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Department of the Treasury Internal Revenue Service

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

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

Open to Public Inspection

A	For the	e 2008 calendar year, or tax year beginning $\mathrm{JUL}1$, 2008	JUN 30, 2009		
В	Check if	Please C Name of organization	D Employer identifi	cation number	
	applicabl	use IRS			
	Addre	e print or LIAMAR DIXON EXPO FOUNDATION			
	Name chang		72-1	423790	
	Initial return Termir	ACADOMIC -		r 621-1700	
[]	Ameno	ded I tions	G Gross receipts \$	144102.	
	Application	FRAIRIEVILLE, DA 70709	H(a) Is this a group re		
	pendir	F Name and address of principal officer: JACK ROME, JR	for affiliates?	Yes X No	
_		39200 HIGHWAY 42, PRAIRIEVILLE, LA 70769	H(b) Are all affiliates inc	cluded? Yes No	
		empt status: 🔀 501(c) (4		list. (see instructions)	
		te: N/A	H(c) Group exemption		
			ear of formation 1998 N	A State of legal domicile LA	
P	art I		v acminimu co	NULL AND	
Governance	1	Briefly describe the organization's mission or most significant activities. COMMUNIT EDUCATION OF AREA YOUTH	Y ACTIVITY CE	NTER AND	
Ě	2	Check this box if the organization discontinued its operations or disposed of n	ore than 25% of its asset		
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	9	
≪	1 4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8	
Activities	5	Total number of employees (Part V, line 2a)	5	0	
Ę	6	Total number of volunteers (estimate if necessary)	6	0	
ĄĊ		Total gross unrelated business revenue from Part VIII, line 12, column (C)	<u>7a</u>	0.	
	<u> b</u>	Net unrelated business taxable income from Form 990-T, line 34			
		Contributions and greats (Bot VIII Inc. 1b) RECEIVED	Prior Year	Current Year	
enne	8	Contributions and grants (Fart VIII, line III)	.		
	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3 4 and 600 1 5 2010	9312.	2134.	
<u>}</u> 20,€ 8è		Investment income (Part VIII, column (A), lines 3 4 and Wal) 5 2010 Cher revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	285417.	141968.	
7		Total revenue - add lines 8 through 11 (must equal Part XIII, softmap (A), line 12)	294729.	144102.	
		Grants and similar amounts paid (Part IX, column (A) lines + 3)	231,230		
e	1	Benefits paid to or for members (Part IX, column (A), line 4)	.,		
ANNED DEC Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
ြန္မ	16a	Professional fundraising fees (Part IX, column (A), line 11e)			
ۋ≘	ь	Total fundraising expenses (Part IX, column (D), line 25)			
影	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1703864.	1557028.	
Z	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1703864.	1557028.	
8	19	Revenue less expenses. Subtract line 18 from line 12	-1409135.	-1412926.	
Net Assets &	3		Beginning of Year	End of Year	
Set	20	Total assets (Part X, line 16)	46200263.	44543143.	
T A	21	Total liabilities (Part X, line 26)	5494692.	5250498.	
2	22	Net assets or fund balances. Subtract line 21 from line 20	40705571.	39292645.	
P	art II	Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements.	to and to the best of my linewise	lan and heliof it is true, sormet	
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	dge	ige and belief, it is true, correct,	
Sig		X Mary Sue Samas Disson Vice	Mes. 1 11/8/3	9010	
He	re	Signature of officer JACK ROME, JR, PRESIDENT	Date		
		Type or print name and title			
_		Date	Check if Prepar	rer's identifying number	
Pai	d	Preparer's signature & Laura & Mouroe GPA 11/3/10	self- employed ▶ (see in	structions)	
Pre	parer's	Firm's name (or HANNIS T. BOURGEOIS, LLP	EIN >		
Use	Only	self-employed), 2322 TREMONT DR.	EII F		
		address, and ZIP + 4 BATON ROUGE, LA 70809	Phone no ► 2	25-928-4770	
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)	1	X Yes No	

	till Statement of Program Service Accomplishments (see instructions)	423790 Fage 2
1	Briefly describe the organization's mission: COMMUNITY ACTIVITY CENTER AND EDUCATION OF AREA YOUTH	
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 services? If "Yes", describe these changes on Schedule O.	Yes X No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an allocations to others, the total expenses, and revenue, if any, for each program service reported.	d
4a	(Code:) (Expenses \$ 1557028. including grants of \$) (Revenue \$ LAMAR DIXON EXPO CENTER ACTIVITIES FOR COMMUNITY	144102.)
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
	Total program service expenses ▶\$ 1557028 . (Must equal Part IX, Line 25, column (B).)	

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		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l		
	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," complete	l		
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1		١.,
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			١.,
	located outside the United States? If "Yes," complete Schedule F, Part II	15	<u> </u>	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			.,
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	-	X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	 -	X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	 	X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? 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	l		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.	04-		х
	If "No", go to question 25	24a	 	A
ь	, , , , , , , , , , , , , , , , , , , ,	24b		ļ.—-
С		245		
	any tax-exempt bonds?	24c 24d		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	240		
∠ɔa	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		x
	disqualified person during the year? If "Yes," complete Schedule L, Part I	234	 	 ^
b		25b		x
00	pnor year? If "Yes," complete Schedule L, Part I	230	 	 ^
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	26	X	1
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	20	<u>* * * </u>	†
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	27		X
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		990	(2008)
		. 500		,,

•			
Form 990 (FOUNDATION
Part IV	d)		
•			

b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV C Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	28a 28b 28c 29	X	X X
indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	28b 28c	x	х
person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	28b 28c	х	х
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	28b 28c	<u>X</u>	х
 If "Yes," complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 	28c		х
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	28c		х
corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II			
 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 			
 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 	29		Y
contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II			
 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 			
If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	30		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			
Schedule N, Part II	31		X
			ĺ
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34 Was the organization related to any tax-exempt or taxable entity?	ļ		ĺ
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
If "Yes," complete Schedule R, Part V, line 2	35		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		i	
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			ĺ
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body .			
b	Enter the number of voting members that are independent 1b 8			
2	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	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b_		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	i		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		<u>X</u>
11	Is there any officer, director or 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	11		<u> </u>
Sec	tion B. Policies			
			Yes	No_
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		i	
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13	<u> </u>	X
14	Does the organization have a written document retention and destruction policy?	14	ļ	<u>X</u>
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?	15a	 	X
b	Other officers or key employees of the organization?	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		1	х
_	taxable entity during the year?	16a		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			ŀ
	exempt status with respect to such arrangements?	16b		<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	tor		
	public inspection. Indicate how you make these available. Check all that apply.			
	I I Duran contracts I X I A a Ab a de contracts I X I I a a manusa A			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ancial	
	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public.	_		
19 20	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	_		
	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public.	_		

12-18-08

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

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

1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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
- 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.

(A)	(B)		officer, director, truste (C)					(D)	(E)	(F)
Name and Title	Average	١,	Positio (check all that					Reportable	Reportable	Estimated
	hours per		neci	k all	Inat	пат арріу)		compensation from	compensation from related	amount of other
	week	frecto						the	organizations	compensation
		8	器			Zalec Ec		organization	(W-2/1099-MISC)	from the
		fust			8	e e		(W-2/1099-MISC)		organization and related
		Individual trustee or director	Institutional trustee	Officer	sy emp	Highest compensated employee	June			organizations
MARY LEE DIXON		=	<u>-</u>	-	-	IS	ī.			
VICE PRESIDENT		x	İ	X			ŀ	0.	0.	0.
BILL DIXON		1	\vdash	-	╁	ļ				
VICE PRESIDENT		X	1	X			1	0.	0.	0.
JOHN DAVIES										
BOARD MEMBER		Х	<u>L</u>					0.	0.	0.
HARVEY HONORE					1					
BOARD MEMBER		X	<u> </u>	ļ	 			0.	0.	0.
CHARLES C. KLEINPETER		1,						_	0.	0.
BOARD MEMBER CHARLES LAMAR		X	-	-	├	-	-	0.	0.	0.
TREASURER/EXECUTIVE COM	л I	X		X				0.	0.	0.
NICKY PREJEAN	1	+*		<u> </u>	-	\vdash	-			
BOARD MEMBER	l l	X					ł	0.	0.	0.
KEVIN REILLY, SR.										
EXECUTIVE COMMITTEE		X	ļ <u>.</u>	┖	<u> </u>	<u> </u>		0.	0.	0.
JACK ROME, JR.							i			_
PRESIDENT		X		X	₩		├-	0.	0.	0.
	+		1	╁╌	┼	╁	-			_
			_	-	├-	\vdash	-			
		+	\vdash		┼		-			
										
		+-	\vdash	-	\vdash		\vdash			

(A)

Name and title

(C)

Position

(check all that apply)

Officer Key employee

Individual trustee or director Institutional trustee

(D)

Reportable

compensation

from

the organization (W-2/1099-MISC)

(B)

Average

hours

per week

			-		
	70 1	422	700		0
οv	72-1 ees (continued)	423	790	Pa	age o
	(E) Reportable compensatio from related organization (W-2/1099-MIS	on d s	com fr org	(F) stimate nount other pensa om the anizate d relate	of tion e ion ed
	-				
				_	
-					
					-
•		0.			0.
		>			0
				Yes	No
er	mployee on		3		Х
m	the organization		4		Х
rv	rices rendered to		5		Х_
an	\$100,000 of cor	npens	ation	from	
			((C)	
fs	services	<u> </u>	Compe	nsatio	<u>n</u>

		-	-				-						
		_											
		\neg			_								
		_	<u> </u>						\longrightarrow				
		:							İ				
												-	
				-									
b Total						<u> </u>		0.	0.			0	
Total number of individuals (inclicompensation from the organization)		receiv	ed n	nore	tha	n \$1	00,0	300 in reportable	•			(
compensation from the organiza	illon										Yes	No	
Did the organization list any form	ner officer, director or	trustee	e, ke	y en	plog	yee,	or h	nighest compensated employee on					
line 1a? If "Yes," complete Sche										3	1	X	
-								her compensation from the organization	'	4		Х	
and related organizations greated Did any person listed on line 1a								ror such individual led organization for services rendered to		-		A	
the organization? If "Yes," comp										5		X	
ection B. Independent Contractor	··												
Complete this table for your five the organization. NONE		Indepe	ende	ent c	ontr	racto	ors t	that received more than \$100,000 of co	mpensa	ation	from		
	(A)		•			_		(B)			(C)		
Name an	d business address		_				\dashv	Description of services	 _ c	ompe	ensatio	<u>-</u>	
									+				
							_		↓				
				-	-				 				
	ontractors (including the	ose in	1) w	ho r	ecer	ved	mor	re than \$100,000 in compensation			***************************************		
from the organization									<u> </u>	Form	990	(2008	
008 12-18-08													
1102 781090 05645	200	0 0	6 N I	^		8 8 m :	ת א	DIXON EXPO FOUNDATI	(ON	0 F 4	: 15	1	
LIUZ / BIUYU UDB45	200	0.0	บบเ	υU	1.1	M 141 ∕	HK.	-DIAON EAPO FOUNDATI	UIV	$\sigma \supset c$, 4 3		

Pa	rt VII	Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
S, S	С	Fundraising events	1c			,		
ar a	d	Related organizations	1d					
Ş.E	е	Government grants (contribut	tions) 1e					
i Si	f	All other contributions, gifts, gran	its, and					
혈		similar amounts not included abo	ve 1f					
들	g	Noncash contributions included in lines	1a-1f \$					
<u>8</u> 0	h	Total. Add lines 1a-1f						
				Business Code		,		
8	2 a							
<u>.</u> ₹	b							
Scon	c							_
e a	d							
Program Service Revenue	е							
۵	f	All other program service reve	enue					
\rightarrow		Total. Add lines 2a-2f		<u> </u>				
	3	Investment income (including	dividends, inter	est, and	2124			2124
		other similar amounts)			2134.			2134.
	4	Income from investment of ta	x-exempt bond (proceeds P				
ł	5	Royalties		<u> </u>				
	•	0 · · · D · ·	(ı) Real	(ii) Personal	-			
	6 a				-			
	b							
		Rental income or (loss)		<u> </u>	136728.			136728.
		Net rental income or (loss) Gross amount from sales of	(I) Coourtino		130720.			130720.
	/ a		(i) Securities	(II) Other				
	_	assets other than inventory Less: cost or other basis		 				
	b	and sales expenses		j				
	_	Gain or (loss)						
		Net gain or (loss)		•	i '			İ
		Gross income from fundraising	a events (not					
Other Revenue	-	including \$						
eve		contributions reported on line						
E.		Part IV, line 18	а	,				
the	ь	Less: direct expenses	b	,				į
٥	С	Net income or (loss) from fund	draising events				_	
	9 a	Gross income from gaming a	ctivities. See					
		Part IV, line 19	а					ì
	b	Less: direct expenses	b					
	c	Net income or (loss) from gan	ning activities	>				
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less: cost of goods sold	b					
ļ	С	Net income or (loss) from sale	es of inventory	<u> </u>				
ļ		Miscellaneous Revenu	ie	Business Code				
	11 a	OTHER INCOME		900099	5240.	5240.		
	b	-						
	С					. —		
	d	•			F040	,		
		Total. Add lines 11a-11d	•	•	5240.	F 2 4 2		120062
83200	<u>12</u> 19	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 1	0c, and 11e	144102.	5240.	0.	
83200 02-02	-09							Form 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
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 contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	16069.	16069.		
C	Accounting	3770.	3770.		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees		-		
9	Other	-			
12	Advertising and promotion	2150	0150		
13	Office expenses	2158.	2158.		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel		<u> </u>		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			-	
19	Conferences, conventions, and meetings	106125.	106125.		
20	Interest	100123.	100123.		
21	Payments to affiliates	1385410.	1385410.		
22	Depreciation, depletion, and amortization	1202410.	1202410.		
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total				
_	expenses shown on line 25 below) CONSULTING FEES	35000.	35000.		
a b	ADMINISTRATIVE EXPENSE	4800.	4800.		
_	OMIED DECEMBER CEDIT	2690.	2690.		
c d	TIGHTON A DEDUTED	780.	780.		
e e	MICCELLANDOUC	226.	226.		
f	All other expenses	220.	220.		
25	Total functional expenses. Add lines 1 through 24f	1557028.	1557028.	0.	0.
26	Joint Costs. Check here I If following	133,020.	133,020.		
20	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
_		<u>. </u>			

832010 12-18-08

LAMAR DIXON EXPO FOUNDATION 72-1423790 Page 11 Form 990 (2Q08) Part X Balance Sheet (A) Beginning of year End of year 3864. 3798. 1 1 Cash - non-interest-bearing 373266. 127053. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 25433. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key 5 employees, or other related parties. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L. 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 54031004. 10a 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation. Complete 45797700. 44412292. 9618712. 10c 10b Part VI of Schedule D 11 11 Investments - publicly traded securities 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 44543143. 46200263. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 2500. 3186. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 5247998. 22 of Schedule L 5491506. 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable 25 Other liabilities. Complete Part X of Schedule D 5494692. 5250498. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 40705571. 39292645. Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 40705571. 39292645. 33 33 Total net assets or fund balances 44543143. 46200263. Total liabilities and net assets/fund balances Part XI Financial Statements and Reporting

	1 manda otatements and reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	Were the organization's financial statements audited by an independent accountant?	2b	<u> </u>	X
c	If "Yes" to lines 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>	<u> </u>
За	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	<u> </u>	X
h	If "Yes " did the organization undergo the required audit or audits?	3ь		

832011 12-18-08

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Open to Public

OMB No_1545-0047

Inspection

Name of the organization

LAMAR DIXON EXPO FOUNDATION

Employer identification number 72-1423790

Par	Organizations Maintaining Donor Advise	d Funds or O	ther Similar Fund	ds or Accou	ints. Complete if the				
	organization answered "Yes" to Form 990, Part IV, line								
		(a) Donor advised funds			(b) Funds and other accounts				
1	Total number at end of year .								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year	•							
5	Did the organization inform all donors and donor advisors in v	writing that the as	sets held in donor adv	vised funds					
	are the organization's property, subject to the organization's				Yes No				
6	Did the organization inform all grantees, donors, and donor a			be used only					
	for charitable purposes and not for the benefit of the donor of				Yes No_				
Par									
1	Purpose(s) of conservation easements held by the organizati	-							
	Preservation of land for public use (e.g., recreation or p		Preservation of an I	historically imp	ortant land area				
	Protection of natural habitat		Preservation of cert	tified historic st	ructure				
	Preservation of open space								
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribu	tion in the form of a co	onservation eas	sement on the last day				
	of the tax year.								
	S. 11.5 (12.7) San.7				Held at the End of the Year				
а	Total number of conservation easements			2a					
ь	Total acreage restricted by conservation easements			2b					
c	Number of conservation easements on a certified historic str	2c							
d	Number of conservation easements included in (c) acquired	2d							
3	Number of conservation easements modified, transferred, rel		ned, or terminated by t	the organizatio	n during the taxable				
•	vear ▶	•			-				
4	Number of states where property subject to conservation ea	sement is located	. ▶						
5	Does the organization have a written policy regarding the per			_ , and					
•	enforcement of the conservation easements it holds?	•	•		Yes No				
6	Staff or volunteer hours devoted to monitoring, inspecting, a	nd enforcing eas	ements during the yea	r >					
7	Amount of expenses incurred in monitoring, inspecting, and								
8	Does each conservation easement reported on line 2(d) above								
-	and section 170(h)(4)(B)(ii)?				Yes No				
9	In Part XIV, describe how the organization reports conservati	ion easements in	its revenue and exper	nse statement,	and balance sheet, and				
	include, if applicable, the text of the footnote to the organiza								
	conservation easements.								
Pai	t III Organizations Maintaining Collections o	f Art, Historic	cal Treasures, or	Other Simi	lar Assets.				
	Complete if the organization answered "Yes" to Form	990, Part IV, line	8.						
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its r	evenue statement and	d balance sheet	works of art, historical				
	treasures, or other similar assets held for public exhibition, e	ducation, or rese	arch in furtherance of	public service,	provide, in Part XIV, the text of				
	the footnote to its financial statements that describes these	items.							
ь	If the organization elected, as permitted under SFAS 116, to	report in its reve	nue statement and bal	lance sheet wo	rks of art, historical treasures,				
	or other similar assets held for public exhibition, education, of	or research in furt	herance of public serv	ice, provide the	e following amounts relating to				
	these items:								
	(i) Revenues included in Form 990, Part VIII, line 1			>	\$				
	(ii) Assets included in Form 990, Part X			•	\$ \$				
2	If the organization received or held works of art, historical tre	asures, or other	sımılar assets for finan						
	the following amounts required to be reported under SFAS 1			-					
а	Revenues included in Form 990, Part VIII, line 1	•		>	\$				
b	Assets included in Form 990, Part X			>	\$ \$				
	· 								
	For Privacy Act and Pananyork Reduction Act Notice See	e the Instruction	s for Form 990		Schedule D (Form 990) 2008				

Par	t III Organizations Maintaining Co	llections of A	rt, Hist	torical Tr	easures, c	r Other	Simila	ar Asse	ts (conti	nued)	
3	Using the organization's accession and other i	ecords, check any	of the f	ollowing tha	it are a signifi	cant use of	its col	ection itei	ms (chec	k all	
	that apply):										
а	Public exhibition	c	, <u> </u>	Loan or exc	hange progra	ıms					
b	Scholarly research	e	, []	Other	<u> </u>						
С	Preservation for future generations										
4	Provide a description of the organization's coll	ections and explai	n how th	ney further t	he organizatio	on's exemp	t purpo	se in Parl	XIV.		
5	During the year, did the organization solicit or	receive donations	of art, hi	stoncal trea	sures, or othe	er sımılar as	sets		_		_
	to be sold to raise funds rather than to be mail	ntained as part of	the orga	nization's co	ollection?				Yes		No
Par	Trust, Escrow and Custodial A reported an amount on Form 990, Part	_	. Compl	lete if organi	zation answe	red "Yes" t	o Form	ı 990, Par	t IV, line 9), or 	
1a	Is the organization an agent, trustee, custodia	n or other intermed	diary for	contribution	ns or other as	sets not ind	cluded				_
	on Form 990, Part X?								Yes		No
ь	If "Yes," explain the arrangement in Part XIV as	nd complete the fo	ollowing	table:							
									Amount		
c	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on For	m 990, Part X, line	21?						Yes		No
ь	If "Yes," explain the arrangement in Part XIV.										
Par	t V Endowment Funds. Complete if	organization answe	ered "Ye	s" to Form 9	990, Part IV, I	ine 10.					
		(a) Current year	(b) P	rior year	(c) Two year	s back (d)	Three	ears back	(e) Four	years	back_
1a	Beginning of year balance										
b	Contributions										
С	Investment earnings or losses			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
d	Grants or scholarships										
e	Other expenditures for facilities						············			**********	******************
•	and programs										
f	Administrative expenses		·	••••			**********			*******	
9	End of year balance		<u> </u>								**********
2	Provide the estimated percentage of the year	end balance held :	as:		•				·		
-	Board designated or quasi-endowment		%								
ь	Permanent endowment	%	_~								
-	Term endowment ▶ %										
	Are there endowment funds not in the posses		ration the	at are held s	and administe	red for the	organi	zation			
Ja	by:	sion of the organiz	anon m	at are note t	ara administe	100 101 1110	organi	Lation	Ī	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations					•			3a(ii)		
	If "Yes" to 3a(ii), are the related organizations	listed as required	on Scha	dula B2					3ь		
4	Describe in Part XIV the intended uses of the	·							_00		
Par					Part Y line	10					
- 41	······································						roolotic		(d) Rool	L valu	
	Description of investment	(a) Cost or of basis (investigation)			t or other (other)	(c) Dep	ecialic	/ ¹¹	(d) Bool	\ valu	-
	Land	Jasis (ilivesti		Vasis	(Strict)						
	Land			540	31004.	0.6	187	12	444	122	92
	Buildings			7 740	,31004.		, 10/	+4 •	777	+ 4 4	<u> </u>
	Leasehold improvements	 					_				
	Equipment			-							
	Other Colonial Coloni		<i>~</i>	L				_	444	122	92
Total	. Add lines 1a-1e. (Column (d) should equal For	m 990. Part X. coli	umn (H).	iine 10(c).)					***	122	14.

Schedule D (Form 990) 2008

Part VI	Investments - Other Securities. Se	ee Form 990, Part X, line 1	2.		
	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuatest or end-of-year mark	
Financial of	derivatives and other financial products				
	eld equity interests				
	· ,				
			<u> </u>		
•					
				• •	
	-				
Total. (Col	(b) should equal Form 990, Part X, col (B) line 12)				
Part VI	II Investments - Program Related. S	ee Form 990, Part X, line	13.		
<u> </u>		(b) Book value		(c) Method of valuate	tion:
	(a) Description of investment type	(b) Book value	Cos	st or end-of-year marl	ret value
		- · · · · · · · · · · · · · · · · · · ·			
					<u> </u>
Total (Col	(b) should equal Form 990, Part X, col (B) line 13)		······································	·····	······
Part IX	Other Assets. See Form 990, Part X, line	15.			
		Description			(b) Book value
					<u> </u>
					<u> </u>
		•			
					<u> </u>
Total. (Co	olumn (b) should equal Form 990, Part X, col (B)	line 15.)		>	
Part X					
<u> </u>	(a) Description of liability		(b) Amount		
Federal in	come taxes				
	· · · · · · · · · · · · · · · · · · ·				
Total (C	olumn (b) should equal Form 990, Part X, col (B)	line 25.)			
	(D) 0110010 0quai / 01111 000, 1 at //, 001 (D)			•	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 832053 12-23-08

SCHEDULE L

(Form 990 or 990-EZ)

(1 OT 11 990 OF 990-E2

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

O-EZ)

Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, lines 38a or 40b.

OMB No 1545-0047

2008 Open To Public Inspection

Name of the organization LAM	AR DIX	ON E	EXPO	FOU	NDATIO	N	- -	-		Employe 72-14			umber	
Part I Excess Benefit														
To be completed by	organization	s that a	answer	ed "Yes"	on Form 99	0, Part IV,	line 25a or 2	25b, or F	orm 99	90∙EZ, Pa	rt V, line			
1 (a) Name of disqualified person						(b) [Description o	of transa	ction			(c) Corr		
												Yes	_No	
		· <u></u>												
												i		
					_									
												<u> </u>		
2 Enter the amount of tax imposection 4958	sed on the	organiza	ation n	nanagers	or disqualifi	ed person	s during the	year un	der	▶ 4	<u>.</u>			
3 Enter the amount of tax, if an	v on line 2	ahova	reimhi	ursed by	the organiza	ation				> \$	· ——			
e Emor the amount of tax, if an	y, on inic 2,	ubo 10,	1011110	J, 300 D,	ino organiza					•				
Part II Loans to and/or	From Int	erest	ed P	ersons.								-	_	
To be completed by	organization	s that a	answer	ed "Yes"	on Form 99	0, Part IV,	line 26, or F	orm 990	·EZ, P					
(a) Name of interested	(b) Loan				al principal	(d) Balance due			In ult?	(f) Approved by board or		(g) Written agreement?		
person and purpose	the orga	Τ-		am	ount				1		nittee?	 		
MARY LEE DIXON -	To X	Fro	<u>m</u>	32	50334.	32	50334.	Yes	No X	Yes	No	Yes_X	No	
CHARLES LAMAR - P					$\frac{30334.}{97664.}$		$\frac{30334.}{97664.}$		X	$\frac{X}{X}$	1	$\frac{x}{x}$		
					3,0010									
							-							
		<u> </u>					47000							
Part III Grants or Assis	tongo Por	nofitir	a Int	torosto	d Porson		47998.	l				<u> </u>	<u></u>	
To be completed by			_				line 27							
(a) Name of interested p		is that a					sted person	and		(c) Amo	ount of a	rant or ty	pe	
(b) Relati					the organization					of assistance				
					<u></u>				 					
									-					
									+					
Part IV Business Trans	actions Ir	volvi	ng In	tereste	d Persor	 IS.					_		: ' -	
To be completed by	organization	s that a	answei	ed "Yes"	on Form 99	0, Part IV,	lines 28a, 2	8b, or 2	Вс.					
(a) Name of interested p	person				p between ii the organiz		(c) Amo transa		(c	d) Descrip transac		organi	aring of zation's nues?	
												Yes	No	
JACK ROME, JR.	ROM	E OWNS	GREA	3	0000	.JA	CK R	OME,	-	X				
												-	<u> </u>	
							1	 -					 	
							-		+			+	 	
									\rightarrow			+		

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

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

Schedule L (Form 990 or 990-EZ) 2008

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

LAMAR DIXON EXPO FOUNDATION

Employer identification number 72-1423790

FORM 990, PART VI, SECTION A, LINE 2: THE FOLLOWING OFFICERS HAVE A
FAMILY RELATIONSHIP WITH THE ORGANIZATION:
BILL DIXON AND MARY LEE DIXON ARE HUSBAND AND WIFE
CHARLES LAMAR IS THE BROTHER OF MARY LEE DIXON
KEVIN REILLY, SR. IS THE UNCLE OF MARY LEE DIXON
THE FOLLOWING OFFICERS HAVE A BUSINESS RELATIONSHIP WITH THE ORGANIZATION:
JACK ROME, JR. IS GREATER THAN A 5% OWNER OF JACK ROME, JR. & ASSOCIATES, INC WHICH RECEIVES \$30,000 PER YEAR IN CONSULTING FEES FROM THE
ORGANIZATION. THE MONTHLY RETAINER FEE WAS APPROVED BY THE BOARD.
FORM 990, PART VI, SECTION A, LINE 4: DUE TO AN IRS AUDIT, THE EXEMPTION
CODE OF THE ORGANIZATION CHANGED FROM A 501(C)(3) ORGANIZATION TO A
501(C)(4) ORGANIZATION.
FORM 990, PART VI, SECTION A, LINE 10: EITHER THE PRESIDENT OR A VICE
PRESIDENT SIGNS THE RETURN AND MAILS IT OUT. THE RETURN IS ON RECORD AND
AVAILABLE FOR REVIEW BY ALL BOARD MEMBERS.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON
REQUEST.

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

Schedule O (Form 990) 2008

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

LAMAR DIXON EXPO FOUNDATION

Employer identification number 72-1423790

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:
(A) NAME OF PERSON: MARY LEE DIXON
(A) PURPOSE OF LOAN: PAYOFF OUTSIDE LOANS
(B) LOAN TO OR FROM ORGANIZATION? = TO
(C) ORIGINAL PRINCIPAL AMOUNT \$ 3250334. (D) BALANCE DUE \$ 3250334.
(E) LOAN IN DEFAULT? = NO
(F) APPROVED BY BOARD OR COMMITTEE? = YES
(G) WRITTEN AGREEMENT? = YES
(A) NAME OF PERSON: CHARLES LAMAR
(A) PURPOSE OF LOAN: PAYOFF OUTSIDE LOANS
(B) LOAN TO OR FROM ORGANIZATION? = TO
(C) ORIGINAL PRINCIPAL AMOUNT \$ 1997664. (D) BALANCE DUE \$ 1997664.
(E) LOAN IN DEFAULT? = NO
(F) APPROVED BY BOARD OR COMMITTEE? = YES
(G) WRITTEN AGREEMENT? = YES
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: JACK ROME, JR.
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
JACK ROME OWNS GREATER THAN A 5% INTEREST IN JACK ROME, JR. & ASSOCIATES.
(C) AMOUNT OF TRANSACTION \$ 30000.
(D) DESCRIPTION OF TRANSACTION: JACK ROME, JR. IS GREATER THAN 5% OWNER
OF JACK ROME, JR. & ASSOCIATES, INC WHICH RECEIVES \$30,000 PER YEAR IN
CONSULTING FEES FROM THE ORGANIZATION. THE MONTHLY RETAINER FEE WAS
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

SCHEDULE O

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2008
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Name of the organization LAMAR DIXON EXPO FOUNDATION	Employer identification number 72-1423790
APPROVED BY THE BOARD.	
(E) SHARING OF ORGANIZATION REVENUES? = NO	
FORM 990, PART IV, LINE 26	
AMENDED T/R	
THIS QUESTION SHOULD HAVE BEEN ANSWERED YES.	
FORM 990, PART X, LINE 22 AND 23	
AMENDED T/R	
THE NOTE PAYABLE AMOUNT WAS MOVED TO THE CORRECT LINE.	
SCHEDULE L, PART II	
AMENDED T/R	
PART II WAS FILLED OUT AS REQUIRED.	
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