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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)

OMB No 1545-0047 2009

Open to Public Inspection

Inter	nal Reve	enue Service		► The organization may have	to use a copy of this return to s	satisfy state repor	ting requirements	Оре	n to Public	Inspection
	For th	ne 2009 calen	dar year,	or tax year beginning	, 20	09, and endir	ıg		,	
В	Check i	f applicable		С			D Em	ployer Ident	ification Numbe	er .
		Idress change	Please use IRS label	THE PARK OF EAST	TEXAS, INC		7!	5-0247	290	
	H.	me change	or print or type.	DBA EAST TEXAS S			E Tele	phone num	ber	
	\vdash	tial return	See specific	2112 WEST FRONT	STREET		1 (903) 5	97-2501	
	\vdash	rmination	Instruc- tions.	TYLER, TX 75702			 \	,00, 0	<u> </u>	
	\vdash	nended return	uons.				6 00	ss receipts	• 1 N	07,105.
	\vdash		E Name	and address of principal officer:	JOHN SYKES		H(a) is this a group r			Yes X No
	L.J.Ap	plication pending		AS C ABOVE	OOM SIKES		H(b) Are all affiliates		⊨	Yes No
_		-exempt statu			4047(a)(1) as	527	If 'No,' attach a	list (see ins		
÷					o) 4947(a)(1) or	52/				
<u>J</u>				TATEFAIR.COM		II	H(c) Group exemptio			TX
K		of organization	X Corpora	ation Trust Associatio	n Other >	L Year of Forma	tion 1970	VI State of I	egal domicile	<u> 17</u>
Pa	ırt I	Summa				mun papu	OH HACK M	DV30 T		3000
				ganization's mission or mo						
9				STER_PLANNED_AREA						·OM
nar				E, MEETING ROOMS,						
Ver				AN EVENTS CENTER if the organization discont						w
ဗိ				nbers of the governing bod		isposed of file	ore than 25% or	3	•	53
න්			-	nt voting members of the g		line 1b)	• • •	4		52
£				yees (Part V, line 2a)				5		7
Activities & Governance	6	Total number	of volunt	leers (estimate if necessar	RECEIVE	D		6		_150
ď				ousiness revenue from Par	t VII I, colum n (G), line 1	2-70		7a		<u> </u>
⊇_	b	Net unrelated	business	s taxable income from Fori		NO O		7b		0.
<u>n</u> nz					MAR 1 5 20)10 'S	Prior Ye	ar	Curren	
	8	Contributions	and gran	nts (Part VIII, line 1h) .		1821		,144.		22,190.
MARVERUS	9	Program serv	nce reven	iue (Part VIII, line 2g)	OCDENLI		1,174		9'	71,548.
ČŽ.	10	Investment in	come (Pa	art VIII, column (A), lines 3	3.4, and 36アリニュ、	71		,949.		2,293.
∦	1			III, column (A), lines 5, 6d,				,400.		11,074.
				nes 8 through 11 (must eq			1,217	`		07,105.
ERPS NINED	13			ounts paid (Part IX, colum		•	. 21	,500.		18,000.
쁯	14			members (Part IX, column						
2	15	Salaries, other	er comper	nsation, employee benefits	i (Part IX, column (A), lii	nes 5-10)	439	<u>,066.</u>	32	<u>21,252.</u>
4	16a	Professional	fundraisin	ng fees (Part IX, column (A	A), line 11e)				. , ,,,,,,,	
0	ь	Total fundrais	sing expe	nses (Part IX, column (D),	line 25) ►		/	1		
Π,	17	Other expens	es (Part I	IX, column (A), lines 11a-1	1d. 11f-24f)		679	,672.	7:	25,668.
		•	-	nes 13-17 (must equal Par		5) .	1,140			64,920.
				s. Subtract line 18 from lin		•		,259.		57,815.
88						-	Beginning o		End of	
Net Assets or Fund Balancos	20	Total assets	(Part X li	ne 16)			2,489			33,002.
¥8		Total liabilitie			•			,724.		62,806.
Z Ž			•	ances Subtract line 21 fro	m line 20		2,427	`		70,196.
Pa	rt II		ure Bloc		III IIIIe Zu		2,421	, 017.		10,130.
								-1 -1 !		
		true, correct, a	nd complete	I declare that I have examined this Declaration of preparer (other than	n officer) is based on all informa	ition of which prepared	arer has any knowledg	e illy kiit	owieuge and bei	
Sig	ın		7)	lu 6 21	tos		101	rarc	11 10	J010
He		Signature	of officer	30 Cg	/ 	· -	Date	,,,,	1	/
		NHOT.	SYKES	U			PRESIDENT	•		
			int name and	d title			TIMOIDENI			
		 		2H		Date	Check if	Pr	eparer's identify ee instructions)	ing number
Pa	id	<u> </u>	W _A	isa D. Holenz	20~~	PMR 09	2010 self-	► □ (s	ee instructions)	
Pre	e-	Preparer's signature	► LTS	A G. ROBINSON				่ ่ ่ ่ ่ ่	/A	
pa	rer's	Firm's name (d		LOB MORGAN PEDDY	& CO., P.C.			124	,	
Us		yours if self-		0 OLD BULLARD RD			EIN ►	N/A		
On	ııy	employed), address, and ZIP + 4	TYL				Phone no	► (903	3) 534-0	088
May	the II			with the preparer shown a				,,,,,	X Yes	No
				rwork Reduction Act Notic			TEFANI	13L 12/29		990 (2009)
			wpc		,paiate IIIJt					()

Form 9	90 (2009) THE PARK OF EAST TEXAS, INC	75-024729	<u> </u>	Page 2
Part I	II Statement of Program Service Accomplishments			
1 B	riefly describe the organization's mission:			
. 9	EE SCHEDULE O			
_				
2 D	id the organization undertake any significant program services during the year which were not listed on t	the prior	_	_
F	orm 990 or 990-EZ?	🗍	Yes X	No
If	'Yes,' describe these new services on Schedule O.		-	_
	id the organization cease conducting, or make significant changes in how it conducts, any program servi	ices?	Yes X	. No
		ices:	103	
	'Yes,' describe these changes on Schedule O.		. 501	
4 D	escribe the exempt purpose achievements for each of the organization's three largest program services nd 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	by expenses. Se	Ction 5011	(C)(3) total
ai e:	xpenses, and revenue, if any, for each program service reported.	anocations to or	ners, are	lotar
0.	reportation and the contract of the contract o			
4a (0	Code: 910,847. including grants of \$ 18,000.) (Fig. 18,000.)	Revenue \$	971,	<u>548.</u>)
<u></u>				
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4b (0	Code:) (Expenses \$ including grants of \$) (F	Revenue \$)
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40 (Code:) (Expenses \$	Revenue \$)
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4d C	Other program services. (Describe in Schedule O.)			
	Expenses \$ Including grants of \$) (Revenue \$		١	
<u>4e I</u>	otal program service expenses ► 910, 847.			

Page 3

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X 1 Schedule A Х Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Х for public office? If 'Yes,' complete Schedule C, Part I. 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Х 5 Did the organization maintain any donor advised funds or any similar funds or 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 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III* 8 Х 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 9 Schedule D. Part IV Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If V is a complete Schedule D, Part V10 X Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or Х 11 X as applicable Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI • Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX • Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. • 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? If Yes, 'complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII X 12 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II X 15 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 a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 X Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 20 Х

X

Х

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75-0247290 THE PARK OF EAST TEXAS, Form 990 (2009) Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and 24a Х complete Schedule K. If 'No, 'go to line 25 . b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 240 any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a X 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? If 'Yes,' complete 25b X Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Х Schedule L, Part III 27 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M . 29 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 Х 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 32 Х Schedule N, Part II X 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Х 34 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 X

BAA Form 990 (2009)

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

Note. All Form 990 filers are required to complete Schedule O

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Par	t V * Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns. Enter -0- if not applicable			
t	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3 <i>a</i>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	_3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
t	If 'Yes,' enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		Х
k	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
Ŀ	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7 a		X
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		х
c	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	`		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g	ļ	
ŀ	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		S
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
	Did the organization make any taxable distributions under section 4966?	9a	·	
	Did the organization make any distribution to a donor, donor advisor, or related person?	9ь		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			}
	Gross income from other members or shareholders			1
ł	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	L	<u> </u>
	of 'Yes.' enter the amount of tax-exempt interest received or accrued during the year			

Form 990 (2009) BAA

Part VI 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.

Se	ction A.	Governing Body and Management				
					Yes	No
1	a Enter the	number of voting members of the governing body	1a 53			
	b Enter the	number of voting members that are independent	1b 52			
2	Did any o officer, d	officer, director, trustee, or key employee have a family relationship or a business re irector, trustee or key employee? SEE SCHEDULE Q	elationship with any other	2	Х	
3	Did the o	rganization delegate control over management duties customarily performed by or s, directors or trustees, or key employees to a management company or other pers	under the direct supervision on?	3		Х
		rganization make any significant changes to its organizational documents		4	X	
	since the	prior Form 990 was filed? SEE SCH O				
5	Did the o	rganization become aware during the year of a material diversion of the organizatio	n's assets?	5		X
6	Does the	organization have members or stockholders? .	••	6		X
7	a Does the	organization have members, stockholders, or other persons who may elect one or body? SEE. SCHEDULE Ω	more members of the	7a	х	
	b Are any o	decisions of the governing body subject to approval by members, stockholders, or o	ther persons?	7b		X
8	Did the o	rganization contemporaneously document the meetings held or written actions underling.	ertaken during the year by			
	a The gove	rning body?		8a	X	
	b Each con	nmittee with authority to act on behalf of the governing body?		8ь	X	
9	Is there a	iny officer, director or trustee, or key employee listed in Part VII, Section A, who calon's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	9		х
Se		Policies (This Section B requests information about policies not	required by the Internal			
	enue Code	,	,			
					Yes	No
10	a Does the	organization have local chapters, branches, or affiliates?		10a		X
	b If 'Yes,' o	loes the organization have written policies and procedures governing the activities of the organization?	of such chapters, affiliates,	10Ь		
11	Has the o	organization provided a copy of this Form 990 to all members of its governing body	before filing the form?	11	Х	
11	A Describe	in Schedule O the process, if any, used by the organization to review this Form 990	D. SEE SCHEDULE O	. B.		
12	a Does the	organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	
	b Are office to conflic	ers, directors or trustees, and key employees required to disclose annually interests ts?	that could give rise	12b		x
	c Does the <i>Schedule</i>	organization regularly and consistently monitor and enforce compliance with the polenow this is done $$\circ$$	licy? If 'Yes,' describe in	12c		x
13	Does the	organization have a written whistleblower policy?	,	13	<u>X</u>	
14	Does the	organization have a written document retention and destruction policy?		14		<u> X</u>
15	Did the p persons,	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent cision?	>		
	a The orga	nization's CEO, Executive Director, or top management official		15 a	<u>X</u>	
	b Other off	cers of key employees of the organization SEE SCHEDULE Q		15 b	X	
	If 'Yes' to	line 15a or 15b, describe the process in Schedule O. (See instructions.)				
16	a Did the o entity dui	rganization invest in, contribute assets to, or participate in a joint venture or similar ing the year?	arrangement with a taxable	16a		X
	in joint ve	has the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?	to evaluate its participation the organization's exempt	16b		
Sec	ction C.			.00	1	
		tates with which a copy of this Form 990 is required to be filed NONE	 	-		
	Section 6	1104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply.	nd 990-T (501(c)(3)s only) av	aılabl	e for p	oublic
		website Another's website X Upon request				
19	Describe statemen	in Schedule O whether (and if so, how) the organization makes its governing docur ts available to the public. SEE SCHEDULE O	nents, conflict of interest poli	cy, ar	nd fina	incial
	State the	name, physical address, and telephone number of the person who possesses the ${\bf l}$				

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 Report compensation for the calendar year ending with or within the organizations's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- 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

(A)	(B)							(D)	(E)	(F)	
Name and Title	Average hours per week			Officer	_	hat app		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation	
		Individual trustee or director	Institutional trustee	icer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
JESSE ACOSTA						<u>a</u>					
DIRECTOR	0	Х						0.	0.	0.	
HENRY BELL DIRECTOR	0	х						0.	0.	0.	
TERRY BRANNON DIRECTOR	0	х						0.	0.	0.	
JIM GIAMETTA									-		
DIRECTOR JOANNE HAMPTON	0	Х						0.	0.	0.	
DIRECTOR BJ HORNBOSTEL	0	Х					_	0.	0.	0.	
DIRECTOR	1	Х			_			0.	0.	0	
JOEL BAKER DIRECTOR	1	x						0.	0.	_ 0	
BILL BARRETT		х						0.	0.	0	
DIRECTOR JEANNIE LAFFERTY	1										
DIRECTOR SAM MEZAYEK	1	X			\vdash		_	0.	0.	0	
DIRECTOR	1	Х						0.	0.	0	
DANNY PEGRAM DIRECTOR	1	Х		_				0.	0.	0	
TAYLOR BURNS DIRECTOR	1	x				,		0.	0.	0	
JOE CAVENDER								0.	0.	0	
DIRECTOR SHARI RICKMAN	1	X	-				-				
DIRECTOR CHRIS SIMONS	1	X	_	-	-			0.	0.	0	
DIRECTOR	1	x						0.	0.	0	
CHARLES HILL DIRECTOR	1	х						0.	0.	0	
DAVID THEDFORD DIRECTOR	1	х						0.	0.	0	
BAA	-	•	TEE^	ולחות ילחות	<u></u>	/10/09				Form 990 (2009	

	INC								75-0247290			age 8
Part VII' Section A. Officers, Directors, Trus	tees, k	(ey	Em	ıplo	оуе	es,	an	d Highest Con	npensated Emp	oyee	s (co	nt.)
. (A)	(B)			(c)			(D)	(E)		(F)	_
Name and Title	Average hours per week	_		(checl Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amo con f orç ai	stimated unt of oth npensation rom the ganization of relate anization	ther on on d
CYNTHIA JOHNSON												
DIRECTOR	1	Х						0.	0.			0.
MICHAEL TOLBERT												
DIRECTOR	1	X						0.	0.			0.
DREW LANDES												
DIRECTOR	1	X						0.	0.			0.
NANCY BRACKEN WALDEN												
DIRECTOR	1	X			L			0.	0.			0.
HOMER MOHN					Ì							
DIRECTOR	1	X						0.	0.			0.
KYLE PENNEY	1											
DIRECTOR	1	Х				Ш		0.	0.			0.
MIKE THOMAS												
DIRECTOR	0	Х			<u> </u>			0.	_0.			0.
JIMMY_BAIN												
DIRECTOR	0	X			<u> </u>	\sqcup		0.	0.			<u>0.</u>
LIN BARKER	i _							_				
DIRECTOR	0	X			<u> </u>			0.	0.			0.
ROHN BOONE	_							_	_			_
DIRECTOR	0	Х		<u> </u>	ļ		_	0.	0.			0.
JOHN GASTON	_								_			_
DIRECTOR	0	Х		<u> </u>	├	\vdash		0.	0.		<u> </u>	0.
RICHARD GRIFFIN	_	١.,				1						_
DIRECTOR	0	X		_	<u> </u>	Н		0.	0.			<u>0.</u>
FRANCIS KAY		,,										^
DIRECTOR	0	Х			L		▶	0.	0.			<u>0.</u>
1 b Total			_ 4					148,200.	0.	hla aa		0.
2 Total number of individuals (including but not limiter	a to tno	se II	stec	abo	ove,) who	rec	ceived more than	\$100,000 in reporta	ble cor	npens	ation
from the organization > 1											Var	N-
											Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	or trust	ee, I	кеу	emp	oloy	ee, c	or hi	ghest compensate	ed employee	3		X
4 For any individual listed on line 1a, is the sum of re										3		^
To any individual fisted on line 1a, is the sum of re	portable	COL	inhe	11581	uon	and	om	er combenzation	110111		1 1	

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>	3	 Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such		
	individual	4	 X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services		
	rendered to the organization? If 'Yes,' complete Schedule J for such person	5	X
•	in D. Indonesia of Control		

Section B. Independent Contractor

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of Services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0

Pa	t VIII' Statement of Revenue		··· · · · · · · · · · · · · · · · ·	,			,
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
5 10	1a Federated campaigns.	1 a					
AN	b Membership dues	1 b					
유호	c Fundraising events	1c					
F A	d Related organizations	1 d					
₫≦	e Government grants (contributions)	1e					
S.S.	* '						
54	f All other contributions, gifts, grants, and similar amounts not included above.	1f	22,190.				
F E	•		22,190.				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	g Noncash contribus included in lins 1a-1f:.	. ۶_		22 100			
- H	h Total. Add lines 1a-1f.	$\overline{}$	Business Code	22,190.			
5	a- ACDICIII TIIDAI EAID	-	Business Code	971,548.	971,548.	· · · · · · · · · · · · · · · · · · ·	
Ĕ	2a AGRICULTURAL FAIR			9/1,546.	9/1,346.		
Ä	p	· -					
Z.							· · ·
1 SE	d	· -	- 				
RAN	e						
20	f All other program service revenue	e L		071 540	₹ \$\$ ₹3 ₹		
=	g Total. Add lines 2a-2f			971,548.	₹ 3.5 × × 2 · 5		^
	3 Investment income (including div other similar amounts)	idends	, interest and	2,293.			2,293.
			-	2,293.			2,293.
	4 Income from investment of tax-ex	xempt	bona proceeds				<u></u>
	5 Royalties	2	(II) Personal		84.124.4	^-/	8503888888 58 3 VA
	6a Gross Rents		11,074.		2012		
:			11,0/4.			1.00	
	b Less rental expenses		11 074				
	c Rental income or (loss)		11,074.	11 074	#7\$\!\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		11 074
	d Net rental income or (loss)	untra a	(ii) Other	11,074.	3 10 /25 " July meter 34 (1/2 1/2	E CHAS (C. S.	11,074.
	7a Gross amount from sales of assets other than inventory	indes	(ii) Other				
	assets other trial inventory		1				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	111				<u></u>	2.7 × 2.5 % 5/45 /	<u> </u>
	• , ,			18	***		
E	8a Gross income from fundraising ev	vents		, , , , , , , , , , , , , , , , , , ,	*		** `
ĒN	of contributions reported on line	10)			i i	`	`.'
RE	See Part IV, line 18	ю. а					*
OTHER REVENU	b Less: direct expenses .						
0	c Net income or (loss) from fundral						
			vents	· · · · · · · · · · · · · · · · · · ·			
	9a Gross income from gaming activi See Part IV, line 19	ties					
	b Less: direct expenses .	. u					
	c Net income or (loss) from gaming	_				<u> </u>	
		_	lies				
	10a Gross sales of inventory, less ret and allowances	urns a					
	b Less: cost of goods sold	b	<u> </u>				
	c Net income or (loss) from sales of	of inver	ntory >				
	Miscellaneous Revenue		Business Code			·	
	11 a			<u> </u>			
	b				- · · · -		
	c			·			
	d All other revenue	·				<u> </u>	
	e Total. Add lines 11a-11d	· ∟	>				
	12 Total revenue. See instructions		•	1,007,105.	971,548.	0.	13,367.
$\overline{}$				<u> </u>			

Page 10

Part IX | Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

		-	
All adhan annoningdiana mondi	aamalata aaluma i	Al but are not required to	o complete columns (B), (C), and (D).
All other organizations must	complete column ((A) but are not required to	o complete columns (b), (c), and (b).

	not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising expenses
<u>ьь,</u> 1	7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	успетат ехрепьеь	evherizez
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	18,000.	18,000.		
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	148,200.	125,970.	22,230.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.1	0.	0.	0.
7	Other salaries and wages	151,899.	125,506.	26,393.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	21,153.	17,980.	3,173.	
	Fees for services (non-employees) .				
	a Management				
	Legal	172.		172.	
	: Accounting	20,175.		20,175.	
	Lobbying				
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees	100 400	165 540	24 051	
	Other	190,499. 42,529.	165,548. 40,979.	24,951. 1,550.	
13	Advertising and promotion Office expenses	7,915.	40,373.	7,915.	
14	Information technology	6,167.		6,167.	
15	Royalties	0,107.		0,107.	
16	Occupancy .				
17	Travel	13,297.	13,297.		
18		=3, = 5			
19	Conferences, conventions, and meetings	10,154.		10,154.	
	Interest	3,811.		3,811.	
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	305.	305.		
	Insurance Other expenses. Itemize expenses not covered above. (Expenses grouped together	54,143.	54,143.		
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	UTILITIES	86,337.	82,020.	4,317.	
	RENT EXPENSE	63,458.	63,458.		
	SECURITY	45,168.	45,168.	_	
	AWARDS & JUDGES- FAIR TIME _	38,416.	38,416.	7	
	MAINTENENCE	32,653.	31,087.	1,566.	
	All other expenses.	110,469.	88,970.	21,499.	
	Total functional expenses. Add lines 1 through 24t	1,064,920.	910,847.	154,073.	0.
20	Joint costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA			<u></u>		Form 990 (2009)

2,489,743.

Form 990 (2009)

Page 11

34

BAA

Total liabilities and net assets/fund balances.

Part X Balance Sheet **(B)** End of year (A) Beginning of year 581,266. 638,651 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 200. 4 Accounts receivable, net. . . . Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. 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 Part II of Schedule L... 6 7 Notes and loans receivable, net. . 8 Inventories for sale or use ... 9 9 Prepaid expenses and deferred charges 1,851,691. 10a Land, buildings, and equipment: cost or other basis. 10a Complete Part VI of Schedule D 10b 305 1,851,092 10 c 1,851,386. **b** Less: accumulated depreciation. 11 11 Investments - publicly-traded securities 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 150. 15 Other assets See Part IV, line 11 15 2,489,743 2,433,002. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities. 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 62,724 23 Secured mortgages and notes payable to unrelated third parties. 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities, Complete Part X of Schedule D 62,806. 62,724 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29 and lines 33 and 34. ASSETS Unrestricted net assets 27 28 Temporarily restricted net assets 29 Permanently restricted net assets Q R X and complete Organizations that do not follow SFAS 117, check here FUZD lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 1,788,368. 31 1,788,368. 31 BALANCES Paid-in or capital surplus, or land, building, and equipment fund. 581,828. 638,651. 32 Retained earnings, endowment, accumulated income, or other funds 2,427,019. 33 2,370,196. 33 Total net assets or fund balances . 2,433,002.

TEEA0111L 01/30/10

7290 Pa	ge 12
Yes	No

Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 X Cash Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?.	2a		Х
b Were the organization's financial statements audited by an independent accountant?	. 2b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aureview, or compilation of its financial statements and selection of an independent accountant?	ıdıt,		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued or consolidated basis, separate basis, or both:	n a		
Separate basis Consolidated basis Both consolidated and separate basis	<u> </u>	ļ <u>.</u>	
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?	е За		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit 3b		

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Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization THE PARK OF EAST TEXAS, INC

DBA EAST TEXAS STATE FAIR

Employer identification number 75-0247290

Par	t I Reaso	n for Pu	blic Charity Statu	is (All organizations	must d	comple	te this	part.)	See i	nstruct	ions		
The c	organization is	s not a pri	vate foundation becau	use it is: (For lines 1 thro	ugh 11,	check o	nly one	box.)					
1	A church	, conventi	on of churches or ass	ociation of churches des	cribed in	section	n 170(b)	(1)(A)(i)) <u>.</u>				
2	A school	described	i in section 170(b)(1) (A)(ii). (Attach Schedule I	E)								
3	A hospita	al or coop	erative hospital servic	e organization described	ın secti	on 170(ьх1хах	iii).					
4	A medica	al research	n organization operate	ed in conjunction with a h	ospital o	describe	d in sec	tion 17	0(b)(1)(A	A)(iii) Er	nter the hos	pital's	š
	_	ty, and sta	•	•	•							•	
5	An organ	nization op	perated for the benefit Complete Part II.)	of a college or university	owned	or oper	ated by	a govei	nmenta	I unit de:	scribed in s	ectio	n -
6	A federa	l, state, or	local government or	governmental unit descri	bed in s	ection 1	70(b)(1)	(A)(v).					
7	An organ	nization the n 170(b)(1	at normally receives a (XAXvi). (Comp <u>l</u> ete P	substantial part of its sulart II)	apport fr	om a go	vernme	ntal uni	t or fron	n the ger	neral public	desc	rıbed
8	=	-		170(b)(1)(A)(vi). (Comple		•							
9	from activinvestme	vities relate ent income	ed to its exempt function	more than 33-1/3 % of its and a subject to certain excess taxable income (less complete Part III.)	eptions. a	and (2) r	o more t	han 33-	1/3 % of	its suppo	ort from aros	S	ıfter
10	An organ	nization or	ganized and operated	exclusively to test for pu	ıblıc safe	ety. See	section	1 509(a)	(4).				
11	more pul describe	blicly supp s the type	orted organizations of of supporting organi	exclusively for the bene- described in section 509(a zation and complete lines	a)(1) or s 11e th	section rough 1	509(a)(2 1h.	2) See	of, or ca section	rry out th 509(a)(3). Check the	ne box	that
	a Typ		b Type II	c Type III		_	-			d	Type III-		
е	By check than four 509(a)(2)	ndátion ma	ox, I certify that the or anagers and other tha	rganization is not controll in one or more publicly s	led direct upportect	tly or in d organi	directly zations	by one describe	or more ed in se	disquali ction 509	fied perso (a)(1) or s	ns oth ection	ier
f	If the orc	janızatıon is box	received a written det	termination from the IRS	that is a	a Type I	, Type II	or Typ	e III sup	porting (organızatıoı	٦,	
g	Since Au	gust 17, 2	2006, has the organiza	ition accepted any gift o	r contrib	ution fr	om any	of the fo	ollowing	persons	?		
_												Yes	No
				controls, either alone or upported organization?	together	with pe	rsons d	escribe	d ın (ıı) a	and (III)	11 g (i)		
	(ii) afa	amily men	nber of a person desc	cribed in (i) above?							11 g (ii)		
	(iii) a 3	5% contro	lled entity of a persor	n described in (i) or (ii) al	bove?						11 g (iii)		
<u>h</u>	Provide 1	the follows	ng information about i	the supported organization	ons.								
	(i) Name of Si Organiza		(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) l organizat (i) listed gove docui	ts the tion in col d in your erning ment?	the organ	(i) of	organizat	s the ion in col zed in the 5 ?	(viı) Amoun	t of Sup	port
					Yes	No	Yes	No	Yes	No			
													_
							_						
		 				ļ							
						<u> </u>							
Tatal													

Pai	til Support Schedule for	_		•	b)(1)(A)(IV) ar	nd 170(b)()(A)((VI)
Sec	(Complete only if you check tion A. Public Support	ed the box on line	5, 7, or 8 of Pai	rt I)				
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')		· · · · · · · · · · · · · · · · · · ·					
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge.							
4	Total. Add lines 1-through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			Ŷ }				
6	Public support. Subtract line 5 from line 4				, \ha		ند	
Sec	tion B. Total Support	Y		1				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10			** ** ** ** ** ** ** ** ** ** ** ** **			٠, ٢, ٠, ١, ٠, ١	
12	Gross receipts from related activ	vities, etc. (see in:	structions) .				12	
13	First five years. If the Form 990 organization, check this box and		ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 5	i01(c)((3)
Sec	tion C. Computation of Pu	blic Support P	ercentage					
14	Public support percentage for 20	009 (line 6, colum	n (f) divided by lii	ne 11, column (f).			14	%_
15	Public support percentage from	2008 Schedule A,	Part II, line 14			Ĺ	15	%_
16 a	33-1/3 support test - 2009. If the and stop here. The organization	e organization did qualifies as a pul	not check the boolicly supported o	ox on line 13, and organization.	the line 14 is 33	3-1/3 % or m	ore, ch	neck this box
t	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a put	not check a box olicly supported o	on line 13, or 16a	, and line 15 is 3		ore, c	heck this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop he	re. Explain ii	ı Part	IV how
t	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	and-circumstance	s' test, check this	box and stop he	re. Explain ii	n Part	15 is 10% IV how the
18	Private foundation. If the organi	zation did not che	eck a box on line,	, 13, 16a, 16b, 17a	, or 17b, check t	his box and	see in	structions.
BAA					Sc	chedule A (Fo	orm 99	90 or 990-EZ) 2009

THE PARK OF EAST TEXAS, INC 75-0247290 Schedule A (Form 990 or 990-EZ) 2009 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support (a) 2005 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal yr beginning in)▶ (b) 2006 (c) 2007 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') 245,560. 41,322 52,849 105,055 24,144 22,190 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt 864, 489. 1, 100, 087. 1, 182, 404 982,622 4,911,096. 781,494 purpose... Gross receipts from activities that are not an unrelated trade or business 0. under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on 0. its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . 0. 5,156,656. 822,816 917, 338. 1, 205, 142. 1, 206, 548. 1, 004, 812 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, 3 received from disqualified 0. 0 0 0 0 0 persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the 0. 0 0 0 0 0 0 0 0 0 0. 0. c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) 5,156,656. Section B. Total Support (c) 2007 (b) 2006 (f) Total Calendar year (or fiscal yr beginning in) ► (a) 2005 (d) 2008(e) 2009 822,816 917,338. 205,142. 1,206,548. 1, 004,812 5,156,656. 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form similar sources 16,416 10,846 15,754 10,949 2,293 56,258. **b** Unrelated business taxable income (less section 511 taxes) from businesses 0. acquired after June 30, 1975 c Add lines 10a and 10b. 16,416 10,846 15,754 10,949 2,293 56,258. Net income from unrelated business activities not included inline 10b, whether or not the business is 0. regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 0. 5,212,914. 13 Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 98.9% 16 Public support percentage from 2008 Schedule A, Part III, line 15 98.3% 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)). 1.1% 17 1.7% 18 18 Investment income percentage from 2008 Schedule A, Part III, line 17

b 33-1/3 support tests – 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18

19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not

is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

► X

Schedule A	A (Fo	rm 9	90 or	990-	EZ) 2	2009	TH	E I	PARK	OF	EAS	ST	TEX	AS,	INC		-	75-02	47290)	Page 4
Part IV	Su	ppl	emei	ntal	Info	rmat	ion.	Co	mple	te th	nış pa	art	to pr	ovide	e the	explanations r additional ir	requi	red by	y Part	II, line	10;
	Pa	ırt II	, line	1/8	or 	1/b;	and	Pa	art III	, line	12.	P	rovide	e any	otne	r additional in	ntorm	ation.	See ir	nstructi	ions.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

Name	of the organization			Employer Identification r	number
	PARK OF EAST TEXAS, INC EAST TEXAS STATE FAIR			75-0247290	
Par		Advised Funds or Other Similar Fund	ds or Acco		ıf
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	_		
		(a) Donor advised funds	(b) Fi	unds and other acco	unts
1	Total number at end of year				
2	Aggregate contributions to (during year)			<u> </u>	
3	Aggregate grants from (during year) .				
4	Aggregate value at end of year				
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in do to the organization's exclusive legal control?	onor advised	Yes	No
6	used only for charitable purposes and not for purpose conferring impermissible private bene		any other	. Yes	☐ No
Par	t II Conservation Easements Comple	ete if the organization answered 'Yes' t	to Form 99	0, Part IV, line 7	7
1	Purpose(s) of conservation easements held by	the organization (check all that apply)			
	Preservation of land for public use (e.g., r	ecreation or pleasure) Preservation o	of an historica	ally important land a	rea
	Protection of natural habitat	Preservation o	of certified his	storic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation contribution in	the form of a		
			- 4	Held at the End of	the Year
	Total number of conservation easements		2a		
	Total acreage restricted by conservation easer		2b		
	: Number of conservation easements on a certif		2c		
0	Number of conservation easements included i				
3	year ►	transferred, released, extinguished, or terminat	lea by the org	ganization during the	elax
4	Number of states where property subject to co	inservation easement is located >	_		
5		garding the periodic monitoring, inspection, har nt it holds?		ations, Yes	No No
6	during the year ►	ng, inspecting, and enforcing conservation ease rspecting, and enforcing conservation easemen	_		_
7	during the year ►	, ,	\$ <u>_</u>		_
8	Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ction 	Yes	☐ No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements.	s conservation easements in its revenue and expento the organization's financial statements that d	se statement, lescribes the	and balance sheet, a organization's accor	ind unting for
Par	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Sim	nilar Assets	
1 a	If the organization elected, as permitted under treasures, or other similar assets held for pub the text of the footnote to its financial statement	r SFAS 116, not to report in its revenue statem lic exhibition, education, or research in furthera ents that describes these items.	ent and balar ince of public	nce sheet works of a service, provide, in	art, historical Part XIV,
t	If the organization elected, as permitted under treasures, or other similar assets held for pub amounts relating to these items:	r SFAS 116, to report in its revenue statement a lic exhibition, education, or research in furthera	and balance ince of public	sheet works of art, I service, provide the	nistorical e following
	(i) Revenues included in Form 990, Part VIII,	line 1		► \$	
	(ii) Assets included in Form 990, Part X			. > \$	
	amounts required to be reported under SFAS	•	or financial g	pain, provide the follo	owing
	Revenues included in Form 990, Part VIII, line		•	. > \$	
t	Assets included in Form 990, Part X	·· · · · · · · · · · · · · · · · · · ·		► \$	

Schedule D (Form 990) 2009 THE I							47290		Page 2
Part III Organizations Mainta	ining Colle	ections o	of Art, Hi	storica	al Treasures, or	Other Similar As	ssets (co	<u>ntınu</u>	ied)
3 · Using the organization's acquisiting items (check all that apply):	on accession	and other	records,	check ar	ny of the following	that are a significant	use of its o	ollecti	on
a Public exhibition			d Lo	an or ex	change programs				
b Scholarly research			e U Ot	her		<u>. </u>			
c Preservation for future gener									
4 Provide a description of the orga Part XIV.			·				ose in		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or ather than to	receive do be mainta	onations o ained as pa	f art, his art of the	storical treasures, o e organization's col	or other similar llection?	Yes	Γ	No
Part IV Escrow and Custodia								t IV.	
9, or reported an amo	unt on For	m 990, F	Part X, II	ne 21.			, , ,	,	
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodia	an, or other	r intermed	ary for	contributions or oth	ner assets not	Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV a	and comple	ete the fol	lowing ta	able				
							Amount		
c Beginning balance					•	1 c			
d Additions during the year						1 d			
e Distributions during the year						1 e			
f Ending balance						1f			
2a Did the organization include an a	mount on Fo	rm 990, Pa	art X, line	21?	• • • •		Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV.								
Part V Endowment Funds Co	mplete if o	rganızatı	ion answ	<u>/ered "</u>	Yes' to Form 99	00, Part IV, line 1	0.		
	(a) Current	t year	(b) Prior	year	(c) Two years back	(d) Three years bad	k (e) F	our years	s back
1 a Beginning of year balance					, , ,	<u> </u>			
b Contributions						A - C - T - T - T - T - T - T - T - T - T		it i	
c Net Investment earnings, gains, and losses .									
d Grants or scholarships.					2 4 25 2 3				342
 Other expenditures for facilities and programs 								2 % X	**
f Administrative expenses .					A. A. C.			<u>}```</u>	الني
g End of year balance .								1.7.	<u> </u>
2 Provide the estimated percentage	_	end balan	ce held as						
a Board designated or quasi-endov	vment 🟲		8						
b Permanent endowment ►									
c Term endowment ►	%								
3a Are there endowment funds not a organization by:	n the posses	sion of the	organizat	ion that	are held and admi	nistered for the		Yes	No
(i) unrelated organizations	•						3a(i)		
(ii) related organizations							. 3a(ii)		
b If 'Yes' to 3a(II), are the related of	organizations	listed as r	equired or	Schedi	ule R?		3b		
4 Describe in Part XIV the intended	d uses of the	organizati	on's endo	vment fi	unds				
Part VI Investments-Land, B	uildings, a	ınd Equi	pment. S	See Fo	rm 990, Part X,	line 10.			
Description of investment		(a) Cost o (inve	r other ba stment)	sıs (b	o) Cost or other basis (other)	(c) Accumulated Depreciation		ook Va	
1 a Land					1,849,293.		1,	849	<u>,293.</u>
b Buildings									
c Leasehold improvements	•						<u> </u>		
d Equipment					2,398.	305	.		<u>,093.</u>
e Other									
Total. Add lines 1a through 1e (Column	n (d) must ed	qual Form	990, Part .	X, colun	nn (B), line 10(c))				<u>,386.</u>
BAA						Sch	edule D (Fo	orm 99	0) 2009

Schedule D (Form 990) 2009 THE PARK OF EAST TEXAS, INC

75-0247290

Page 3

Sche	edule D (Form 990) 2009 THE PARK OF EAST TEXAS, INC	75-024	17290	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
	Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)	•		
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.			
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A	
1	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments 2a			
t	Donated services and use of facilities 2b			
c	Recoveries of prior year grants.			
c	Other (Describe in Part XIV)			
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
a	Investments expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV)			
c	Add lines 4a and 4b	4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Retu	rn N/A	
1	·	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
	Donated services and use of facilities			
	Prior year adjustments . 2b	_ '		
	Other losses 2c			
	Other (Describe in Part XIV) . 2d			
е	Add lines 2a through 2d	. 2e		
3	Subtract line 2e from line 1	. 3	<u> </u>	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investments expenses not included on Form 990, Part VIII, line 7b . 4a			
	Other (Describe in Part XIV)			
-	Add lines 4a and 4b	4c		
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18) t XIV Supplemental Information	5	<u>-</u>	
Com line 4 infor	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this mation.	IV, lines part to p	1b and 2b; forovide any a	Part V, idditional
			-	
		- -		_

Schedule D (Form 990) 2009 THE PARK OF EAST TEXAS, INC Part XIV Supplemental Information (continued)	75-0247290	Page 5
Part XIV Supplemental Information (continued)		
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TEEA3305L 07/10/09

Schedule **D** (Form 990) 2009

BAA

SCHEDULE I

Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990. Governments and Individuals in the United States

OMB No 1545-0047 2009

Inspection

Open to Public

× **2** (h) Purpose of grant or assistance Part II | Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form Employer identification number X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 75-0247290 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) SEE PART IV (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable Enter total number of section 501(c)(3) and government organizations Part I General Information on Grants and Assistance (b) EIN 1 (a) Name and address of organization or government THE PARK OF EAST TEXAS, ١ I ١ 1 1 1 Department of the Treasury Internal Revenue Service 1 Name of the organization 1 1 ١ 1 1 1 1 1 1 ١ ١ 1 1 1 1 t ١ 1

Schedule I (Form 990) 2009

TEEA3901L 02/10/10

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

Enter total number of other organizations

THE PARK OF EAST TEXAS, INC

Page 2

Schedule I (Form 990) 2009 THE PARK OF EAST TEXAS, INC

Part III | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	20	18,000.			
Part IV Supplemental Information. Complete this part to		provide the information required in Part	ion required in Par	I, line 2, and	any other additional information.
<u>PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED</u>	S <u>CRIPTION OF H</u> C	<u>JW GRANTS ARE</u> I	USED	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
THE_EAST_TEXAS_STATE_FAIR_PROVIDES_SCHOLARSHIPS_IN_THE_AMOUNT_OF_\$3,000_(\$750_PER	IDES_SCHOLARS	HIPS_IN_THE_AMO	<u>UNT OF \$3,000</u>	(\$ <u>750</u> <u>Per</u>	
SEMESTER) TO TEN RECIPIENTS EACH YEAR. TO		BE_ELIGIBLE_STUDENT_MUST_BE_A_GRADUATING	DENT MUST BE A	GRADUATING	
SENIOR_FROM_A_PUBLIC, PRIVATE, OR HOME_SCHOOL, MUST_ATTEND_TYLER_JUNIOR_COLLEGE_FOR	OR HOME SCHOK	<u>OL, MUST ATTEND</u>	_TYLER_JUNIOR_	COLLEGE_FOR	
THE NEXT TWO YEARS (2 FALL AND 2 SPRING SEMESTERS) BEGINNING WITH THE UPCOMING FALL	2 SPRING SEM	<u>ESTERS) BEGINNI</u>	NG MITH THE UP	COMING_FALL	
SEMESTER, HAVE COMPLETED A MINIMUM OF 12 CREDIT HOURS PER SEMESTER, AND MUST SUBMIT	VIMUM OF 12 CR	EDIT HOURS PER	SEMESTER, AND	MUST SUBMIT A	
COMPLETED SCHOLARSHIP APPLICATION. THE EAST TEXAS STATE FAIR SCHOLARSHIPS ARE	TON. THE EAST	I TEXAS STATE F	AIR SCHOLARSHI	PS_ARE	
INTENDED_TO_ENCOURAGE_AND_SUPPORT_STUDENTS_	ORT STUDENTS	WITH INTEREST AND POTENTIAL FOR HIGHER	ND POTENTIAL F	OR HIGHER	
EDUCATIONTHE_SELECTION_COMMITTEE_CONSIDERS_A_VARIETY_OF_FACTORS_INCLUDING, BUT_NOT	TTEE CONSIDER	S_A_VARIETY_OF_	FACTORS INCLUD	ING BUT NOT	
LIMITED TO, ACADEMIC ACHIEVEMENT, INVOLVEMENT IN EXTRA-CURRICULAR OR COMMUNITY	SNT, INVOLVEME	<u>NT_IN_EXTRA-CUR</u>	RICULAR OR COM	MUNITY.	
SERVICE ACTIVITIES, EDUCATIONAL GOALS, MOTIVATION, BAA	AL GOALS, MOTIV		AND IN SOME INSTANCES,	, FINANCIAL	Schedule I (Form 990) 2009

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See instructions for Form 990.

Open to Public Inspection

Name of the Organization THE PARK OF EAST TEXAS, INC Employler Identification number

75-0247290

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated

Employees	·								·	
(A) Name and Title	(B) Average hours	Posi	tion (C) call t	hat appi	ly)	(D) Reportable	(E) Reportable	(F) Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
HAYDEN MOORE										
DIRECTOR	0	Х						0.	0.	0.
RUSSELL MORELAND	_	,,						ا ا		•
DIRECTOR	0	X					ļ	0.	0.	0.
J.D. OSBORN		 ,,								•
DIRECTOR	0	X	-					0.	0.	0.
CINDY_SMOAK		١								
DIRECTOR	0	X						0.	0.	0.
GARY SWINDLE		l								•
DIRECTOR	0	Х						0.	0.	0.
DON_THEDFORD	_	١ ا								•
DIRECTOR	0	X				_		0.	0.	0.
GARY TRAYLOR	_									•
DIRECTOR	0	X				_		0.	0.	0.
W.C. EDWARDS		١.,							_	•
HONORARY	0	Х						0.	0.	0.
BEN_FITZGERALD		,,							0	•
HONORARY	0	X						0.	0.	0.
JAMES PERKINS		.,								•
HONORARY	0	Х	-				_	0.	0.	0.
J.B. SMITH		v							0	0
HONORARY	0	Х		_				0.	0.	0.
JAMES WILKINS		v						0.	0.	0.
HONORARY PRESTON SMITH	0	X	-					0.	<u> </u>	
	_			v				_	_	0
PAST CHAIRMAN	1			X		_		0.	0.	0.
JOHN SYKES	40			v	v			140 200	0	0
PRESIDENT	40			X	X			148,200.	0.	0.
GILLIAN BRASFIELD	,			v					0	0
COMMITTEE CHAIR	11			Х				0.	0.	0.
CC BAKER, JR				٠,						0
SECRETARY HAROLD REALED	1			X			_	0.	0.	0.
HAROLD BEAIRD	١ .			v						0
VICE CHAIRMAN	11	<u> </u>		X				0.	0.	0.
HERBERT BUIE	.			ν,				.	0	0
AT LARGE	11			Х				0.	0.	0.
TED CONOVER	,			٠,				_		^
COMMITTEE CHAIR	11		\vdash	Х				0.	0.	0.
KENNETH LEWIS	,			Ţ				<u>, </u>		^
AT LARGE	11			X				0.	0.	0.
RANDY ROBERTS	,			Ţ				_	_	^
AT LARGE	1	<u>. </u>		X	<u> </u>		oxdot	0.	0.	0.

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See instructions for Form 990.

Name of the Organization

Employler Identification number

75-0247290 THE PARK OF EAST TEXAS, INC Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated **Employees** (A) (B) (C) (D) (F) (E) Position (check all that apply) Name and Title Average hours per week Reportable compensation from Reportable compensation from Estimated amount of other amount of othe compensation from the organization and related organizations Individual trustee or director Institutional trustee Officer the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) Highest compensated Key employee DICK SUMMERS X 0. 0. 0. CHAIRMAN 1 LONNY UZZELL 0. TREASURER X 0. 0. FELICITY REEDY X 0. COMMITTEE CHAIR 0. 0. 1 ART TAUCHER X COMMITTEE CHAIR 0. 0. 0.

SCHEDULE O

Supplemental Information to Form 990

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Name of the organization Employer identification number THE PARK OF EAST TEXAS. INC TEXAS STATE FAIR 75-0247290 EAST FORM 990, PART III, LINE 1 - ORGANIZATION MISSION THE PARK OF EAST TEXAS IS A 240 ACRE YEAR-ROUND MASTER PLANNED AREA WHICH INCLUDES EQUESTRIAN FACILITIES, EXHIBITION AND EXPO SPACE, MEETING ROOMS, OPEN DEMONSTRATION AND EDUCATIONAL SPACE, AN AMPHITHEATER, AN EVENTS CENTER, EQUESTRIAN AND PEDESTRIAN TRAILS AND A HOTEL. AN ENVIRONMENTALLY CONTROLLED, MULTI-PURPOSE ARENA IS PLANNED FOR PHASE 1 WITH PLANNED USAGE TO INCLUDE TRADE SHOWS, COMMENCEMENT PROGRAMS, CONVENTIONS, CONCERTS, HORSE SHOWS, CAR SHOWS, AND OTHER EVENTS LEFT TO THE IMAGINATION. THE EAST TEXAS STATE FAIR IS AN ANNUAL FAIR PRODUCED BY THE STAFF AND VOLUNTEERS OF THE PARK OF EAST TEXAS, INC. FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS THE PARK OF EAST TEXAS, INC. (EAST TEXAS STATE FAIR ASSOCIATION) OFFERS UNIQUE EDUCATIONAL OPPORTUNITIES TO YOUTH THROUGH A WIDE VARIETY OF PROGRAMS. ANNUAL SCHOLARSHIPS ARE AWARDED THROUGH THE ETSFA AND THROUGH AN INTERNAL EDUCATIONAL COMPETITION, ACADEMIC RODEO. GRADUATING SENIORS ARE ABLE TO APPLY FOR ETSFA SCHOLARSHIPS TO ATTEND TYLER JUNIOR COLLEGE FOR A \$750 PER SEMESTER STIPEND. UP TO TEN ETSFA SCHOLARSHIPS ARE AWARDED ANNUALLY (\$30,000) TO STUDENTS ATTENDING TYLER JUNIOR COLLEGE. ACADEMIC RODEO PARTICIPANTS WHO PLACE FIRST-THIRD IN ANY COMPETITION ARE ABLE TO APPLY FOR ACADEMIC RODEO SCHOLARSHIPS. THESE SCHOLARSHIPS ARE AWARDED TO BOTH MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS, FOR A TOTAL OF 11 SCHOLARSHIP AWARDS ANNUALLY. THE EAST TEXAS STATE FAIR IS ITS OWN EDUCATIONAL TOOL. STUDENT TOUR GROUPS VISIT THE FAIR ANNUALLY TO TOUR THE VARIOUS EXHIBITS. THESE TOURS ARE THE INITIAL EXPOSURE MANY STUDENTS HAVE TO THE WORLD OF AGRICULTURE, FARMING, AND THE OPPORTUNITY TO DEMONSTRATE TO CHILDREN HOW AGRICULTURE TOUCHES THEIR DAILY LIVES IS AN IMPORTANT LESSON. THE EAST TEXAS STATE FAIR LIVESTOCK SHOW SUPPORTS OVER 3,500 ENTRIES AND HONORS WINNERS WITH CASH PREMIUMS TOTALING OVER \$20,000 PER YEAR.

· . Schedule O (Form 990) 2009	Page 2
Name of the organization THE PARK OF EAST TEXAS, INC	Employer identification number 75-0247290
DBA EAST TEXAS STATE FAIR	· · · · · · · · · · · · · · · · · · ·
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP C	OF OFFICERS, DIRECT
CC BAKER, JR. AND JOEL BAKER ARE FATHER AND SON.	
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZ	ZATIONAL DOCUMENTS
THE ORGANIZATION'S NAME AND BYLAWS WERE CHANGED. APP	PROPRIATE DOCUMENTS WERE FILED
WITH THE TEXAS SECRETARY OF STATE.	
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS	ELECT GOVERNING B
THE BOARD IS ELECTED BY A NOMINATING COMMITTEE MADE U	JP OF PAST EAST TEXAS STATE FAIR
PRESIDENTS.	
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
COPY TO BE REVIEWED AND ACCEPTED BY 15 MEMBER EXECUTI	VE COMMITTEE OF THE BOARD OF
DIRECTORS. THEY WILL BE DISTRIBUTED AT AN EC MEETING	
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVA	
COMPARIBILITY DATA IS USED VIA IAFE, AND THE COMPENS	
BY INDEPENDENT PERSONS.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS I	PUBLICLY AVAILABLE
DOCUMENTS AND POLICIES ARE AVAILABLE UPON REQUEST AT	THE EAST TEXAS STATE FAIR
OFFICE.	

BAA

Schedule O (Form 990) 2009

Schedule 0 (Form 990) 2009 Page 2														
Name of the organization	THE	PARK	OF E	AST TE	XAS, I	NC					r identificat		r	
Name of the organization	DBA	EAST	TEXA	S STAT	<u>E FÁIR</u>			_		 75-0	247290)		
						-		_		 				
										 			- -	
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SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION PAGE 3

THE PARK OF EAST TEXAS, INC DBA EAST TEXAS STATE FAIR

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PART I. LINE 2 - GRANTMAKER'S DESCRIPTION OF HO	W GRANTS ARE USED (CONTINU	JED'
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NEED. STUDENTS AWARDED ETSF SCHOLARSHIPS MUST ENROLL IN AT LEAST 12 CREDIT HOURS PER SEMESTER, MAINTAIN A CUMULATIVE 3.0 GRADE POINT AVERAGE, AND SEMESTERS MUST BE CONSECUTIVE. TJC PROVIDES A REPORT ON EACH STUDENT AT THE END OF EACH SEMESTER, WHICH IS REVIEWED BY ETSF STAFF TO ENSURE COMPLIANCE WITH ELIGIBILITY REQUIREMENTS.

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

Office of the Secretary of State

CERTIFICATE OF AMENDMENT OF

THE PARK OF EAST TEXAS, INC. 37495401

[formerly: EAST TEXAS STATE FAIR ASSOCIATION]

The undersigned, as Secretary of State of Texas, hereby certifies that the attached Articles of Amendment for the above named entity have been received in this office and have been found to conform to law.

ACCORDINGLY the undersigned, as Secretary of State, and by virtue of the authority vested in the Secretary by law hereby issues this Certificate of Amendment.

Dated: 08/18/2009 Effective: 08/18/2009



Hope Andrade Secretary of State

AMENDED ARTICLES OF INCORPORATION OF THE EAST TEXAS STATE FAIR ASSOCIATION

Pursuant to Article 1396-4.03 of the Texas Non-Profit Corporation Act, these Articles of Amendment are filed as follows:

- 1. The name of the Corporation is EAST TEXAS STATE FAIR ASSOCIATION.
- 2. This Amendment alters the following Articles of the Amended and Restated Articles of Incorporation of the EAST TEXAS STATE FAIR ASSOCIATION as follows:

Article One - Article One is amended and restated to provide as follows:

"The name of the Corporation is THE PARK OF EAST TEXAS, INC."

<u>Article Six</u> – Article Six of the Amended and Restated Articles of Incorporation of the East Texas Fair Association is amended to provide as follows:

"The address of the registered office of the Corporation is 2112 West Front Street, Tyler, Texas 75702, and the name of its registered agent at such address is John E. Sykes."

<u>Article Seven</u> - Article Seven of the Amended and Restated Articles of Incorporation of East Texas State Fair Association is amended to provide as follows:

"The number of Directors of the Corporation shall be not less than three (3), with the exact number to be determined by the Board of Directors."

- 3. There are no members of this Corporation.
- 4. On August 13, 2009, the above amendments were adopted at a meeting of the Board of Directors of the Corporation at which each amendment received the vote of a majority of the Directors in office.

Dated: August 13, 2009.

John E. Syk	es, President	

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

Office of the Secretary of State

CERTIFICATE OF FILING OF

THE PARK OF EAST TEXAS, INC.

File Number: 37495401
Assumed Name:
The East Texas State Fair

The undersigned, as Secretary of State of Texas, hereby certifies that the assumed name certificate for the above named entity has been received in this office and filed as provided by law on the date shown below.

ACCORDINGLY the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law hereby issues this Certificate of Filing.

Dated: 09/08/2009

Effective: 09/08/2009

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Hope Andrade Secretary of State

TID: 10342

Phone: (512) 463-5555 Prepared by: Kika Garza

ASSUMED NAME CERTIFICATE

This Assumed Name Certificate is submitted pursuant to the provisions of §§71.101 et seq of the Texas Business and Commerce Code.

- 1. The assumed name under which the business is or is to be conducted or rendered is "The East Texas State Fair."
- 2. The registrant's name as stated in its most recent Amended Articles of Incorporation is "The Park of East Texas, Inc."
- 3. The state, country, or other jurisdiction under the laws of which the registrant was incorporated, organized or associated is the State of Texas and the address of its registered or similar office in that jurisdiction is 2112 West Front, Tyler, Texas 75702.
- 4. The period, not to exceed 10 years, during which the registrant will use the assumed name will be 10 years after the date of filing of this certificate.
- 5. The registrant is a Texas non-profit corporation.
- 6. The address of the registered office of registrant in the State of Texas is 2112 West Front, Tyler, Texas 75702, and the name of its registered agent at such address is John Sykes.
- 7. The county in this state where business is and will be conducted under such assumed name is Smith County, Texas.

EXECUTED this day of				
	The Park of East Texas, Inc., a Texas non-profit Corporation			
	By: John Sykes, President			

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STATE O	F TEXAS	
COUNTY	OF SMITH	

This instrument was acknowledged before me on the _____ day of _____, 2009, by John Sykes, President of The Park of East Texas, Inc., a Texas non-profit corporation, on behalf of said corporation.

Notary Public, State of Texas

After recording return to:

Randall L. Roberts P.O. Box 359 Tyler, TX 75710