

Promotional and Community Event Grant Application

Step 1

Important Information

- **Form Function Note:** In order to go back from a page in the form to a previous page, all required fields on the page must be populated.
- Please read the McKinney Community Development Corporation [Grant Guidelines](#) before completing this application.
- The Grant Guidelines are available on this website or by emailing Info@McKinneyCDC.org.
- A completed application and all supporting documents are required to be submitted via this application for consideration by the MCDC board.
- **Applications must be completed in full, using this form electronically, and received by MCDC by 5 p.m. on the application deadline indicated on the [Grants page](#) of this website.**
- **If you are interested in a preliminary review of your grant request or event idea, please complete and submit the online [Letter of Inquiry](#).**

Organization Information

Name	The Heritage Guild of Collin County
Federal Tax ID Number	75-1602150
Incorporation Date	8/18/1977
Mailing Address	PO Box 583
City	McKinney
State	TX
Zip Code	75070
Phone Number	214-384-7126
Email Address	deanna@chestnutsquare.org
Website	www.chestnutsquare.org
Facebook	https://www.facebook.com/ChestnutSquareHeritageVillage/

Instagram	Chestnut Square Village (@chestnutsquaremckinney) • Instagram photos and videos ...
Twitter	https://twitter.com/squarechestnut
LinkedIn	<i>Field not completed.</i>

Please provide a detailed narrative about your organization including years established, mission, goals, scope of services, staff, successes, contribution to community, etc.

Chestnut Square Historic Village is a collection of six historic homes, a replica of a one-room school house, chapel and store on 2.5 acres just south of the downtown McKinney square. The grounds also include a blacksmith shop, smoke house, and a reception house and reception gardens. The buildings include period artifacts showing how people lived in Collin County from 1854-1940. The Heritage Guild of Collin County oversees Chestnut Square Historic Village. The financial rewards enabled the group to purchase the Dulaney home and the adjacent Dulaney cottage on Chestnut Street. These homes became the foundation of what we today call Chestnut Square Historic Village. In 1974 the Heritage Guild of Collin County was formed to perpetuate the preservation of Chestnut Square Historic Village. The spirit and dedication of our founders still serves as a beacon as we continue to build a living portrait of McKinney and Collin County. Our mission is simply to Celebrate Community, Preserve History, and Inspire the Future.

Organization Type	Nonprofit - 501(c) (Attach a copy of IRS Determination Letter)
IRS Determination Letter	<i>Field not completed.</i>
Noteworthy recognitions or awards in the last two years.	<i>Field not completed.</i>

Representative & Contact Information

Representative Completing Application:

Name	DeAnna Stone
Title	Executive Director
Mailing Address	315 S Chestnut Street
City	McKinney

State	TX
Zip Code	75069
Phone Number	214-384-7126
Email Address	deanna@chestnutsquare.org

(Section Break)

Contact for Communications Between MCDC and Organization:

Name	DeAnna Stone
Title	Executive Director
Mailing Address	315 S Chestnut Street
City	McKinney
State	TX
Zip Code	75069
Phone Number	214-384-7126
Email Address	deanna@chestnutsquare.org

Project Information

Funding - Total Amount Requested	15,000.00
Are matching funds available?	No
Will funding be requested from any other City of McKinney entity (e.g. Visit McKinney, Arts Commission, City of McKinney Community Support Grant)?	No
Have you received or will funding be requested from other organizations /	No

foundations for this event(s)?

Has a request for funding for this Promotional / Community Event been submitted to MDCD in the past five years?

Please list. 2014-2024 Based on documentation

Board of Directors
Mark Miserak, Chair
Melanie Perkins, Vice Chair
Jennifer Druckamiller, Past Chair
Nick Keim, Secretary
Leigh Chamberlain, Treasurer
Robyn Forsythe, Sponsor / Development Chair
Tricia Robles, Department Chair
Paul Miles, Department Chair
Davina Gazo, Department Chair
Tim McClure, Department Chair
Amanda Konersmann, Department Chair
Ian Maclean, Department Chair
Dean Lucas, Department Chair

Leadership Staff
DeAnna Stone, Executive Director
Jim Doyle, Operations Manager
Jamie Seibert, Museum Director
Annie Quinn, Museum Manager

Board of Directors Attachment *Field not completed.*

Leadership Staff Attachment *Field not completed.*

Promotional / Community Event Information

Information provided for promotional / community event for which you are seeking funding.

Date(s) of Event Youth Educational Series TBD; Adult Workshops TBD; Q3/Q4 2024 Farmers Market; Q3/Q4 Ghostly Hauntings; Murder Mystery Dinner; 9/19 Farm to Table Dinner; 12/7-12/8 Holiday Home Tour

Ticket Prices	Home Tours Early Bird \$25; Home Tours Regular \$35; Farmer's Market - No Cost; Ghostly Hauntings - \$25; Farm to Table Dinner - \$125; Youth Settlers Education Series \$30; Living History Adult Workshops \$5-\$30; Murder Mystery with MRT \$50
Describe the target attendee for the event(s)?	Chestnut Square plans events throughout the year that targets a variety of ages and communities.
Is this the first time for this event?	No
If not, what is the history for the event (beginning in what year and how often is event held)?	Holiday Home Tours have occurred annually since 1973; the Farmers Market runs weekly and has for over 15 years, Other events vary from annual to weekly and have been held for several years.
How will the event showcase McKinney for tourism and / or business development?	The Farmers Market brings hundreds of visitors weekly to downtown McKinney primarily from the greater DFW area. The Holiday Home Tour regularly attracts guests from Louisiana, Oklahoma, and Texas each year. Educational programs attract visitors from other North Texas communities such as Allen, Anna, Fairview Frisco, Melissa and Plano. Additionally, all of our events focus on supporting vendors in the McKinney community.
Expected attendance	Varies
Expected number or percentage of attendees coming from outside McKinney	Varies
Location(s) of event(s)	Chestnut Square
Does the event support a non-profit (other than applicant)?	No
What percentage of revenue will be donated(indicate net or gross)?	100% of the Net Revenue will be retained to fund Chestnut Square Operations
Provide a detailed narrative of the event(s) including	Chestnut Square celebrates community, preserves history and inspires the future. We seek to provide avenues to accomplish

mission, goals, activities, schedule, production timeline, goals for growth / expansion, etc.

the mission in cherishing events such as Holiday Tour of Homes, Farm to Table, Prairie Adventure Camps, the McKinney Farmers Market and ways to support community through our beautiful chapel and reception hall. These events have proven to celebrate or mission. In addition, we are looking for opportunities to take the education and history into areas that may not be able to travel to us. Schools, assisted living facilities, and rehabilitation centers. As we age there is something healing as we reflect on stories, history, and we see items that remind us of period in our life that were from our younger years. We want to take Chestnut Travels into these areas and facilities. Our Historified Podcast will travel and share the story across the McKinney area. The Homeschool Community is also an area that can utilize our property on a regular basis. The Vince Pankoke event was a healthy connection of community by teaming up with McKinney Repertory Theater, offering education and affordable ticket pricing, as well as honored history. We will be planning more smaller, affordable events that embrace all the areas of our mission statement.

Specific Marketing Plans and Budget

Provide a detailed marketing plan and budget for the event(s). Plan should also include promotional channels (print ads including publication names, social media, radio, posters, flyers, yard signs, etc.).

Chestnut Square seeks to participate in a wide variety of marketing and advertising activities. Print, social media, radio, posters, flyers and yard signs as well as signage that connects the McKinney Downtown Square to the Chestnut Square Village. In addition, we would like to explore digital billboard options in an effort to connect west of 75 to east of 75. The attached document includes past documentation of advertisements and marketing.

Attach marketing plan

[Chestnut Square Promotional 2024 Grant Request.pdf](#)

Total Promotional Budget

15,000

What percentage of the total marketing budget does the grant represent?

100%

Marketing lessons learned from past (what worked and what did not).

Historically, Chestnut Square has opted for primarily print ads to market their events. Whereas there is a deep respect for the roots and foundation of Chestnut Square, print ads are fabulous tools; however, it can offer a challenge in tracking

results. It is the hope to move towards different initiatives that promote our property and McKinney in general to all individuals that invest in social media, digital, google, print, radio etc. We recently pushed a fabulous social media and digital presence for our Boogie Wonderland event and yet it didn't yield itself in the healthy community representation ticket sales we had hoped. Although it was a successful and fun event. We are learning and developing with the market and will continue to be open to creative solutions.

How will you measure success of your event(s) and marketing campaign? (attendance, website hits, social media indicators, etc.)

As mentioned above, we are moving towards opportunities that will offer additional measuring metrics such as Google Analytics, Social Media Ads, website hits, etc. Currently, our monthly newsletter has an open rate of 50% which is encouraging, and we hope to push opportunities to grow the membership and create value around what is offered for all ages to prompt families to engage with Chestnut Square. This will yield itself in ways to measure ticket sales, awareness around the Farmers Market and launch the new initiatives for homeschool and youth opportunities outside of the amazing Prairie Camps.

Please include examples of past marketing efforts (screen shots of ads, posters, social posts, radio text, etc.)

Please see the attached PDF that includes past examples of marketing efforts.

Additional details related to marketing efforts.

Marketing and advertising are taking a huge priority for the future of Chestnut Square. We are learning from past experiences and trying new efforts to appeal to all walks of life.

Budget

[Chestnut Square MCDC Budget Plan and Request.pdf](#)

What percentage of Project / Promotional / Community Event funding will be provided by the applicant?

00

Are matching funds available?

No

What dollar amount and percentage of Promotional / Community Event funding will be provided by other sources such as sponsorship, registration fees, individual or corporate donations, etc.?

Sponsorship Revenue	Varies per event
Registration Fees	25.00-125.00
Donations	Varies per event
Other (raffle, auction, etc.)	Varies per event
Net Revenue	Varies per event
Metrics to Evaluate Success: Outline the metrics that will be used to evaluate success of the proposed Promotional / Community Event. If funding is awarded, a final report will be required summarizing success in achieving objectives outlined for the event.	Google analytics, social media metrics, QR codes with specific codes to use, simple texting, email distribution, membership, and various measuring tools will be utilized to help identify key performing indicators.
Financial Goals of Promotional / Community Event	
Gross Revenue	Varies per event
Projected Expenses	Varies per Event
Net Revenue	Varies per event
Other Funding Sources	Chestnut Square works to create funding throughout the varies activities, events and opportunities. Tours encourage the exploration of history at a minimal cost of 10.00 per individual as well as our historic ghostly hauntings creating a fun experience for all at 25.00 per ticket. For those that want to invest into the preservation of Chestnut Square and assist with our more intimate fundraisers they may consider Farm to Table and share the experience of the Farmers Market and local chefs creating the ultimate moments of stepping back in time. Educational programs for youth and adults range in price from \$5-\$30. Murder Mystery Dinner is in collaboration with MRT is \$50. Finish the year with honoring how it all began without Holiday Home Tour the first weekend of December. Tour historic homes and become inspired by those homes that are standing the test of time with the thanksgiving of caring owners. The Holiday Home Tour is launched with Christmas in

July for 25.00 per ticket and increases after Thanksgiving to 35.00. Don't miss the workshops for adults or youth and learn a trait that created opportunities for those before us.

Financial Status of Applying Organization

- Provide an overview of the organization's financial status including the projected impact of the event(s) on the organization's mission and goals
- Please attach your budget for the current year and audited financial statements for the preceding two years. If audited financials are not available, please indicate why and attach a copy of the 990 filed with the IRS.

Budget	Chestnut Square Promotional 2024 Grant Request 1.pdf
--------	--

Financial Statements	Chestnut Square Financials 2024.pdf
----------------------	---

W9	Chestnut Square W9 Form 2024.pdf
----	--

IRS Determination Letter (if applicable)	Tax Exempt.pdf
--	--------------------------------

990 Filed with IRS (if applicable)	Chestnut Square Form990Package 2023.pdf
------------------------------------	---

Presentation to MCDC Board of Directors

Completed applications that are eligible for consideration by MCDC will be presented to the board according to the schedule on the [Grants page](#) of this website. Presentations will be limited to five (5) minutes followed by time for Board questions. **Please be prepared to provide the information outlined below in your presentation:**

- Summary of organization and goals
 - Summary of event(s) to include dates, location, ticket prices, target audience, how your event will showcase McKinney, estimated attendance from within and outside of McKinney (and past attendance, if applicable), event features / activities, how event supports your organization's mission, and non-profit beneficiary, if applicable.
 - Specific marketing plans for event(s) including promotional channels to be utilized (print, radio, social media, posters, etc.) and budget for each. Please
-

share the percentage of the total marketing budget that this grant application represents.

Acknowledgements

If funding is approved by the MCDC board of directors, applicant will assure:

- An application is considered complete when it is submitted on time and when it contains all information in this application.
 - The Promotional / Community Event for which financial assistance is sought will be administered by or under the supervision of the applying organization;
 - All funds awarded will be used exclusively for advertising, marketing and promotion of the Promotional / Community event described in this application.
 - MCDC will be recognized in all marketing, advertising, outreach and public relations as a funder of the Promotional / Community Event. A logo will be provided by MCDC for inclusion on all advertising, marketing and promotional materials. Specifics for audio messaging will be agreed upon by applicant and MCDC and included in an executed performance agreement.
 - The organization's officials who have signed the application are authorized by the organization to submit the application.
 - Applicant will comply with the MCDC Grant Guidelines in executing the Promotional / Community Event for which funds were received.
 - Applicant gives permission for the use of Board presentation images and other published event images on MCDC and City of McKinney website and social media content and print/digital publications.
 - Applicant will provide a final report of the Promotional/Community Event(s) no later than 30 days following the completion of the Promotional/Community Event(s). Applicant may choose to use the online form for Final Report found [here](#) or email Final Report to info@mckinneycdc.org. If emailed, Final Report may be in any format. All Final Reports should include: narrative report on the event(s), goals and objectives achieved based on performance metrics outlined in the application, financial data (budget vs. actual expenses and revenues along with explanation for variances, amount donated to charity (if applicable), samples of marketing efforts (images of printed materials and ads, screenshots of website and online promotions), and photos and/or video of the event(s).
 - Grant funding is provided on a reimbursement basis subsequent to submission of a reimbursement request, with copies of invoices and paid receipts for qualified expenses. Up to 20% of the grant awarded may be withheld until the **final report on the Promotional/Community Event is provided to MCDC.**
-

(Section Break)

Applicant Electronic Signature	Selecting this option indicates your agreement with the above statement.
--------------------------------	--

Chief Executive Officer	DeAnna Stone
-------------------------	--------------

Date	5/25/2024
------	-----------

Representative Completing Application	DeAnna Stone
---------------------------------------	--------------

Date	5/25/2024
------	-----------

Notes

- *Incomplete applications or those received after the deadline will not be considered.*
 - *A final report must be provided to MCDC within 30 days of the event / completion of the Promotional / Community Event.*
 - *Final payment of funding awarded will be made upon receipt of final report.*
 - *Please use the [Final Report](#) to report your results. A [PDF version](#) is also available.*
-

CHESTNUT SQUARE

Promotional Grant Q3 and Q4 2024



GOALS AND OBJECTIVES

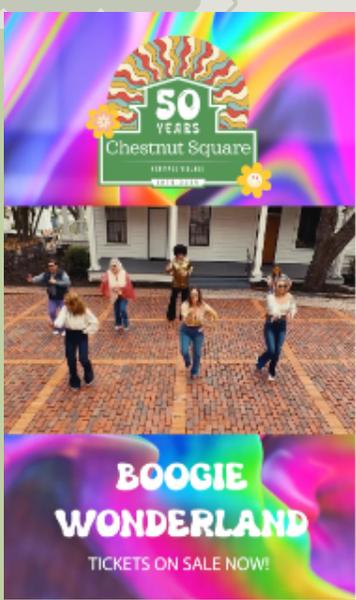
The goals and objectives of promotional grant request is to grow the community of Chestnut Square as well as McKinney as a whole. As we share history, heritage and stories of Chestnut Square it provides everyone with an extension of family.

Written By
DeAnna Stone

315 S. Chestnut Street

McKinney, TX 75069

972-562-8790



HERITAGE VILLAGE AT
CHESTNUT SQUARE
HERITAGE VILLAGE AT CHESTNUT SQUARE

**Prairie Adventure Camp
Summer 2024**

June & July | Ages 7-14
**Sign up for a 3-day
Adventure Camp!**

IT'S MY MCKINNEY
MY BUDGET 100 DOLLARS
IN 2024

**Get
Tickets
Here**

HISTORIC MCKINNEY
FARMERS MARKET
Locally Grown, Historically Charmed!
EVERY SATURDAY

Won Texas in 2023
**Let's WIN
Nationwide!**

**Vote
Here**



**Prairie Adventure Camp
Summer 2024**

June & July | Ages 7-14
**Sign up for a
3-day Adventure Camp!**

Learn how to bake, make butter,
sew, and weave like we used to!

IT'S MY MCKINNEY
MY BUDGET 100 DOLLARS
IN 2024

**Get
Tickets
Here**

www.chestnutsquare.org

Prairie Adventure Camp and the Farmers Market continues to be a highlight of Chestnut Square.

PAST & PRESENT

Celebrating our 50th Birthday offered opportunity to celebrate the 70's and honor the past 50 years.



**Sharing the
story with
our youth!**



Prairie Adventure Camp

Summer 2024

June & July | Ages 7-13

Sign up for a 3-day Adventure Camp!



Voted #1
Farmers Market
in Texas

MCDC
McKINNEY COMMUNITY
DEVELOPMENT CORPORATION

HERITAGE VILLAGE AT CHESTNUT SQUARE

Chestnut Square welcomes you to McKinney!

Claim your FREE Membership!
We're excited to offer you a complimentary 1-year Pioneer Membership to Chestnut Square. Members receive 20% off all events. Scan the QR Code and use Promo Code: DAVIS today!

Heritage Village at Chestnut Square
Visit 10 historic buildings spanning 1854 - 1930 that tell the story of early American life in North Texas.

Voted #1 Farmers Market in Texas
Shop homegrown, harvested, and handmade goods. Every Saturday.

www.chestnutsquare.com

Celebrate with us this Spring at **Boogie Wonderland!**
May 2, 2024
Let's get groovy and celebrate 50 years of preserving McKinney's history.

Prairie Adventure Camp
This summer sign your young explorer up for a 3-day Adventure Camp!
Learn how to bake, make butter, sew and weave like we used to!
June & July | Ages 7-13

Farm 2 Table
Dine in style at this exclusive plated dinner!
Local chefs present a carefully crafted menu partnering with vendors from the McKinney Farmers Market.

Legends of McKinney
Join us for three days of haunts and history as we explore the local lore of Historic Downtown McKinney.

Holiday Tour of Homes
Don't miss the event that started it all!
December 7 & 8
Tour a curated selection of Downtown McKinney's iconic and historic homes.

Scan For More Info!
Follow us on Social Media @chestnutsquaremckinney

Prairie Adventure Camp

Summer 2024

June & July | Ages 7-13

Sign up for a 3-day Adventure Camp!

Voted #1
Farmers Market
in Texas

Visit chestnutsquare.org to learn more

Boogie Wonderland
May 2nd, 2024 / 7 PM - 10 PM
 Celebrating McKinney's History with
 food, drinks, live music, and more!
Get tickets here!

#1 IN TEXAS
 Shop homegrown, harvested,
 and handmade goods.
 Every Saturday, 9am - Noon.

chestnutsquare.org



Farm to Table

RED TOUR
 DEC. 2 & 3

TWO SETS OF HOMES PRESENTS **50 HOLIDAY TOUR OF HOMES** **TWO WEEKENDS**

PURCHASE TICKETS @ CHESTNUTSQUARE.ORG

GREEN TOUR
 DEC. 9 & 10

DAVIS AT THE SQUARE | IT'S MY MCKINNEY | State Farm

Taking a moment to pause and reflect on the past allows us to find gratitude for today and excitement for tomorrow.

Chestnut Square Marketing and Advertising Plan Q3 and Q4	
Farmers Market	
	Expense
Edible	\$435.00
380 Digital Banner	\$1,500.00
Meta	\$250.00
Community Impact Digital	\$320.00
Community Impact Print	\$625.00
Community Impact Newsletter	\$550.00
Housewarmers	\$600.00
Posters and Postcards	\$250.00
Total Requested	\$4,530.00
Farm to Table	
	Expense
380 Digital Banner	\$1,500.00
Posters & Postcards	\$250.00
Local Profile	\$450.00
META	\$250.00
Community Impact Print	\$625.00
KLAKE Radio Advertisement	\$500.00
Total Requested	\$3,575.00
Ghostly Hauntings	
	Expense
Posters and Postcards	\$150.00
Community Impact Newsletter	\$550.00
Community Impact Digital	\$325.00
Community Impact Print	\$635.00
META	\$250.00
Total Spent	\$1,910.00
Holiday Tour of Homes	
	Expense
KLAKE Radio Advertisement	\$500.00
META	\$250.00
Posters & Postcards	\$400.00
380 Digital Banner	\$1,500.00
Community Impact Print	\$623.94
Community Impact Digital	\$155.99
Current Total Spent	\$3,429.93
Youth and Adult Education Events	
	Expense
Facebook Event Post Boost	\$100.00
Facebook Post Boost - Video or Animated Graph	\$100.00
Community Impact Digital	\$300.00
Community Impact Print	\$625.00
Fairview Town News	\$200.00
Current Total Spent	\$1,325.00
Total Request	\$14,769.93

Chestnut Square Marketing and Advertising Plan Q3 and Q4	
Farmers Market	
	Expense
Edible	\$435.00
380 Digital Banner	\$1,500.00
Meta	\$250.00
Community Impact Digital	\$320.00
Community Impact Print	\$625.00
Community Impact Newsletter	\$550.00
Housewarmers	\$600.00
Posters and Postcards	\$250.00
Total Requested	\$4,530.00
Murder Mystery Dinner	
	Expense
380 Digital Banner	\$1,500.00
Posters & Postcards	\$250.00
Local Profile	\$450.00
META	\$250.00
Community Impact Print	\$350.00
KLAKE Radio Advertisement	\$500.00
Total Requested	\$3,300.00
Ghostly Hauntings	
	Expense
Posters and Postcards	\$150.00
Community Impact Newsletter	\$550.00
Community Impact Digital	\$325.00
Community Impact Print	\$635.00
META	\$250.00
Total Spent	\$1,910.00
Holiday Tour of Homes	
	Expense
KLAKE Radio Advertisement	\$500.00
META	\$250.00
Posters & Postcards	\$900.00
380 Digital Banner	\$1,500.00
Community Impact Print	\$623.94
Community Impact Digital	\$155.99
Current Total Spent	\$3,929.93
Youth and Adult Education Events	
	Expense
Facebook Event Post Boost	\$100.00
Facebook Post Boost - Video or Animated Graph	\$100.00
Community Impact Digital	\$300.00
Community Impact Print	\$625.00
Fairview Town News	\$200.00
Current Total Spent	\$1,325.00
Total Request	\$14,994.93

The Heritage Guild at Chestnut Square

Profit and Loss

January - December 2023

	TOTAL
Income	
40000 Grants	63,200.00
40050 MCDC Grant	30,940.23
Total 40000 Grants	94,140.23
41000 Direct Public Support	
41010 Membership Dues	2,255.00
41020 Donations, General Public	6,172.22
41030 Corporate Contributions	56,930.00
41050 Special Purpose Gifts	15,000.00
41060 McKinney Heritage Membership	305.00
Total 41000 Direct Public Support	80,662.22
42000 Program Revenues	
42010 Farmers' Market	86,191.50
42030 Merchandise Sales	1,393.00
42040 Education Programs	2,547.00
42050 Ghostly Haunting	3,955.44
42070 Prairie Camps	11,710.19
42080 Public Village Tour	2,846.88
42090 Tea & Tour	3,470.00
42100 Trolley Tour	656.92
Total 42000 Program Revenues	112,770.93
42500 Event & Fundraising Revenues	
42510 Chester Book Sales Royalties	112.59
42520 Farm to Table Dinner	16,592.45
42550 Ghost Walk	7,637.00
42560 Holiday Home Tour	71,251.72
42580 Murder Mystery	3,914.00
42610 Bar Wars	6,168.40
42699 Other Event/Fund Raising Income	1,039.50
Total 42500 Event & Fundraising Revenues	106,715.66
43000 Facility Rentals	
43010 Weddings	94,065.00
43020 Rentals	6,860.00
Corp Rentals	250.00
Total 43020 Rentals	7,110.00
Total 43000 Facility Rentals	101,175.00
44000 Other Operating Income	
44020 Background Check Fees	-49.20
Total 44000 Other Operating Income	-49.20
45000 Investments	
45030 Interest-Savings, Short-term CD	1,364.30
Total 45000 Investments	1,364.30
Sales	0.00

The Heritage Guild at Chestnut Square

Profit and Loss

January - December 2023

	TOTAL
Total Income	\$496,779.14
GROSS PROFIT	\$496,779.14
Expenses	
61100 Wedding Expenses	10,735.64
61110 Wedding Costs	8,031.56
Total 61100 Wedding Expenses	18,767.20
61200 Programming Expenses	
61210 Farmers' Market Costs	31,922.10
61230 Merchandise Costs	2,387.97
61240 Educational Programs Costs	3,080.09
61270 Tour & Tea Costs	322.96
61290 Prairie Camp Costs	2,405.03
Total 61200 Programming Expenses	40,118.15
61400 Events & Fundraising Expenses	
61420 Farm to Table Dinner Costs	4,338.79
61450 Ghost Walk Costs	1,150.00
61460 Holiday Home Tour Costs	472.17
61470 Ice Cream Crank Off Costs	26.66
61480 Murder Mystery Costs	2,099.62
61490 Bar Wars Costs	531.60
61599 Other Event Costs	366.00
Total 61400 Events & Fundraising Expenses	8,984.84
61600 Business Expenses	100.00
61610 Advertising, PR & Marketing	35,291.12
61611 Advertising - Grant Reimbursable	20,364.00
Total 61610 Advertising, PR & Marketing	55,655.12
61645 Background Check Expense	9.95
61670 Volunteer Relations	928.38
61680 Staff Relations	412.14
Total 61600 Business Expenses	57,105.59
61700 Outside Services	
61740 Outside Contract Services	19,170.50
Total 61700 Outside Services	19,170.50
62000 Facilities and Equipment	14,150.00
62010 Building and Equip Maintenance	2,496.78
62011 Landscaping	14,101.91
62012 Repairs & Maintenance	15,924.09
62013 Cleaning & Maintenance Supplies	15,278.97
62019 Grant Expenses - Structures	12,735.23
Total 62010 Building and Equip Maintenance	60,536.98
62020 Curation	715.97
62030 Equip Rental & Maintenance	108.83
62050 Property Insurance	12,254.31

The Heritage Guild at Chestnut Square

Profit and Loss

January - December 2023

	TOTAL
62060 Utilities	26,964.62
Total 62000 Facilities and Equipment	114,730.71
63000 Office Operations	
63010 Books, Subscriptions, Reference	360.00
63020 Postage, Mailing Service	503.20
63025 Printing and Copying	4,363.17
63030 Supplies	2,992.23
63035 Telephone, Telecommunications	4,230.03
63040 IT Expense	7,750.98
Total 63000 Office Operations	20,199.61
64000 Other Administrative Expenses	
64015 Bank Service Charges	44.00
64020 Credit Card Fees	10,371.11
64021 QuickBooks Payments Fees	2,668.99
64035 Insurance, Liability, D & O	3,465.49
64045 Finance Charges & Late Fees	81.30
64055 Memberships & Dues	1,724.00
Total 64000 Other Administrative Expenses	18,354.89
65000 Payroll Expenses	
65010 Salaries, Staff	102,576.92
65030 Salaries, Wedding Coordinator	57,234.50
65040 Payroll Taxes	11,532.36
65050 Payroll Processing Costs	2,815.01
Total 65000 Payroll Expenses	174,158.79
66000 Reconciliation Discrepancies	-0.01
Total Expenses	\$471,590.27
NET OPERATING INCOME	\$25,188.87
Other Income	
71030 Other Income	81,818.50
Total Other Income	\$81,818.50
NET OTHER INCOME	\$81,818.50
NET INCOME	\$107,007.37

The Heritage Guild at Chestnut Square

Balance Sheet

As of December 31, 2023

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
10000 Petty Cash	50.00
10020 Indep Bank - Operating	163,805.86
10030 Indep Bank - Reserve	104,269.09
10060 PayPal	8,814.98
Total Bank Accounts	\$276,939.93
Accounts Receivable	
11000 Accounts Receivable	2,145.00
Total Accounts Receivable	\$2,145.00
Other Current Assets	
10900 Marketable Securities	75,000.00
12000 Undeposited Funds	1,290.00
Other Receivables	0.00
Total Other Current Assets	\$76,290.00
Total Current Assets	\$355,374.93
Fixed Assets	
15000 Buildings, Furniture and Equip	
15001 Buildings, general	1,162,090.05
15010 Dulaney House	19,353.66
15012 Johnson House	12,469.90
15013 Chapel	12,692.55
15014 Faires House	312.16
15015 Dixie's Store	7,783.78
15016 Taylor Inn	36,723.53
15017 Wilmeth Schoolhouse	89,754.93
15018 405 Reception Hall	152,493.94
15019 Blacksmith Shop	3,931.90
15021 Landscape/Storage Buildings	15,433.39
15022 Visitors Center	150,000.00
15030 Antiques, Furnishings, Artifact	209,208.50
15040 Assets for Rental Business	1,497.00
15099 Accumulated Depreciation	0.00
Total 15000 Buildings, Furniture and Equip	1,873,745.29
Total Fixed Assets	\$1,873,745.29
Other Assets	
18600 Other Assets	0.00
18700 Security Deposits	0.00
Total Other Assets	\$0.00
TOTAL ASSETS	\$2,229,120.22
LIABILITIES AND EQUITY	
Liabilities	

The Heritage Guild at Chestnut Square

Balance Sheet

As of December 31, 2023

	TOTAL
Current Liabilities	
Accounts Payable	
20000 Accounts Payable	0.00
Total Accounts Payable	\$0.00
Credit Cards	
21000 Credit card payable	0.00
21100 Indep MC 3622	2,618.85
Total Credit Cards	\$2,618.85
Other Current Liabilities	
24000 Payroll Liabilities	0.00
24400 Deferred Revenue, Dulaney House	0.00
24450 Wedding Damage Deposit	9,100.00
24500 Deferred Income Billings	
24510 Weddings	31,952.50
24520 Building Rentals	400.00
Total 24500 Deferred Income Billings	\$32,352.50
24600 Insurance Claim Reimbursement	0.00
25500 Sales Tax Payable	0.00
25800 Unearned or Deferred Revenue	0.00
26000 Security Deposits, Other	350.00
27000 Notes Payable	0.00
27100 Due to Officer	0.00
Accrued Expenses	0.00
Other Current Liabilities	0.00
Sales Tax Agency Payable	0.00
STATE COMPTROLLER Payable	0.00
Total Other Current Liabilities	\$41,802.50
Total Current Liabilities	\$44,421.35
Long-Term Liabilities	
27200 Other Liabilities	0.00
Total Long-Term Liabilities	\$0.00
Total Liabilities	\$44,421.35
Equity	
30000 Unrestricted Fund Balance	2,077,691.50
Net Income	107,007.37
Total Equity	\$2,184,698.87
TOTAL LIABILITIES AND EQUITY	\$2,229,120.22

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2023

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning **01/01/2023** and ending **12/31/2023**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization **HERITAGE GUILD OF COLLIN COUNTY TEXAS**
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) **PO BOX 583** Room/suite
 City or town, state or province, country, and ZIP or foreign postal code **McKinney, TX 75069-0583**

D Employer identification number **75-1602150**

E Telephone number **972-562-8790**

F Name and address of principal officer: **Jaymie Pedigo**
PO BOX 583, MCKINNEY, TX 75069

G Gross receipts \$ **578,647**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions.

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.CHESTNUTSQUARE.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1974** **M** State of legal domicile: **TX**

H(c) Group exemption number

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE MISSION OF THE HERITAGE GUILD OF COLLIN COUNTY, TEXAS D/B/A CHESTNUT SQUARE HISTORICAL VILLAGE, IS TO PRESERVE AND PERPETUATE THE (Continued on Schedule O, Statement 1)		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	8
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	9
	6	Total number of volunteers (estimate if necessary)	6	120
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 363,892	Current Year 174,802
	9	Program service revenue (Part VIII, line 2g)	325,101	320,662
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	123	1,364
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	81,819
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	689,116	578,647
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	147,800	171,343
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25)	14,555	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	434,731	300,319
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	582,531	471,662
	19	Revenue less expenses. Subtract line 18 from line 12	106,585	106,985
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 2,113,342	End of Year 2,229,120
	21	Total liabilities (Part X, line 26)	35,651	44,421
	22	Net assets or fund balances. Subtract line 21 from line 20	2,077,691	2,184,699

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date

DeAnna Stone, Executive Director

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check if self-employed

PTIN

Laura Landrum

P02141778

Firm's name **HERITAGE GUILD OF COLLIN COUNTY TEXAS INC**

Firm's EIN

Firm's address **PO BOX 583, McKinney, TX 75069**

Phone no.

214-504-8011

May the IRS discuss this return with the preparer shown above? See instructions

Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

- 1 Briefly describe the organization's mission:
THE MISSION OF THE HERITAGE GUILD OF COLLIN COUNTY, TEXAS D/B/A CHESTNUT SQUARE HISTORICAL VILLAGE, IS TO PRESERVE AND PERPETUATE THE HERITAGE OF COLLIN COUNTY, TEXAS. THE MISSION IS ACHIEVED THROUGH MAINTENANCE OF THE VILLAGE, TOURS OF THE ELEVEN 11 HISTORICAL STRUCTURES AND HISTORICAL ARTIFACTS, EDUCATIONAL PROGRAMMING, PUBLIC EVENTS, AND PUBLIC USE OF THE FACILITIES.
- 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 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? Yes No
 If "Yes," describe these changes on Schedule O.
- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 136,043 including grants of \$) (Revenue \$ 101,175)
WEDDING AND FACILITY RENTALS IN HISTORICAL SETTINGS WHICH EDUCATES THE GUEST ON THE HISTORY OF MCKINNEY, TEXAS AND COLLIN COUNTY. MEETINGS OF HISTORICAL GROUPS INCLUDE SUCH ORGANIZATIONS AS THE DAUGHTERS OF THE CONFEDERACY AND VARIOUS LIVING HISTORY GROUPS.

4b (Code:) (Expenses \$ 127,311 including grants of \$) (Revenue \$ 87,585)
TRADITIONAL LOCAL FARMERS MARKET, TOGETHER WITH A 1907 GENERAL STORE SET IN A HISTORICAL SETTING AND OPEN TO THE PUBLIC. THE GENERAL STORE OPERATES DURING WEEKLY HOURS, SPECIAL TOURS AND AT OTHER TIMES CONSIDERED APPROPRIATE.

4c (Code:) (Expenses \$ 122,226 including grants of \$) (Revenue \$ 131,902)
TOURS, LIVING HISTORY DAYS, EDUCATIONAL PROGRAMS AND ITS HISTORY THROUGH EXPOSURE TO ARCHITECTURE AND ARTIFACTS OF EARLY SETTLERS IN THE AREA.

4d Other program services (Describe on Schedule O.)
 (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses 385,580

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	✓
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	✓
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	✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	✓
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	✓
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	✓
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	✓
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	✓
13	Is the organization a school 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 United States?	14a	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	✓
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		✓
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 Schedule L, Part I		✓
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		✓
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		✓
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		✓
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		✓
29	Did the organization receive more than \$25,000 in noncash 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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	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		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		✓
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	9
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	✓
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	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 as charitable contributions?	6a	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax 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?	7a	
b	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?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	✓
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	✓
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1a	8		
b	Enter the number of voting members included on line 1a, above, who 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?		<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?		<input checked="" type="checkbox"/>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		<input checked="" type="checkbox"/>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
7b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
8a			
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
8b			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		<input checked="" type="checkbox"/>
g			

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
10a			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
11a			
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
12a			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12b			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<input checked="" type="checkbox"/>	
12c			
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
13			
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
14			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
15a			
b	Other officers or key employees of the organization		<input checked="" type="checkbox"/>
15b			
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<input checked="" type="checkbox"/>
16a			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section 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 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.

HERITAGE GUILD OF COLLIN COUNTY TEXAS INC, (972)562-8790

PO BOX 583, McKinney, TX 75069-0583

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants, and Other Similar Amounts	1a Federated campaigns	1a 0					
	b Membership dues	1b 2,560					
	c Fundraising events	1c 0					
	d Related organizations	1d 0					
	e Government grants (contributions)	1e 30,940					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 141,302					
	g Noncash contributions included in lines 1a-1f	1g \$ 0					
	h Total. Add lines 1a-1f		174,802				
Program Service Revenue	Business Code						
	2a Weddings	712100	101,175	101,175	0	0	
	b Special Events	712100	106,716	106,716	0	0	
	c Farmer's Market	712100	87,585	87,585	0	0	
	d Educational Events	712100	18,213	18,213	0	0	
	e Tour & Tea Revenue	712100	6,973	6,973	0	0	
	f All other program service revenue		0	0	0	0	
g Total. Add lines 2a-2f		320,662					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,364	1,364	0	0	
	4 Income from investment of tax-exempt bond proceeds		0	0	0	0	
	5 Royalties		0	0	0	0	
	6a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c	0	0			
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c	0	0			
	d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code						
	11a Employee Retention Credit from IRS	712100	81,819	81,819	0	0	
	b						
	c						
	d All other revenue		0	0	0	0	
e Total. Add lines 11a-11d		81,819					
12 Total revenue. See instructions		578,647	403,845	0	0		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	60,000	48,000	9,000	3,000
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	99,811	88,104	11,659	48
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	11,532	10,412	887	233
11	Fees for services (nonemployees):				
a	Management	0	0	0	0
b	Legal	0	0	0	0
c	Accounting	7,347	0	7,347	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	11,824	550	0	11,274
12	Advertising and promotion	55,655	55,655	0	0
13	Office expenses	13,948	234	13,714	0
14	Information technology	7,751	0	7,751	0
15	Royalties	0	0	0	0
16	Occupancy	114,755	114,755	0	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	3,465	0	3,465	0
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	Tour, Education, and Event Expenses	14,793	14,793	0	0
b	Farmer's Market Expenses	34,310	34,310	0	0
c	Wedding Event Expenses	18,767	18,767	0	0
d	Credit/Bank Processing Fees	13,165	0	13,165	0
e	All other expenses	4,539	0	4,539	0
25	Total functional expenses. Add lines 1 through 24e	471,662	385,580	71,527	14,555
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,597	1	10,154
	2 Savings and temporary cash investments	234,137	2	268,075
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	3,862	4	2,145
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	0	9	0
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,873,746		
	b Less: accumulated depreciation	0		
	11 Investments—publicly traded securities	0	11	75,000
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 33)	2,113,342	16	2,229,120	
Liabilities	17 Accounts payable and accrued expenses	3,131	17	2,619
	18 Grants payable	0	18	0
	19 Deferred revenue	25,295	19	32,352
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	7,225	25	9,450
	26 Total liabilities. Add lines 17 through 25	35,651	26	44,421
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	2,077,691	31	2,184,699
32 Total net assets or fund balances	2,077,691	32	2,184,699	
33 Total liabilities and net assets/fund balances	2,113,342	33	2,229,120	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	578,647
2	Total expenses (must equal Part IX, column (A), line 25)	2	471,662
3	Revenue less expenses. Subtract line 2 from line 1	3	106,985
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,077,691
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	23
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,184,699

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		✓
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization HERITAGE GUILD OF COLLIN COUNTY TEXAS	Employer identification number 75-1602150
--	---

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization 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)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from 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 VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test—2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	145,447	119,565	144,813	316,371	174,802	900,998
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	286,051	208,782	326,068	372,622	320,662	1,514,185
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	431,498	328,347	470,881	688,993	495,464	2,415,183
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6.)						2,415,183

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6	431,498	328,347	470,881	688,993	495,464	2,415,183
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	42	100	98	123	1,364	1,727
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	42	100	98	123	1,364	1,727
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	81,819	81,819
13 Total support. (Add lines 9, 10c, 11, and 12.)	431,540	328,447	470,979	689,116	578,647	2,498,729
14 First 5 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	96.66 %
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	99.98 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	0.07 %
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	0.02 %
19a 33 1/3% support tests—2023. 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 more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support tests—2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		<input type="checkbox"/>

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described on line 11a above?		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D—Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019 . . .		
b	Excess from 2020 . . .		
c	Excess from 2021 . . .		
d	Excess from 2022 . . .		
e	Excess from 2023 . . .		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: HERITAGE GUILD OF COLLIN COUNTY TEXAS; Employer identification number: 75-1602150

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6. Table with columns (a) Donor advised funds and (b) Funds and other accounts. Rows 1-6 with checkboxes for Yes/No.

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Multiple choice and table questions regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8. Questions 1a, 1b, 2, a, b regarding art and historical treasures with dollar amounts.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table.
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment _____ %
 - b** Permanent endowment _____ %
 - c** Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations?
- (ii)** Related organizations?

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0	0	0
b Buildings	1,873,746	0	0	1,873,746
c Leasehold improvements	0	0	0	0
d Equipment	0	0	0	0
e Other	0	0	0	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,873,746

Part VII Investments—Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments—Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Damage Deposits	9,450
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	9,450

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

HERITAGE GUILD OF COLLIN COUNTY TEXAS

Employer identification number

75-1602150

Form 990, Part VI, Section B, Line 11b - FORM 990 PRESENTED TO THE TREASURER TO REPORT ON AT A BOARD MEETING.

Form 990, Part VI, Section B, Line 12c - PERIODIC QUESTIONNAIRE

**Form 990, Part VI, Section B, Line 15 - THE ENTIRE BOARD REVIEWS AND DISCUSSES THE EXECUTIVE DIRECTOR'S
COMPENSATION FOR THE FORTH COMING OPERATING YEAR. THE BOARD HAS THE SOLE AUTHORITY TO MAKE THIS
DECISION.**

Form 990, Part VI, Section C, Line 19 - UPON REQUEST EXCEPT EXECUTIVE COMMITTEE MINUTES

Activity Or Mission Description

Description

HERITAGE OF COLLIN COUNTY, TEXAS. THE MISSION IS ACHIEVED THROUGH MAINTENANCE OF THE VILLAGE, TOURS OF THE ELEVEN 11 HISTORICAL STRUCTURES AND HISTORICAL ARTIFACTS, EDUCATIONAL PROGRAMMING, PUBLIC EVENTS, AND PUBLIC USE OF THE FACILITIES.

Internal Revenue Service

Department of the Treasury

District
Director

Heritage Guild of Collin County Texas
909 West Howell
Mckinney, TX 75069

Person to Contact:
EOMF Tax Examiner
Telephone Number:

214-767-1766
Refer Reply to:

RM:CSB:1200 DAL

Date: NOV 20 1985

EIN: 75-1602150

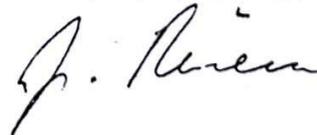
• Gentlemen:

Our records show that Heritage Guild of Collin County Texas is exempt from Federal Income Tax under Section 501(c)(3) of the Internal Revenue Code. This exemption was granted September, 1979, and remains in full force and effect. Contributions to your organization are deductible in the manner and to the extent provided by Section 170 of the Code.

We have classified your organization as one that is not a private foundation within the meaning of Section 509(a) of the Internal Revenue Code because you are an organization as described in Section 170(b)(1)(A)(vi).

If we may be of further assistance, please contact the person whose name and telephone number are shown above.

Sincerely yours,



Tax Examiner

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
 requester. Do not
 send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	The Heritage Guild of Collin County			
	2	Business name/disregarded entity name, if different from above.		
	Chestnut Square			
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.		
	<input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____	
	<input checked="" type="checkbox"/> Other (see instructions) Nonprofit corporation exempt under IRS Code Section 501(c)(3)		(Applies to accounts maintained outside the United States.)	
3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions.			
5	Address (number, street, and apt. or suite no.). See instructions.		Requester's name and address (optional)	
315 Chestnut Street				
6	City, state, and ZIP code			
McKinney, TX 75069				
7	List account number(s) here (optional)			

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-			-			
or									
Employer identification number									
7	5	-	1	6	0	2	1	5	0

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
------------------	--------------------------	------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they