true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here Skaggs CEO Type or print name and title Print/Type preparer's name Preparer's signature Date X if Check Paid George E McGovern III George E McGovern III 12/27/18 P00668378 Preparer George E Mcgovern 72-1109362 Firm's EIN ▶ **Use Only** 1300 Grimmett Dr Shreveport, LA 71107-6502 318-222-7555 Phone no X Yes No

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2017)

			restment and Development /	2-0511455	Page Z
P		_	m Service Accomplishments		v
			contains a response or note to any line in t	this Part III	X
1		the organization's mi			
•	economic o	devl of ar	Klatex		
2	Did the organizat	tion undertake any s	ignificant program services during the year which we	ere not listed on the	
	prior Form 990 o	r 990-EZ?			X Yes No
	If "Yes," describe	e these new services	s on Schedule O.		
3	Did the organizat	tion cease conductin	ng, or make significant changes in how it conducts, a	ny program	
	services?				Yes X No
	if "Yes." describe	these changes on	Schedule O		
4			service accomplishments for each of its three larges	st program services, as measured by	
•	-	· -	(c)(4) organizations are required to report the amount		
	•		ny, for each program service reported	into the grante and anocations to others,	
	the total expense	ss, and revenue, ii a	ny, for each program service reported		
	/O1-	\/F	- al-disc season of C	\ /D	
	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
٤	servicing	spa and o	ther financing vehicles		
4b	(Code.	) (Expenses \$	including grants of \$	) (Revenue \$	)
	`	,,		, ,	,
	· · · · · · · · · · · · · · · · · · ·	\ <u></u>		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>
4¢	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other program se	ervices (Describe in	Schedule O )		
	(Expenses \$		including grants of \$	) (Revenue \$_	1
Δo	Total program se	NICE EXPENSES	moleculary grants or \$\psi\$	) (1.46461100 W	
76	rotar program se	Aire exhelises			

## Form'990 (2017) ArklaTex Investment and Development 72-0977439

 $O_{Page 3}$ 

Part IV · Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		<u> X</u>
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 98-197 If "Yes," complete Schedule C,			7.
	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			3,5
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
_	complete Schedule D, Part III	8	-	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	_		x
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40	,	x
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
1	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.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		· [	
а	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1.0		
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
Ū	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	The state of the s			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
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	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	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	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	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		X
5	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
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			v
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	<u>X</u>
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-		v
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		x
0	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Λ
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		x
	If "Yes," complete Schedule G, Part III	13		

Part IV . Checklist of Required Schedules (continued)

			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 1? If "Yes," complete Schedule I, Parts I and II	21		<u>_x</u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1		
	Part IX, column (A), line 2 <sup>o</sup> If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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		<u> </u>
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	ĺ		
		24a		<u> </u>
b		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	· · · · ·	24c		
d	· · · · · · · · · · · · · · · · · · ·	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
		25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
••		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		ŀ	v
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
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		ĺ	
	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,			<del>,,,,</del>
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions).		2	,
а		28a	1	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
•		28ь		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	·	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
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		<u>X</u>
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		<u>X</u>
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		<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 Part V, line 1	34		<u>x</u>
35a	• • • • • • • • • • • • • • • • • • • •	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		
2.7	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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,	<u>,                                    </u>	Į	v
20	Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		<u>X</u>
38	19? Note. All Form 990 filers are required to complete Schedule O	38		x
	19 HAME WILL AND HELD BLD LEMANCE TO COMPLETE OFFICIALS OF	JO		

Form 990 (2017) ArklaTex Investment and Development 72-0977439

P:	art 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		r	
	1. 1.		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1a 0	4.,	1	
b		-}	1	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		<b>.</b>	
_	reportable gaming (gambling) winnings to prize winners?	1c	X	<del> </del>
2a		1 4	14,	Î.
		-	1	1
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<del> </del>
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<del> </del>
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		<del> </del>
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	4-		x
<b>L</b>	account)?	4a		<del>  ^</del>
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 Accounts			
	(FBAR)		,	16
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	, ,	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<del>                                     </del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		<del>                                     </del>
va	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	- Ua		<del></del>
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	33	, , , , , , , , , , , , , , , , , , ,	<del>                                     </del>
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			10
	and services provided to the payor?	7a	°	
ь	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		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			ļ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		1 , ,	7
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		ļ. <u>.</u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter		12	1
а	Initiation fees and capital contributions included on Part VIII, line 12	4.31		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1 4		1
11	Section 501(c)(12) organizations. Enter:	1 1	357	13
a	Gross income from members or shareholders	- 1		
b	Gross income from other sources (Do not net amounts due or paid to other sources	37,5	44	1
	against amounts due or received from them )	- 1		111
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		┡
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-[[]	1.	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ
L	Note. See the instructions for additional information the organization must report on Schedule O			1
þ	Enter the amount of reserves the organization is required to maintain by the states in which		14	ļ ,
_	the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13b	+	ĺ	ľ
C 1/12		445	·	v
14a	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14a 14b		X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	1 170		L

Form'990 (2017) ArklaTex Investment and Development 72-0977439 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 X Section A. Governing Body and Management Yes No 15 1a Enter the number of voting members of the governing body at the end of the tax year 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. 15 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision 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 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? X Each committee with authority to act on behalf of the governing body? 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b X 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? 16a 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? Section C. Disclosure None 17 List the states with which a copy of this Form 990 is required to be filed ▶ 18 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 Own website Another's website 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 19 financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records > 20 J Skaggs po box 37005

LA 71133

Shreveport

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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

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

(A)  Name and Title  Average hours per week (list any				Pos check ess pe	c) ition more rson i irecto	than o s both r/trust	one an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	hours for related organizations below dotted tine)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(**-211033-10105)	organization and related organizations	
(1)J Scarborough	2.00										
Vice President	0.00	X						0	0	0	
(2)L Walker											
	0.00	ŀ									
Director	0.00	X						0	0	0	
(3) J Skaggs						1					
	5.00	}		l					_	_	
CEO	0.00	<u> </u>	<u> </u>	X		_	_	0	0	0	
(4)											
(5)											
(6)	<u> </u>										
(7)											
(8)		-									
(9)											
(10)											
(11)											
						l	l				

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Form 990 (2017) ArklaTex Investment and Development 72-0977439

Part V	Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	ind Highest Compensated	Employees (continued)			
	、(A) Name and title	(B) Average hours per week (list any hours for	ofi	x, unl ficer a	Pos check ess pe nd a c	erson i irecto	than o	an ee)	(D) Reportable compensation from the organization	(E)  Reportable  compensation from  related  organizations  (W-2/1099-MISC)	(F) Estimated amount of other compensation from the		
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations		
		_											
								_					
	-total	<u> </u>				<u> </u>		<b>&gt;</b>					
	al from continuation shee al (add lines 1b and 1c)	ets to Part VII, S	Secti	ion /	A			<b>&gt;</b>					
2 Tota					thos	e lıs	ted a	bov	e) who received more than	\$100,000 of			
emp	loyee on line 1a? If "Yes,"	complete Sched	dule	J for	suc	h inc	lividu	ıal	oyee, or highest compensa		Yes No		
orga <i>indi</i> v	anization and related organ vidual	nizations greater	than	\$15	50,00	1 °00	f "Ye	s," c	on and other compensation complete Schedule J for su	ch	4 X		
	any person listed on line 1 services rendered to the or								ny unrelated organization or for such person	individual	5 X		
	. Independent Contracton plete this table for your five		ensa	ited i	nder	end	lent o	onti	ractors that received more	than \$100,000 of			
com	pensation from the organization	zation Report co (A) business address	omp	ensa	tion	for ti	he ca	lend	dar year ending with or with	in the organization's tax ye (B) tion of services	ear (C) Compensation		
	Name and	business address		<del></del>					Descrip	tion of services	Compensation		
_		<del></del>											
								<u> </u>					
2 Tota	Il number of independent o	contractors (inclusion compensation	ıdıng ı fror	but n the	not	lımıte anız	ed to	tho:	se listed above) who	0	1,71/1/		

See Part IV. line 19 **b** Less direct expenses c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances b b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Busn Code** -37,590 -37,590 11a loss from bidco b All other revenue

-37,590/

77,471

394,698

474,079

Total. Add lines 11a-11d

Total revenue. See instructions

Part IX · Statement of Functional Expenses

	· Check if Schedule O contains a resp		this Part IX	<u>.                                    </u>	X
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations			1 13 13 14	,
	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			100 100 100	
	individuals See Part IV, lines 15 and 16				<u> </u>
4	Benefits paid to or for members		-		and and an
5	Compensation of current officers, directors,				
_	trustees, and key employees			· · · · · · · · · · · · · · · · · · ·	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)			·	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits	· · · · · · · · · · · · · · · · · · ·			
10	Payroll taxes				
11 a	Fees for services (non-employees)  Management				
a b				·	
c	Accounting			<del></del>	
d				·	
e	0 ( ) 1 ( ) 0 0 0 11 ( ) 40			· · · · · · · · · · · · · · · · · · ·	
f	•			and the continuous	***
	Other (If line 11g amount exceeds 10% of line 25, column				
3	(A) amount, list line 11g expenses on Schedule O)	714,643			
12	Advertising and promotion				
13	Office expenses				· · · · · · · · · · · · · · · · · · ·
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		,		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance			,	
24	Other expenses Itemize expenses not covered		(1) 13 4		
	above (List miscellaneous expenses in line 24e If			1 1 1 1 1 1 1 1 1	
	line 24e amount exceeds 10% of line 25, column	21/2/11/2		1 2 1 1 1 1	
	(A) amount, list line 24e expenses on Schedule O)		e miliani kaning hila i i i e u	Santan Salaman Santan San	manimum militar and a second
a				-	
b					
C					·
d	A11 - 11				
e	All other expenses	714 643			
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	714,643	0	0	0
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 358,564 521,509 1 Cash-non-interest bearing Savings and temporary cash investments 2 3 Pledges and grants receivable, net 984 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete 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 instructions) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 Inventories for sale or use 8 19,190 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 4,687,344 other basis Complete Part VI of Schedule D 10a 3,081,321 771,370 b Less: accumulated depreciation 10b 2,915,974 11 11 Investments—publicly traded securities Investments-other securities See Part IV, line 11 12 12 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 39,210 15 Other assets See Part IV, line 11 15 3,480,079 3,458,293 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 35,387 36,276 17 Accounts payable and accrued expenses 17 Grants payable 18 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 1,011,590 1,229,479 of Schedule D 046,977 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 2,433,102 2,192,538 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here 10 complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 2,433,102 2,192,538 33 Total net assets or fund balances 33 3,480,079 3,458,293 Total liabilities and net assets/fund balances

orm	1990 (2017) ArklaTex Investment and Development 72-09/7439			Pag	ge 12
Pa	rt XI · Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI	<del>-,,</del>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		74,	
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>643</u>
3	Revenue less expenses Subtract line 2 from line 1	3	-24	<u>40,</u>	<u> 564</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,4	33,	102
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	2,1	92,	538
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		F. 4		٠.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				ľ
	Schedule O			1	100
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		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:				
	Separate basis Consolidated basis Both consolidated and separate basis		3.	23	1 19
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		7	11	1
	separate basis, consolidated basis, or both				10%
	Separate basis Consolidated basis Both consolidated and separate basis		1.7		^
С	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?		2c		<u></u>
	If the organization changed either its oversight process or selection process during the tax year, explain in				3 5
	Schedule O			:	ľ
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		
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	_	3b		
			For	m 990	(2017)

## 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
2017
Open to Public

Inspection

Name of the organization Employer identification number ArklaTex Investment and Development 72-0977439 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X

Schédule D (Form 990) 2017 ArklaTe					Page 2
Part III · Organizations Maintain					ts (continued)
3 Using the organization's acquisition, acceleration items (check all that apply)	ession, and other records,	check any of the fo	llowing that are a	significant use of its	
a Public exhibition	d 🗌 Lo	an or exchange pro	ograms		
b Scholarly research		her			
c Preservation for future generations					
4 Provide a description of the organization'	s collections and explain h	ow they further the	organization's ex	cempt purpose in Part	
XIII					
5 During the year, did the organization solid				ılar	
assets to be sold to raise funds rather tha		t of the organization	n's collection?		Yes No
Part IV Escrow and Custodial		Fa 000 Da			t an Farm
Complete if the organizat 990, Part X, line 21.				· · · · · · · · · · · · · · · · · · ·	
1a Is the organization an agent, trustee, cus	todian or other intermediar	y for contributions	or other assets n	ot	п., п.,
included on Form 990, Part X?	Mill and an arelaka da Salla				Yes No
<b>b</b> If "Yes," explain the arrangement in Part	XIII and complete the follo	wing table			Amount
e. Reginning balance				1c	Amount
<ul> <li>c Beginning balance</li> <li>d Additions during the year</li> </ul>				1d	
e Distributions during the year				1e	
f Ending balance				1f	
2a Did the organization include an amount o	n Form 990. Part X. line 2	1. for escrow or cus	stodial account lia		Yes No
<b>b</b> If "Yes," explain the arrangement in Part				=	
Part V Endowment Funds.	<u> </u>		·		
Complete if the organizat	ion answered "Yes" o	n Form 990, Pa	art IV, line 10		
	(a) Current year	(b) Prior year	(c) Two years b	ack (d) Three years back	(e) Four years back
1a Beginning of year balance					
<b>b</b> Contributions			ļ		
c Net investment earnings, gains, and					
losses			ļ		
d Grants or scholarships			ļ		
e Other expenditures for facilities and					
programs			1		
f Administrative expenses					<del>-</del>
g End of year balance	urrent year and balance (	line 1a column (a)	hold as	<u></u>	
<ul><li>2 Provide the estimated percentage of the</li><li>a Board designated or quasi-endowment</li></ul>		inte 19, column (a)	neid as		
	%				
c Temporarily restricted endowment	%				
The percentages on lines 2a, 2b, and 2c					
3a Are there endowment funds not in the po-		on that are held and	l administered for	r the	
organization by	•				Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If "Yes" on line 3a(ii), are the related orga	nizations listed as required	d on Schedule R?			3b
4 Describe in Part XIII the intended uses of		ment funds			
Part VIC Land, Buildings, and E					
Complete if the organizat					
Description of property	(a) Cost or other basi	1		(c) Accumulated	(d) Book value
<del></del>	(investment)	(oth	ier)	depreciation	
1a Land	4 607 1	244		1 771 370	0.015.054
b Buildings	4,687,3	744	<del></del>	1,771,370	2,915,974
c Leasehold improvements					<del></del>
d Equipment					
e Other  Total. Add lines 1a through 1e (Column (d) mu	st equal Form 990. Part X	. column (B). line 1			2,915,974

Schedule D (Form 990) 2017	ArklaTex	Investment	and	Development	72-097743	9
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	Complete if the organization answered "Yes"				
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-ye		
(1) Financial					
• •	eld equity interests		· · · · · · · · · · · · · · · · · · ·		
(3) Other			7	<u></u>	
(A)				·	
(B)				<del></del>	
(C)				<del></del>	
(D)			<del>.</del>		
(E)				· · · · · · · · · · · · · · · · · · ·	
(F)		-		···	
(F)				-	
(H)					
	n (b) must equal Form 990, Part X, col (B) line 12 ) ▶		1951 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del></del>	
Part VIII	Investments—Program Related.		<u> </u>		
è ette a un	Complete if the organization answered "Yes"	on Form 990 Part IV line	e 11c See Form 990 F	Part Y line 13	
	(a) Description of investment	(b) Book value	(c) Method o		
	(b) bescription of investment	(b) book value	1	of-year market value	
(1)					
(2)					
(3)					
(4)					
_(5)		L			
(6)		•			
(7)	-				
(8)					
(9)	4				
Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 13 ) ▶		·	,	
Part IX	Other Assets.				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, F	Part X, line 15.	
	(a) Description			(b) Book value	
(1)		<u> </u>			
(2)					
(3)					
(4)					
(5)		-			
(6)					
(7)					
(8)					
(9)					
Total. (Columi	n (b) must equal Form 990, Part X, col (B) line 15)		<b>&gt;</b>		
Part X	Other Liabilities.				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f See Form	990, Part X,	
	line 25.				
1.	(a) Description of liability	(b) Book value	11 11/4 15 17		
(1) Federal	income taxes				
(2) notes	payable	1,229,079		Jane Broke	
(3) accru	ned int	400	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5 1840 - 12	
(4)			and the state of	Make the	
(5)			1. 2. 31 ( 7 )	But the million	
(6)			19 11 19 19 19 19 19 19		
(7)			ドイナ ぶんさ		
(8)	•		1 1 6 1 6 6 8		
(9)			13 1 1 1 1 1	11.2 G 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	n (b) must equal Form 990, Part X, col (B) line 25 ) ▶	1,229,479	134 / A		
	uncertain tax positions. In Part XIII, provide the text of the		inancial statements that repo	orts the	
	liability for uncertain tax positions under FIN 48 (ASC 740)	<del>-</del>	·	_	

Part XIII 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 X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2017 ArklaTex Investment and Development 72-0977439

Page 5

Part XIII . Supplemental Information (continued)

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.

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

2017

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

ArklaTex Investment and Development

72-0977439

Employer identification number

Form 990, Part III, Line 2 support of cdc for growth in nw la

Form 990, Part VI, Line 7a - Election of Members and Their Rights at board meetings

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members at board meetings

Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters company policy manual maintained

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy ceo monitors

Form 990, Part VI, Line 15a - Compensation Process for Top Official board approves

Form 990, Part VI, Line 15b - Compensation Process for Officers board reviews

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

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

Name of the organization

ArklaTex Investment and Development

Employer identification number 72 – 0977439

No documents available to the public

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

	Program	Service	Mgt & General		Fundraisin	Fundraising		
salaries				•				
	\$	41,088	\$	0	\$	0		
util								
	\$	83,895	\$	0	\$	0		
repairs						•		
	\$	96,904	\$	0	\$	0		
office								
	\$	4,405	\$	0	\$	0		
amort								
	\$	1,889	\$	0	\$	0		
insurance								
	\$	15,728	\$	0	\$	0		
prof								
	\$	24,256	\$	0	\$	0		
interest								
	\$	43,994	\$	0	\$	0		
other								
	\$	28,862	\$	0	\$	0		
cdc								
	\$ :	373,622	\$	0	\$	0		
т	otal							
		714,643	\$	0	\$	0		
				Page 1 of 1				