	2 b		
(	: Number of conservation easements on a cert	fied historic structure included in (a)	2 c		
•	Number of conservation easements included	in (c) acquired after 8/17/06, and not on a hi	storic		
	structure listed in the National Register		2 d		
3	Number of conservation easements modified, tra tax year ►	nsferred, released, extinguished, or terminated l	by the organization during the		
4	Number of states where property subject to conse	<del></del>	<del></del>		
5	Does the organization have a written policy re				
6	and enforcement of the conservation easeme	••	Yes No		
6	Staff and volunteer hours devoted to monitoring,	inspecting, nanding of violations, and enforcing	conservation easements during the year		
7	Amount of expenses incurred in monitoring, inspi	ecting, handling of violations, and enforcing con	servation easements during the year		
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of	f section 170(h)(4)(B)(i) Yes No		
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and ex to the organization's financial statements th	pense statement, and balance sheet, and at describes the organization's accounting for		
Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.					
1 8	If the organization elected, as permitted unde art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its fina	eld for public exhibition, education, or research	evenue statement and balance sheet works of in furtherance of public service, provide,		
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items:	er SFAS 116 (ASC 958), to report in its rever for public exhibition, education, or research in fu	nue statement and balance sheet works of art, rtherance of public service, provide the		
	(i) Revenue included on Form 990, Part VIII,	line 1	<b>►</b> \$		
	(ii) Assets included in Form 990, Part X .		►\$		
2	If the organization received or held works of art, amounts required to be reported under SFAS		nancial gain, provide the following		
ä	a Revenue included on Form 990, Part VIII, line		<b>*</b> \$		
t	Assets included in Form 990, Part X		. ►\$		

Schedule D (Form 990) 2016 Arki				72-097		Page 2	
Organizations Mainta	uning Collec	tions of Art, Histo	orical Treasures, o	r Otner Similar Ass	iets (contii	nuea)	
3 Using the organization's acquisition items (check all that apply)	n, accession, and			re a significant use of its	collection		
<b>└─</b>							
	b Scholarly research e Other						
c Preservation for future general Provide a description of the organization		os and avalous how the	u further the ergenization	o overest surpass in			
Part XIII		·	,				
5 During the year, did the organiza to be sold to raise funds rather t	ation solicit or re han to be maint	eceive donations of a cained as part of the o	rt, historical treasures, c organization's collection	or other similar assets	Yes	No	
Escrow and Custodia line 9, or reported an	i Arrangeme	nts. Complete if	the organization an		rm 990, P	art IV,	
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian	or other intermediary	for contributions or oth	er assets not included	Yes	No	
<b>b</b> If 'Yes,' explain the arrangement	t in Part XIII and	d complete the follow	ıng table				
_ , ,		, ,			Amount		
c Beginning balance				1 c	<del> </del>		
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1 f			
2 a Did the organization include an a					Yes	☐ No	
<b>b</b> If 'Yes,' explain the arrangement	t in Part XIII Ch	eck here if the expla	nation has been provide	ed on Part XIII			
Fig. 5. days at Freedom C	S			000 D 1 1 1 1 1			
Endowment Funds. C							
1 a Beginning of year balance.	(a) Current ye	ar (b) Prior yea	r (c) Two years back	k (d) Three years back	(e) Four ye	ears back	
<b>b</b> Contributions				_	+		
					+		
c Net investment earnings, gains, and losses							
<b>d</b> Grants or scholarships							
<ul> <li>Other expenditures for facilities and programs</li> </ul>							
f Administrative expenses							
<b>g</b> End of year balance				v- ····	1		
2 Provide the estimated percentag	e of the current	year end balance (lii	ne 1g, column (a)) held	as	_l		
a Board designated or quasi-endowm	nent ►	%					
<b>b</b> Permanent endowment ▶	%						
c Temporarily restricted endowmen	nt ►	%					
The percentages on lines 2a, 2b, a	nd 2c should equ	al 100%					
3 a Are there endowment funds not in to organization by	the possession of	f the organization that	are held and administered	for the	Yes	i No	
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)	_	
<b>b</b> If 'Yes' on line 3a(ii), are the rela	ated organizatio	ns listed as required	on Schedule R?		3b		
4 Describe in Part XIII the intended	d uses of the or	ganization's endowm	ent funds.		<u> </u>		
Part VI Land, Buildings, and	Equipment.						
Complete if the organ	ization answ	ered 'Yes' on For	m 990, Part IV, line	e 11a. See Form 99	0, Part X,	line 10.	
Description of property	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1 a Land			356,861.		35	6,861.	
<b>b</b> Buildings			4,439,954.	1,715,494.		4,460.	
c Leasehold improvements							
<b>d</b> Equipment							
e Other				-			
Total. Add lines 1a through 1e (Colum	nn (d) must equ	al Form 990, Part X,	column (B), line 10c )	<b>•</b>		1,321.	
BAA				Sched	ule D (Form 9	90) 2016	

Schedule D (Form 990) 2016 ArklaTex Investments — Other Securities.		N/A	72-0977439 Page
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	Cost or end-of-year market value
(1) Financial derivatives (2) Closely-held equity interests	<u> </u>	<del></del> _	
(3) Other	ļ		
(A)			
(B)	<u> </u>		
(C)			<del></del>
(D)			<del></del>
(E)			
 (F)			
(G)			
(H)			
<u>(I)</u>			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)	Ĺ		
Investments — Program Related. Complete if the organization answered	l 'Yes' on Form 990	N/A Part IV line 11c Sec	e Form 990. Part X June 1
(a) Description of investment	(b) Book value		cost or end-of-year market value
(1)	<u> </u>	<u> </u>	
(2)			
(3)			
(4)			
(5)			
(6)		<u> </u>	
(7)			
(8)			<del></del>
(9)			
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13)			
		·	<u>-</u>
Complete if the organization answered		), Part IV, line 11d. See	e Form 990, Part X, line 1
	scription		(b) Book value
(1) (2)	<del>-</del>		
(3)	<del></del>		
(4)		····	
(5)			
(6)			
(9)	<del></del>		
(8)			
(10)	<del></del>		
Total. (Column (b) must equal Form 990, Part X, column (	B) line 15.)		<b>•</b>
PartX: Other Liabilities.	27 11110 10 7		<del>,</del>
Complete if the organization answered 'Yes' on F	Form 990, Part IV, line 1	le or 11f. See Form 990, Par	t X, line 25
(a) Description of liability	(b) Book value	<b>一点对话"小人</b> 你们	
(1) Federal income taxes	1 50		
(2) accr int (3) vac fund	1,50 1,43		
(4)	1,43		
(5)	<del>-  </del>	一种的情况的	The same of the same of the same of
(6)			
(7)			
(8)			
(9)			
(10)		$\rightarrow$	
(11)	<b>▶</b> 2,93	•	
LATAL CONTINUES ON ANIMAL ANIMAL FORMS DOOD DOOL W 1 ZNL 1 - AP-L	- , Jul	A I	
			organization's liability for uncertain
Total (Column (b) must equal Form 990, Part X, column (B) line 25)  2. Liability for uncertain tax positions. In Part XIII, provide the text of the fotax positions under FIN 48 (ASC 740) Check here if the text of the footnote	ootnote to the organization's fil	nancial statements that reports the o	organization's liability for uncertain

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. N/A  Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total revenue, gains, and other support per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part VIII, line 12  a Net unrealized gains (losses) on investments  b Donated services and use of facilities  c Recoveries of prior year grants  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.  a investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII.)  c Add lines 4a and 4b  5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A  Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25  a Donated services and use of facilities  b Prior year adjustments  c Other losses d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII.)  c Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII.)  c Add lines 4a and 4b  5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	Schedule <b>D</b> (Form 990) 2016 ArklaTex Investment and Develo	pment Corp	72-0977439	Page 4
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  2 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b	Reconciliation of Revenue per Audited Financial Stat	ements With Reven	ue per Return. N/A	
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a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII )  c Add lines 4a and 4b  4a  4b	3 Subtract line 2e from line 1		3	
b Other (Describe in Part XIII ) c Add lines 4a and 4b 4c	4 Amounts included on Form 990, Part IX, line 25, but not on line 1			
c Add lines 4a and 4b	·			
	·	4 b		
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		10.		
Part XIII Supplemental Information.		ne 18)	5	

Parce Supplemental Information.

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

BAA

## **SCHEDULE O** (Form 990 or 990-EZ)

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is

at www.irs.gov/form990.

Employer identification number

OMB No 1545-0047

2016

72-0977439

Department of the Treasury Internal Revenue Service Name of the organization

ArklaTex Investment and Development Corp

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

represent the ten parishes in nw la

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

at board meetings

Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders

at board meetings

Form 990, Part VI, Line 11b - Form 990 Review Process

signed by ceo and then approved by board..if any questions return would be amended

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

ceo monitors

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

board approves

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

board reviews

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.