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# Form 990

# **Return of Organization Exempt From Income Tax**

201

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

Open to Public

OMB No 1545-0047

Department of the Treasury

(HTA)

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

•			2010 ca	lendar vear or tax	vear beginning	10	7		and o	nding			шере	Alon
	A For the 2010 calendar year, or tax year beginning , and ending  B Check if applicable C Name of organization ASC-SE ARK ENDOWMENT FUND INC D Employer identification number											,		
ı	_		change	Doing Business A	7,00	SE ARK	-IADOAAI	MEINT FUND	INC					
1	=		-	Number and street		nail ie not de	livered to s	treet address)	Room/suite		71-063624 E Telepho			
ŀ	==	ame ch	•	1	·	nan is not de		acci address)	100m/suite		,			
	=	tial retu		701 MAIN STRE		710 . 4			L	[	<u>(870)536-</u>	3375		
	=	erminati		City or town, state	e or country, and a	ZIP + 4		4.5	- 74004					-
	=	mended		PINE BLUFF	<del></del>			AR	<u>71601</u>		G Gross re			669,300
	] Ai	oplicatio	on pending	' I	address of principa						his a group re		liates?	Yes X No
				ANNETTE KLIN	<u>IE 6809 BRIN</u>	KLEY RO	DAD, PIN			1 ''	all affiliates			Yes No
	ı <u>T</u> a	x-exem	pt status	X 501(c)(3)	501(c) (	) <b>◀</b> (ir	nsert no )	4947(a)(1)	or 527	] If "/	No," attach a	list (see in	structions)	
	J W	ebsite	: ► N/.	A						H(c) Gro	oup exemptio	n number 🛚	<u> </u>	
	<b>K</b> Fo	rm of o	rganizatio	n X Corporation	Trust	Association	n Ott	ner 🕨	L Yea	ar of forma	ation 1986	s M Sta	ate of legal dor	micile AR
-		art I		ımmary		<u> </u>					1300			
		1		describe the orga	nization's mis	ssion or m	nost sign	ificant activit	ies PRO	VIDE C	PERATIN	IG SLIPE	ORT TO T	HE ARTS 8
		•	-	CE CENTER FO			-	oant activit	1110	, <u>, , , , , , , , , , , , , , , , , , </u>	X1. <del>5</del> 143111	0 001 1	9111191	
	g		.991511	<u> </u>	100011101	51.700.000	19119							
	Jan													
	ver	2	Check	this box ▶ if	the organization	discontinu	ed its oper	ations or dispos	od of more the	on 25% o	fute not acce	 te		
	Activities & Governance	3		er of voting memb	-			-	eu oi more ura	ali 23 /6 U	1 113 1161 0336	3 3		0
	<b>୬</b>	4		er of independent					t_\/!ling-1h	Δ	•	4		9
	vitie	5		iumber of individu	•					')		5		0
	Acti	6	Total n	umber of volunte	ers (estimate	if necess	anv)		101			6		
	•	7a	Total	inrelated business	s revenue from	n Part VI	ll columi	n (C) line 12		•		7a	<del></del>	0
		ь	Net un	related business	taxable incom	ne from F	orm 990	Tiline 34	011		_	7b		0
							1				Prior Year	1 - 1	Curren	t Year
		8	Contril	outions and grants	s (Part VIII, lir	ne 1h)		GDEN,	IIT			3,001		1,820
	une	9		ım service revenu				JGDLIV,				0		0
	Revenue	10	_	ment income (Par		•	3, 4, an	d 7d) .			-	68,700		59,429
	Œ	11	Other	revenue (Part VIII	, column (A),	lines 5, 6	d, 8c, 9c	, 10c, and 1	1e)			0		0
ගු		12	Total re	evenue-add lines 8	3 through 11 (m	nust equal	Part VIII,	column (A), lii	ne 12)			65,699		61,249
SCANNED		13	Grants	and similar amou	unts paid (Par	t IX, colu	mn (A), l	nes 1–3)			1	08,051		89,268
Z		14 Benefits paid to or for members (Part IX, col										0		0
	S.	15		s, other compensat					s 5–10)			0		0
	Sus	16a		sional fundraising	•	-	• •	•			W. C	0		0
	Expenses	b		undraising expens						C STA			fre in the second	
AUG	ш	17		expenses (Part IX				•		<u> </u>		34,190		89,515
မ		18		expenses Add line				olumn (A), lı	ne 25) .	<u> </u>		42,241		<u>178,783</u>
0	<del></del>	19	Reven	ue less expenses	Subtract line	e 18 from	line 12	<u> </u>	•	<del> </del>		07,940	<del></del>	<u>-117,534</u>
~	ts or	20	Tatala	anata (Dart V. Iva	- 46\					Beginn	ing of Curre		End of	
2011	\sse Bal	20		assets (Part X, lini iabilities (Part X, I	•				-	<u> </u>	3,9	88,154		3,870,620
	Net / Fund	21 22		sets or fund balar	•	t line 21 f	rom lino	20	•		2.0	0 88,154		0 3,870,620
	Pa			gnature Block	ices. Subtrac	tille 211	TOTT III TE	20	<del>.</del>	.L	3,5	00, 134	· · · · · · · · · · · · · · · · · · ·	3,670,020
				ury, I declare that I have	e examined this r	eturn includ	ling accomi	anving schedule	es and stateme	nts and to	n the hest of	ny knowler	fae	
				rrect land complete De									.gc	
	C:~			1 Corne	te Klin		_					8-11-	11	
	Sig			Signature of officer							Date	- <del></del> :		
	Her	е		ANNETTE KLIN	NE				BOA	ARD PR	ESIDENT			
				Type or print name a	and title									
			Pr	nnt/Type preparer's nar	ne	Pr	eparer's sig			Dat	e	Check [	PTIN	
	Pai			ILLIAM D MOSS	CPA	1.	1/1/	1 DM	SS, CPR	۱	/9/2011	self-emple		157899
		pare	, s _		SS, BURKS, N	1088 8 0								01000
	Use	Onl	y —						004		Firm's EIN			
				rm's address ► 123				-			Phone no	(8/0)5	34-2728	
	May	the II	RS disc	uss this return wit	h the prepare	r shown a	above? (	see instruction	ons) .				X Ye	es No
	For	Paper	work Re	duction Act Notice	see the sepa	rate instru	uctions.						For	m <b>990</b> (2010)

_	90 (2010) ASC-SE ARK ENDOWMENT FUND INC	71-0636240	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		<u>·</u>
1	Briefly describe the organization's mission:		
	PROVIDE FINANCIAL SUPPORT TO THE ARTS & SCIENCE CENTER FOR SOUTHEAST ARKANSAS		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	_lf "Yes," describe these new services on Schedule O	·- <u> </u>	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	ГЛ <i>.,</i>	<u> </u>
	services?	· L Yes	X No
4	If "Yes," describe these changes on Schedule O  Describe the exempt purpose achievements for each of the organization's three largest program services	hy evnences	
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am		d
	allocations to others, the total expenses, and revenue, if any, for each program service reported	ount or granto an	
4a	(Code ) (Expenses \$ 33,594 including grants of \$ 33,594 ) (Revenue	e \$	0)
	GRANTS AWARDED TO THE ARTS & SCIENCE CENTER FOR SOUTHEAST ARKANSAS FOR SPEC	IFIED ART EXHI	BITS,
	PLAY PERFORMANCES, AND EXTRACURRICULAR EDUCATION ACTIVITIES		
			<b>-</b>
			<b></b>
	,		
4b	(Code ) (Expenses \$ 55,674 including grants of \$ 55,674 ) (Revenue		0)
	GRANTS AWARDED TO THE ARTS & SCIENCE CENTER FOR SOUTHEAST ARKANSAS FOR GENE		
	AND AMOUNTS EXPENDED TO MAINTAIN FACILITIES		
			· <b></b> <sup>-</sup>
		·	
4c	(Code ) (Expenses \$ 74,131 including grants of \$ 0 ) (Revenue	ie \$	0)
	DEPRECIATION ON FACILITIES PROVIDED TO THE ARTS & SCIENCE CENTER FOR SOUTHEAST	ARKANSAS	- <b></b>
			·
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
<u>4e</u>	Total program service expenses ► 163,399		

# 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	Х	<del></del> _
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	_ 2		_X_
_	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
_	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			-
_	complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," complete Schedule D, Part IV	9	x	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	9	$\widehat{}$	
11	quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	1.88**~a.h. d
	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Χ
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
13	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		_X
	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	14a		Х
-	business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		x.
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
16	organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		X
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		X´
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		Х
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		_X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

# O ASC-SE ARK ENDOWMENT FUND INC Checklist of Required Schedules (continued) Part IV

ited States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II ganization report more than \$5.000 of grants and other assistance to individuals in the lates on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .  22 riganization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the look control and former officers, directors, trustees, key employees, and highest compensated se? If "Yes," complete Schedule J grants and in the last day of the year, that was issued after December 31, 2002? If "Yes," camplete Schedule X If "Yoe," go to line 25 grantzation mental an escrow account other than a refunding escrow at any time during the year early tax-exempt bonds?  24d and complete Schedule X If "Yoe," go to line 25 grantzation mental an escrow account other than a refunding escrow at any time during the year early tax-exempt bonds?  25d riganization and so the series of issues for bonds outstanding at any time during the year?  25d riganization and uring the year? If "Yes," complete Schedule L, Part II ganization aware that it engaged in an excess benefit transaction with a disqualified person in a right and the report of the organization of the organization's tax year? If "Yes," complete Schedule L, Part II ganization provide a grant or other assistance to an officer, director, trustee, key employee, and contributor, or a grant selection committee member, or to a person related to such an individual? complete Schedule L, Part II granization a party to a business transaction with one of the following parties Schedule L, Part II granization aparty to a business transaction with one of the following parties Schedule L, Part II granization aparty to a business transaction with one of the following parties Schedule L, Part II granization aparty to a business transaction with one of the following parties Schedule L, Part II granization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M granization receive ontrollu	m 990	(2010)
ited States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II ganization report more than \$5,000 of grants and other assistance to individuals in the ates on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.  22 riganization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the ton's current and former officers, directors, trustees, key employees, and highest compensated as? If "Yes," complete Schedule J granization have a tax-exempt bond issue with an outstanding principal amount of more than as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines yip 24d and complete Schedule X If "No," go to line 25 granization maintain an escrow account other than a refunding escrow at any time during the year ganization maintain an escrow account other than a refunding escrow at any time during the year ganization maintain an escrow account other than a refunding escrow at any time during the year ganization and as an "on behalf of" issuer for bonds outstanding at any time during the year? granization aware that it engaged in an excess benefit transaction with a disqualified person in a r, and that the transaction has not been reported on any of the organization's prior Forms 990 or If"Yes," complete Schedule L, Part I I an to or by a current or former officer, director, trustee, key employee, highly compensated employee, or depension outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II and to risk year or a grant as election committee member, or to a person related to such an individual? complete Schedule L, Part II organization a party to a business transaction with one of the following parties (see Schedule L, Part IV member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule N, 21 and 12 and 12 and 12 an		
tied States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II ganization report more than \$5,000 of grants and other assistance to individuals in the lates on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .  22 ganization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the lons current and former officers, directors, trustees, key employees, and highest compensated eas? If "Yes," complete Schedule J grants and the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines igh 24d and complete Schedule X If "No," go to line 25 grantsation for the state of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines igh 24d and complete Schedule X If "No," go to line 25 grantsation for the state of the last ease of the several bonds of the last ease and the state of the last ease of the several bonds? granization maintain an escrow account other than a refunding escrow at any time during the year? granization and soft(c)(a) organizations. Did the organization engage in an excess benefit transaction significant engaged in an excess benefit transaction with a disqualified person in a r, and that the transaction has not been reported on any of the organization's prior Forms 990 or If "Yes," complete Schedule L, Part I I granization provide a grant or other assistance to an officer, director, trustee, key employee, highly compensated employee, or ed person outstanding as of the end of the organization's key year? If "Yes," complete Schedule L, Part IV granization a party to a business transaction with one of the following parties (see Schedule L, Part IV granization and party to a business transaction with one of the following parties (see Schedule L, Part IV granization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, 228 and 11 granization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, 229 and 11 granizat	<del>'   -</del>	X
ited States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II ganization report more than \$5,000 of grants and other assistance to individuals in the lates on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III ganization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the lone's current and former officers, directors, trustees, key employees, and highest compensated lass? If "Yes," complete Schedule J lass of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines ligh 24d and complete Schedule K II "No." go to line 25 ganization invest any proceeds of tax-exempt bonds beyond a temporary period exception? ganization invest any proceeds of tax-exempt bonds beyond a temporary period exception? ganization asserved as an "on behalf of" issuer for bonds outstanding at any time during the year? ganization during the year? If "Yes," complete Schedule L, Part I ganization aware that it engaged in an excess benefit transaction with a disqualified person in a r, and that the transaction has not been reported on any of the organization's pnor Forms 990 or If "Yes," complete Schedule L, Part II an to or by a current or former officer, director, trustee, key employee, or ed person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III organization aparty to a business transaction with one of the following parties (see Schedule L, ganization aparty to a business transaction with one of the following parties (see Schedule L, ganization receive in the parties of the parties o	,	
ited States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II ganization report more than \$5,000 of grants and other assistance to individuals in the lates on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 ganization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the lon's current and former officers, directors, trustees, key employees, and highest compensated eas? If "Yes," complete Schedule J 23 ganization have a tax-exempt bond issue with an outstanding principal amount of more than as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 19/2 24d and complete Schedule K If "No." go to line 25 ganization invest any proceeds of tax-exempt bonds beyond a temporary period exception? ganization invest any proceeds of tax-exempt bonds beyond a temporary period exception? ganization earlied of "issuer for bonds outstanding at any time during the year? ganization earlied person during the year? If "Yes," complete Schedule L, Part I are any tax-exempt bonds? (and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction squalified person during the year? If "Yes," complete Schedule L, Part II are not or by a current or former officer, director, trustee, key employee, or ed person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II ganization provide a grant or other assistance to an officer, director, trustee, key employee, all contributor, or a grant selection committee member, or to a person related to such an individual? complete Schedule L, Part IV member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M ganization liquidate, terminate, or disso		1
ited States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II reganization report more than \$5,000 of grants and other assistance to individuals in the lates on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	5	X
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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question 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 in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	ļ	:	
_	gaming (gambling) winnings to prize winners?	1c	X	
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 envised by this return.	1		
<b>L</b>	Statements, filed for the calendar year ending with or within the year covered by this return  [2a]  [7]  [8]  [8]  [8]  [9]  [9]  [9]  [9]  [9	2b		
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	20		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b		<del>                                     </del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		}	
	account)?	4a		X
b	If "Yes," enter the name of the foreign country.	l	}	Ì
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		ļ	<u> </u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c	_	X
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		<del> </del>
va	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		-	<u> </u>
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<b> </b>	
	and services provided to the payor?	7a	L	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7-		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c	<del> </del>	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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	L	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		<u></u>	<u> </u>
_	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	00	├	X
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b	<u> </u>	\^
10	Section 501(c)(7) organizations. Enter	"		<del>  ^`</del>
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	]		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	1		-
þ	Gross income from other sources (Do not net amounts due or paid to other sources	1	1	-
12-	against amounts due or received from them )	120	<del> </del> -	
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a	<del> </del> -	+
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	┪		Ì
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del>                                     </del>	T
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans	1		1
С	Enter the amount of reserves on hand	—	<u> </u>	1
14a	Did the organization receive any payments for indoor tanning services during the tax year? .	14a	<del>  -</del>	<u> ×</u>
n	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an evolunation in Schedule O	1446	. 4	1

Section A. Governing Body and Management

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Check if Schedule O contains a response to any question in this Part VI

X	

				Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9 💯						
b	Enter the number of voting members included in line 1a, above, who are independent .	1b	9		,				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relat	onship with		:	, ,				
	any other officer, director, trustee, or key employee?	:	2		X -				
3	Did the organization delegate control over management duties customarily performed by or unc								
	supervision of officers, directors or trustees, or key employees to a management company or o		3		Χ.				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 v		4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization	n's assets?	5		X				
6	Does the organization have members or stockholders?		6		Х				
7a	Does the organization have members, stockholders, or other persons who may elect one or mo	ore members	7a		X				
	of the governing body?								
b	Are any decisions of the governing body subject to approval by members, stockholders, or other		7b	Parameter!	X				
8	Did the organization contemporaneously document the meetings held or written actions undert	aken during							
	the year by the following		2.5.7		الشتثا				
a	The governing body?	• •	8a_	X	<u> </u>				
b	Each committee with authority to act on behalf of the governing body? .	ha rooshad	8b		<del></del>				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot at the organization's mailing address? If "Yes," provide the names and addresses in Schedule		9						
Soot	ion B. Policies (This Section B requests information about policies not required by the				<u> </u>				
<u> </u>	ion b. Foncies (This Section D requests information about policies not required by the	internal Neveriu	e code )	Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?		10a	103	X				
b	If "Yes," does the organization have written policies and procedures governing the activities of	such chanters	104		<u> </u>				
_	affiliates, and branches to ensure their operations are consistent with those of the organization	•	10b	ł	ļ				
11a	1a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the								
	form?	g	11a	×					
b	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a									
b									
	rise to conflicts?								
С	Does the organization regularly and consistently monitor and enforce compliance with the police	y? If "Yes,"							
	describe in Schedule O how this is done		12c	X					
13	Does the organization have a written whistleblower policy?		13	L	X				
14	Does the organization have a written document retention and destruction policy?	•	14	WWV 44 W.	X				
15	Did the process for determining compensation of the following persons include a review and approximately approxima								
	independent persons, comparability data, and contemporaneous substantiation of the delibera	tion and decision		4.53					
а	The organization's CEO, Executive Director, or top management official.		15a	<u> </u>	X				
b	Other officers or key employees of the organization	•	15b	SALE OF THE REAL PROPERTY.	X				
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)				12.3				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar an with a taxable entity during the year?	rangement	46-	25.1					
<b>L</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization t	o ovoluoto	16a	Marie Sant X	X				
b	its participation in joint venture arrangements under applicable federal tax law, and taken steps			200	,				
	the organization's exempt status with respect to such arrangements?	to saleguaru	16b		السمعهدية				
Sect	ion C. Disclosure	<u> </u>	[ 160	Ь	<u> </u>				
17	List the states with which a copy of this Form 990 is required to be filed ► AR								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	1 990-T (501(c)(3	)s only)						
. •	available for public inspection. Indicate how you make these available. Check all that apply		, = =						
	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing docum	ents, conflict of in	iterest						
	policy, and financial statements available to the public.								
20	State the name, physical address, and telephone number of the person who possesses the bo	oks and records	of the		4				
	organization LENORE SHOULTS	970 520							
	701 MAIN STREET, PINE BLUFF, AR 71601			· ·	·				

Form 990 (2010)	ASC-SE ARK ENDOWMENT FUND
/==/	VOO OF WIN FIADO MARIA I DIAD

Page 7

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors Check of School via Contractors

Check if Schedule O contains a response to any question in this Part VII.

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)	(B)			((	C)			(D)	(E)	(F)
Name and Title	Average			chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) ANNETTE KLINE PRESIDENT	1.	х		х				0	0	0
(2) NAN SIMMONS SECRETARY	1	х		x				0	0	0
(3) MAC BELLINGRATH BOARD MEMBER	1	X						0	0	0
(4) JOE CLEMENT VICE PRESIDENT	1	х		x				0	0	0
(5) JULIA LAMB BOARD MEMBER	1	х						0	0	0
(6) HELEN CLAIRE BROOKS BOARD MEMBER	1	x						0	0	0
(7) ADAM ROBINSON, JR ASC CHAIR	1.		x					0	0	0
(8) SAMMYE OWEN ASC PAST CHAIR	1		х					0	0	0
(9) CAROL JONES ASC TREASURER	1		х					0	0	0-
(10) BECKY SIMPSON BOARD MEMBER	1							0	0	0
(11)										-
(12)										
(13)										
(14)	:									·
(15)								,		
(16)										-

Pa	(A)	(B)	npio	yee		<u>na 1</u> C)	nigne	est	(D)	(E)	s (coi	nunue	(F)	
	Name and title	Average hours per week		T :-	checi	k all t	that app		Reportable compensation from	Reportab compensal from relat	tion	am	imated ount of other	
		(describe hours for related organizations in Schedule O)	Individual trustee or director	institutional trustee	Officer	y employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	organizatio (W-2/1099-N	ons	comp fro orga and	pensation om the anization related nizations	
(17)				- 1		-	-							_
(18)														
<u>(19)</u>														
(20)								_						_
(21)					_									_
(22)														
(23)				ļ						-				_
(24)				-										
(25)										<del></del>				—
(26)										<u> </u>				_
(27)				-										_
(28)				<u> </u>										_
1b	Sub-total	Cootion A	L.,_	1		<u> </u>		•	C	<del></del>	0			0
c d	Total from continuation sheets to Part VII, Total (add lines 1b and 1c)	Section A				•	•	•	<u> </u>	+	0 0			0
2	Total number of individuals (including but not reportable compensation from the organization		liste	d at	ove 0	e) wl	ho red	ceiv		<u> </u>				
	reportable compensation from the organization				U	-				. <u> </u>		· I	Yes N	10
3	Did the organization list any <b>former</b> officer, diemployee on line 1a? If "Yes," complete Sche					yee,	, or h	ghe	est compensate	ed		3		X
4	For any individual listed on line 1a, is the sum	of reportable o	ompe	ensa	atior						-			
	the organization and related organizations greated individual	eater than \$150,	,000°	? If '	'Yes	s," c	omple	ete	Schedule J for	such		4		<u>x</u>
5	Did any person listed on line 1a receive or act for services rendered to the organization? If "									ndıvıdual		5		 X
Sec	tion B. Independent Contractors											·		_
1	Complete this table for your five highest components to from the organization	ensated indepe	ender	nt co	ontra	acto	ors tha	at re	eceived more th	an \$100,00	)0 of			
	(A) Name and business add	Iress							(B) Description of se	rvices	(	(C) Compen		
														0
					_			<u> </u>	<del></del> :					0
									<del></del>	<del></del>				0
		<del></del>								<del></del>				0,
2	Total number of independent contractors (including than \$100,000 in compensation from the		nited •		thos	e lis	sted a		ve) who receive	ed			·····	

Part	VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इं इं	1a	Federated campaigns	1a	0				
ts, grants amounts	b	Membership dues	. 1b	0				
s, g	С	Fundraising events .	<u>1c</u>	0				ļ
gift Iar	d	Related organizations .	. <u>1d</u>	0				ļ
ini	е	Government grants (contribution	s) . <u>1e</u>	0				
tioi er s	f	All other contributions, gifts, grad	nts, and	-				,
Contributions, gifts, grants and other similar amounts		similar amounts not included ab-	ove . 1f	1,820				
Contr and c	g	Noncash contributions included in li	nes 1a-1f. \$	0				
<u>5</u> <u>5</u>	<u>h</u>	Total. Add lines 1a-1f .	<u> </u>	▶	1,820			
a n			ļ	Business Code				
ven	2a				0			
Re	b				0			
VICE	С				0			
Ser	d				0			
E	е				0	L		
Program Service Revenue	f	All other program service revenu	ıe.		0			
	g	Total. Add lines 2a-2f			0			
	3	Investment income (including di	vidends, interest	t, and				ł
		other similar amounts) .		•	48,541			
	4	Income from investment of tax-e	exempt bond pro	ceeds >	0		<u> </u>	<u> </u>
	5	Royalties			0		<u> </u>	<u></u>
			(i) Real	(II) Personal				
	6a	Gross Rents .						
	b	Less: rental expenses .						
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss) .	<del></del>	<u> </u>	0			
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	618,939	0				
	ь	Less: cost or other basis						
		and sales expenses .	608,051	0				
	С	Gain or (loss)	10,888				<b> </b>	ļ <u> </u>
	d	Net gain or (loss) .	•	_ <del>.</del>	10,888			ļ
Other Revenue	8a	events (not including \$ of contributions reported on line	1c).					
Ę	١.	See Part IV, line 18		0	ł			
δ		•	<b>b</b>	0				- <del></del>
		Net income or (loss) from fundra	-	<u> </u>	0		<del> </del>	<del> </del>
	ya	Gross income from gaming active See Part IV, line 19				ļ		
				0	ł			
		Less direct expenses .  Net income or (loss) from gamir			0			ļ
		, , ,	ig activities	_ <del>`</del>	<u>-</u>		<u> </u>	
	Tua	Gross sales of inventory, less returns and allowances.	_	,		]		
			b	0		}		
		Less cost of goods sold		<u> </u>	0		<del>                                     </del>	<u> </u>
	<del>├</del>	Net income or (loss) from sales  Miscellaneous Revenue	or inventory	Business Code	<del>                                     </del>		<del> </del>	<del> </del>
	11-	_ <del></del>		Dusiliess Code		<del> </del>		<b> </b>
					0	<del></del>	<del> </del>	<del> </del>
	b			<del></del>	- 0	<del></del>	<del>                                     </del>	<del>                                     </del>
	ت	All other revenue			0	<del></del>	<del>                                     </del>	<del> </del>
	d	Total. Add lines 11a–11d						<del>                                     </del>
	12	Total revenue. See instructions			61,249			
	, , ,	Total Totalide, Occ Instructions	<u> </u>		1 01,243		<u> </u>	/i

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	) but are not require	ed to complete coll	imns (B), (C), and (	D)
	not include amounts reported on lines 6b, 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 governments and				
	organizations in the U.S. See Part IV, line 21 .	89,268	89,268		
2	Grants and other assistance to individuals in	,			
	the U.S. See Part IV, line 22 .	ol			
3	Grants and other assistance to governments,				·
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	l ol		1	
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,		-		
•	trustees, and key employees	ol			
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and			ľ	
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	0		7	
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	ol			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees).		<u>-</u>		
· .	Management	o			
b	Legal	0			· · · · · ·
c	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees .	15,209	<u> </u>	15,209	
g	Other	15,209	<del></del>	10,203	
12	Advertising and promotion	0			
13	Office expenses	0	<del></del>		
14	Information technology	0			<del></del>
15	Royalties	0			
16	Occupancy .				
17	Travel	0			
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials	١			
40	Conferences, conventions, and meetings.	0			<del></del>
19 20	Interest	0			
20 21	Payments to affiliates			-	
22	Depreciation, depletion, and amortization	74,131	74,131	- 0	0
23		74,131		<del> </del>	
23 24	Other expenses Itemize expenses not covered	<u> </u>			<del></del>
44	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O)				
_	DEAL FOTATE TAYED	175		175	
a		0	<del></del>	1/3	
b		0	<del> </del>		
۲ C	-,	0			
d	•••••		ļ		
e	All other expenses	0	<del> </del>		
of or	All other expenses	470 700	400,000	45.004	
<u> 25</u>	Total functional expenses. Add lines 1 through 24f	178,783	163,399	15,384	0
26	Joint costs. Check here ▶ if following				
	SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column	)	Ĭ	j i	
	(B) joint costs from a combined educational				
	campaign and fundraising solicitation	1	1	ı l	

Pa	irt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing .				1	
	2	Savings and temporary cash investments		[	34,485	2	37,931
	3	Pledges and grants receivable, net .		. [	0	3	0
	4	Accounts receivable, net .			0	4	0
	5	Receivables from current and former officers,	directors, truste	es, key			
		employees, and highest compensated employ	ees Complete I	Part II of			
		Schedule L	•	. [		5	
	6	Receivables from other disqualified persons (a					
		4958(f)(1)), persons described in section 4958	(c)(3)(B), and c	ontributing			
		employers and sponsoring organizations of se	ction 501(c)(9)	voluntary			
ets		employees' beneficiary organizations (see inst	ructions)			6	
Assets	7	Notes and loans receivable, net		. [	0	7	0
⋖	8	Inventories for sale or use		[		8	
	9	Prepaid expenses and deferred charges		. [		9	
	10a	Land, buildings, and equipment, cost or		Γ			
		other basis Complete Part VI of Schedule D	10a	3,401,315			
	b	Less: accumulated depreciation	10b	1,402,010	2,073,437	10c	1,999,305
	11	Investments—publicly traded securities	1,880,232	11	1,833,384		
	12	Investments—other securities. See Part IV, lin	0		0		
	13	Investments—program-related See Part IV, III	Γ	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 ed	ual line 34)	[	3,988,154	16	3,870,620
	17	Accounts payable and accrued expenses .				17	
	18	Grants payable .	. Г		18		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities	[		20		
es	21	Escrow or custodial account liability Complete	edule D		21		
Liabilities	22	Payables to current and former officers, direct	ors, trustees, ke	у Г	y %-		· (A)
ap		employees, highest compensated employees,	and disqualified	i i		4	
<u> </u>		persons Complete Part II of Schedule L .				22	
	23	Secured mortgages and notes payable to unre		es	0	23	0
	24	Unsecured notes and loans payable to unrelate	ed third parties		0	24	0
	25	Other liabilities Complete Part X of Schedule	D	. [	0	25	0
	26	Total liabilities. Add lines 17 through 25		[	0	26	0
		Organizations that follow SFAS 117, check	here Dar	nd			
Se		complete lines 27 through 29, and lines 33		-			
Ę	27	Unrestricted net assets		-		27	
g	28	Temporarily restricted net assets	•	· ·	<del></del>	28	
B	29	Permanently restricted net assets		•		29	
.등				≓ `⊦		25	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, and complete lines 30 through 34.	check here ▶				
ets	30	Capital stock or trust principal, or current funds	s ,			30	
\ss	31	Paid-in or capital surplus, or land, building, or		r	2,073,437		1,999,305
3t /	32	Retained earnings, endowment, accumulated		r funds .	1,914,717		1,871,315
ž	33	Total net assets or fund balances			3,988,154		3,870,620
	34	Total liabilities and net assets/fund balances			3,988,154		3,870,620
				<u></u>	0,000,104		5,870,020

orm 8	90 (2010) ASC-SE ARK ENDOWMENT FUND INC	<u>71-0636240</u>	Pag	<sub>je</sub> 12
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI.	<del>-</del>	<u> [</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	i	61	,249
2	Total expenses (must equal Part IX, column (A), line 25)	<del>                                     </del>		,783
3	Revenue less expenses. Subtract line 2 from line 1	<del>                                     </del>		,534
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	<del></del>	3,988	
5	Other changes in net assets or fund balances (explain in Schedule O) .	1		,
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))	<u> </u>	-3,870	<u>,620 –                                   </u>
Part	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		ŀ	<b>^</b>
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	<u></u>	X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?.	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	* * *	. / .	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		×	, ,
	issued on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis	<u>.</u>		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	<u>3a</u>	↓	<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			١.,
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		<u>_x</u>
		Forr	ո 990	(2010)

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

# **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.

**Open to Public** Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

►See separate instructions.

ame	or tire	Organización					Linpioyer identificati	on numb	61		
SC-	SE A	ARK ENDOWN	MENT FUND IN	C			71-06	36240			
Par	Ш	Reason f	or Public Ch	arity Status (All org	anizations must co	omplete this part	) See instruction	S			
he c	rgar			ation because it is (Fo							
1		A church, cor	nvention of chur	ches, or association o	f churches describe	ed in section 170(	b)(1)(A)(i).				
2		A_school_des	cribed in <b>sectio</b>	on 170(b)(1)(A)(ii). (At	tach Schedule E.)						
3		A hospital or	a cooperative h	iospital service organi	zation described in s	section 170(b)(1)(	A)(iii).				
4			search organiza me, city, and sta	ition operated in conju	nction with a hospit	al described in sec	ction 170(b)(1)(A)	(iii). Ent	er the	<i>-</i>	
5				the benefit of a colleg	je or university own	ed or operated by	a governmental ur	ut descr	ibed		
6		A federal, sta	ite, or local gove	ernment or governmer	ntal unit described ir	n 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 organizati	on that normall	y receives (1) more th	nan 33 1/3% of its si	upport from contrib	outions, membersh	ıp fees,	and g	ross	
		•	eceipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses								
		• •	=	after June 30, 1975		,	•				
10		An organizati	ion organized a	nd operated exclusive	ly to test for public s	safety See section	n 509(a)(4).				
11	X	An organizati	ion organized a	nd operated exclusive	ly for the benefit of,	to perform the fun	ctions of, or to car	ry out th	ne 💮		
			-	blicly supported organ					e secti	on	
		_		at describes the type o	f supporting organiz	zation and complet	te lines 11e throug	h 11h.			
		a Type	l <b>b</b>	Type II c	Type III–Funct	tionally integrated	d X T	ype III-	-Other	Γ	
е	X			y that the organization							
			r than foundationsection 509(a)(2	on managers and othe 2)	r than one or more	publicly supported	organizations des	cribed i	n secti	ion	
f		* * * * *		-, a written determinatior	from the IRS that i	t is a Type I. Type	II. or Type III supp	ortina			
-			check this box				, , ,	<b>-</b>		X	
g		Since August	t 17, 2006, has	the organization acce	pted any gift or cont	tribution from any o	of the				
		following pers						,			
				or indirectly controls,			described in (ii)		Yes	No	
				verning body of the su	• •	n?.		11g(i)	$\vdash$	X	
		• •	•	person described in (i)		^		11g(ii)		X	
h				y of a person describe ation about the suppor		7		11g(III)	Ц	<u> </u>	
	No-					(v) Did very matrix	(vi) la 15 a	4	Am		
(1)		e of supported anization	(u) ElN	(iii) Type of organization (described on lines 1–9 above or IRC section	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your	(vi) Is the organization in col		) Amount support		

(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		organization in col (i) organized in the US?		ganization in organization in col (i) of your (i) organized in the support? US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No			
(A) ASC FOR SE ARK	71-0401966	7	x		X		х		163,399		
(B)									0		
(C)					_				0		
(D)									0		
(E)									0		
Total									163,399		

instructions

Par	(Complete only if you checked the	box on line 5,	7, or 8 of Pa	irt I or if the or	ganization fa	iled to qualify	under
Sect	Part III If the organization fails to organi	quality under t	ne tests liste	o below, pleas	se complete F	Part III )	<del></del>
	ndar year (or fiscal year beginning in)	(a) 2006	(h) 2007	(a) 2009	(4) 2000	(=) 2010 T	(f) Total
		(a) 2000	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	_	ļ				
•	include any "unusual grants")	0					0
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on its behalf	ا			-		
3	The value of services or facilities	0			<del></del>		
J	furnished by a governmental unit to the						
	organization without charge	l ol					0
4	Total. Add lines 1 through 3		0	0	0	0	0
5	The portion of total contributions by each	<u> </u>		-			
•	person (other than a governmental unit	]		l			
	or publicly supported organization)	1					
	included on line 1 that exceeds 2%			l			
	of the amount shown on line 11,						
	column (f)						
_6	Public support. Subtract line 5 from line 4						0
	ion B. Total Support					_	· <u>-</u>
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	o	0	0	0	o	0
8	Gross income from interest, dividends,						
	payments received on securities loans,					•	
	rents, royalties and income from similar						
	sources	0					0
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on .					-	0
10	Other income Do not include gain or						
	loss from the sale of capital assets	ا					•
44	(Explain in Part IV) <b>Total support.</b> Add lines 7 through 10	0					0
11 12	Gross receipts from related activities, etc. (s		<i>x</i> , &**	,		40	0
13	First five years. If the Form 990 is for the o			rd fourth or fift	·	12	\(2)
15	organization, check this box and stop here	iganization's in	st, second, till	iu, iourtii, or iiii	iii tax yeai as a	a section 50 I(C	)(3) 
Soot	ion C. Computation of Public Support	Paraantaga	<del></del>	<u> </u>	•	· -	
14	Public support percentage for 2010 (line 6,		od by line 11	column (fl)	-	44	0.000/
15	Public support percentage from 2009 Sched			column (1))	•	15	0 00%
16a	33 1/3% support test–2010. If the organiza			line 13, and lin	· · ·   e 14 is 33 1/3º		
	and <b>stop here</b> . The organization qualifies a				C 14 13 33 1737	or more, che	LK (IIIS DOX
b	33 1/3% support test-2009. If the organiza				nd line 15 is 33	3 1/3% or more	check this
	box and stop here. The organization qualifi	es as a publicly	supported ord	anization .			, chicok thic
17a	10%-facts-and-circumstances test-2010.				e 13 16a or 1	16h and line 14	
	is 10% or more, and if the organization mee	ets the "facts-an	d-circumstanc	es" test, check	this box and s	top here Expl	r aın in
	Part IV how the organization meets the "fac	ts-and-circumst	ances" test TI	he organization	qualifies as a	nubliciv sunno	rted
	organization					, as not suppo	▶□
b	10%-facts-and-circumstances test-2009.	If the organizat			ie 13, 16a. 16b	o, or 17a, and li	ne 💆 🗀
•	15 is 10% or more, and if the organization n						
	Part IV how the organization meets the "fac-						• · · - · · ·
	supported organization .			-			. •
18	Private foundation If the organization did	not chook a hov	on line 12 16	to 16h 17a ar	47h ahaaliik		•

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

(Complete only if you checked the box on line 9 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)

Sect	ion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	0					0			
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	-		= -	<u>-</u>		0			
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0					0			
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0					0			
6	Total. Add lines 1 through 5	0		0		0				
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						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			
c	Add lines 7a and 7b	0	0	0	<u> </u>					
8	Public support (Subtract line 7c from line 6)						0			
	tion B. Total Support		<b>-</b>							
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
9	Amounts from line 6	0	0	0	(	0	0			
10a	Gross income from interest, dividends,									
	payments received on securities loans,						•			
b	rents, royalties and income from similar sources Unrelated business taxable income (less				-	<u> </u>	0			
U	section 511 taxes) from businesses acquired after June 30, 1975						0			
С	Add lines 10a and 10b	0	0	0	(	0	0			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0			
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0					0			
13	Total support. (Add lines 9, 10c, 11, and 12)	0		0		0	o			
14	First five years. If the Form 990 is for the organiz organization, check this box and stop here		<del></del>	<u>-</u>	<u> </u>		<u> </u>			
Sec	tion C. Computation of Public Support				- <u>-</u>					
15	Public support percentage for 2010 (line 8, column		ne 13, column (f)	)		15	0 00%			
16	Public support percentage from 2009 Schedule A,					16	0 00%			
-	tion D. Computation of Investment Inc			(0)		47	0.000/			
17 18	Investment income percentage for 2010 (line 10c, Investment income percentage from 2009 Schedu		-	urnn (ĭ))		17	0 00% 0 00%			
10 19a	33 1/3% support tests-2010. If the organization of			and line 15 is mo	ore than 33 1/3%		0 00%			
b	not more than 33 1/3%, check this box and stop h 33 1/3% support tests-2009. If the organization of	ere. The organiz	ation qualifies a	s a publicly supp	orted organizati	on	▶ □			
_							▶ □			
20	line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization  Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									

Schedule A (Forr	m 990 or 990-EZ) 2010 ASC-SE ARK ENDOWMENT FUND INC	71-0636240	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations rec	uired by Part II, line 1	0,
	Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any add instructions)		
-			
	•••••••••••••••••••••••••••••••••••••••		
	•••••••••••••••••••••••••••••••••••••••		
	•		
		·	
		· <b></b>	
		••••••	

## SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

2010
Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations that have filed Form 5768 (éléction under section 501(h)). Complète Part II-A Do not complète Part II-B

• S	ection 501(c)(3) organization	s that have NOT filed Form 5768 (election	on under section 501	(h)) Complete Part II-B Do n	ot complete Part II-A
		es," to Form 990, Part IV, line 5 (Proxy		,	•
• S	ection 501(c)(4), (5), or (6) or	rganizations Complete Part III			
	e of organization			Employer	identification number
	-SE ARK ENDOWMENT	·			71-0636240
Pa		he organization is exempt und			rganization.
1		the organization's direct and indirect	political campaig	n activities in Part IV	
2	Political expenditures	•		. ▶ \$	
3	Volunteer hours .		• •		
Pa		he organization is exempt und			
1		excise tax incurred by the organization			••••••
2	Enter the amount of any	excise tax incurred by organization i	managers under s	ection 4955 . ▶ \$	
3	If the organization incurre	ed a section 4955 tax, did it file Form	n 4720 for this yea	ır?	🗌 Yes 🔲 No
4a	Was a correction made?	•	•		Yes No
b	If "Yes," describe in Part				
Pa	rt I-C Complete if t	he organization is exempt und	er section 501(	c), except section 501(	c)(3).
1	Enter the amount directly activities	y expended by the filing organization	for section 527 e	xempt function	
2		filing organization's funds contributed	d to other organiz	ations	
_	for section 527 exempt fu			. ▶ \$	
3	I otal exempt function ex line 17b	penditures. Add lines 1 and 2 Enter	here and on Forr	n 1120-POL, ▶ \$	0
4		n file Form 1120-POL for this year?	·	•	Yes No
5		sses and employer identification num	her (FIN) of all se	ection 527 political organiza	
•	organization made paym	ents For each organization listed, e	nter the amount p	aid from the filing organiza	ation's funds Also enter
	the amount of political co	ontributions received that were prom	ptly and directly d	elivered to a separate polit	ical organization, such
	as a separate segregate	d fund or a political action committee	e (PAC). If additio	nal space is needed, provi	de information in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	.,		<b>,</b> , ,	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
(1)					-
	<del></del>			0	0
(2)				0	0
(3)				0	0
(4)			<u> </u>	<u> </u>	0
				0	0
(5) ———	<u> </u>			0	0
(6)				0	0

f Grassroots lobbying expenditures

Р	art II-A Complete if the organization under section 501(h)).	is exempt u	inder section 50	01(c)(3) and filed	Form 5768 (elec	tion
Α	Check ▶ If the filing organization below	ongs to an af	filiated group.	<del>-</del>	······································	
В	Check ▶☐ if the filing organization che	•	• .	roi" provisions ap	ply.	
	Limits on Lobby	ing Expendit	ures		(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts	paid or incurred	.)	organization's totals	group totals
1a	Total lobbying expenditures to influence put		, ,	)		0
b	Total lobbying expenditures to influence a le		(direct lobbying)			0
С	Total lobbying expenditures (add lines 1a ar	nd 1b)	• • •		9	0
d	Other exempt purpose expenditures			•		0
e	Total exempt purpose expenditures (add line				0	0
f	Lobbying nontaxable amount. Enter the ame columns	ount from the	rollowing table in b	otn	اه	0
1	If the amount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amou	nt is:	<del>-</del>	
İ	Not over \$500,000					
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000					* .
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,000	ver \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000				* 500 m
	Over \$17,000,000	, ,	r 18			
g	Grassroots nontaxable amount (enter 25%		•		0	0
h	- · · · · · · · · · · · · · · · · · · ·	• •	0	0		
ĺ:	,		L			
	If there is an amount other than zero on eith section 4911 tax for this year?	er line in or l	ine II, ala the orga		4720 reporting [	Yes No
	(Some organizations that ma columns below.	de a section See the instru	uctions for lines	o not have to com 2a through 2f on p		
	Lobbying	Expenditure	s During 4-Year	Averaging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying nontaxable amount	-			_0	0
	Lobbying ceiling amount (150% of line 2a, column(e))		Mary Mary			0
С	Total lobbying expenditures				0	0
d	Grassroots nontaxable amount				0	0
	Grassroots ceiling amount (150% of line 2d, column (e))		,			0

Schedule C (Form 990 or 990-EZ) 2010

0

Schedule C (Form 990 or 990-EZ) 2010

Par	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	5768	-	
	(election under Section 50 I(II)).	- (2	a) (		(b)	
		Yes	No	Aı	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or			<del></del>		
а	referendum, through the use of  Volunteers?					
b						
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	, , , , , , , , , , , , , , , , , , ,					
i	Other activities? If "Yes," describe in Part IV					
j	Total Add lines 1c through 1i					0
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				<i>à</i> ,	لق گ
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?.			<u>:                                    </u>	;	- 1
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	c)(5),	or se	ection		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2_		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3_		
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, I "Yes."					
1	Dues, assessments and similar amounts from members .		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	•	2a			
b	Carryover from last year	•	2b			
C	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible					
	lobbying and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			0
Part						
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5,	and P	art II-I	3, line 1	li	
Also,	complete this part for any additional information.					
						. <b>.</b>
					<b></b>	<b>-</b>
			<b></b> -		<del></del> -	
<del>-</del>						. <b></b>
						· <b></b>

· ASC	SE ARK ENDOWMENT FOND INC	/ I-U0302 <del>4</del> U	
Schedule C (F	orm 990 or 990-EZ) 2010		Page 4
Part IV	Supplemental Information (continued)		-3
rait iv	Supplemental information (continued)	<u></u>	
-			
		· • • • • • • • • • • • • • • • • • • •	
		• • • • • • • • • • • • • • • • • • • •	
	•••••••••••••••••••••••••••••••••••••••	• • • • • • • • • • • • • • • • • • • •	
	•••••••••••••••••••••••••••••••••••••••		
	••••••		

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047
2010

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service
Name of the organization

ASC-SE ARK ENDOWMENT FUND INC 71-0636240 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X . . . . . . . .

	' ASC-SE ARK ENDOWMEN	T FUND INC				71-0	636240			
ched	ule D (Form 990) 2010								F	age 2
Part	III Organizations Maintaining Colle	ctions of Ar	t, Historic	al Trea	sures, or C	Other S	imilar Assets	(contin		
3	Using the organization's acquisition, access use of its collection items (check all that app	ion, and othe								
а	Public exhibition	J1 <b>y</b> )	4	Loan o	or exchange	nrogran	ne			
			· H		i exchange	program	15			
b	Scholarly research		e	Other					· <b></b>	
C	Preservation for future generations									
4	Provide a description of the organization's of Part XIV	collections an	d explain ho	ow they	further the o	rganıza	tion's exempt p	urpose ır	1	
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Ye	es X	No '
Part					zation ansv	vered "	Yes" to Form	990, Pa	<u> </u>	
	IV, line 9, or reported an amount of	n Form 990	), Part X, Iı	ne 21						
1a	Is the organization an agent, trustee, custoo	dian or other	ıntermedian	y for cor	ntributions or	other a	issets not	_	_	
	included on Form 990, Part X? .							Y€	s X	No
b	If "Yes," explain the arrangement in Part XI	✓ and comple	te the follow	wing tab	le	· · · · · ·				
	_					<u> </u>		Amount		
C	Beginning balance				•	1c				0
d	Additions during the year					1d				
e	Distributions during the year .	•				<u>1e</u>				
f	Ending balance	•	•	•		1f				0
2a	Did the organization include an amount on		ırt X, line 21	17		•		Y€	es 🔀	No
b	If "Yes," explain the arrangement in Part XI									
art							Part IV, line 10	)		
_	<del></del>	Current year	(b) Prior y		(c) Two years		(d) Three years back	(e) Fo	our years	back
1a	Beginning of year balance	1,765,544	1,6	18,079		1,067				
b	Contributions	1,820		3,001	3	9,915			<i>*</i>	
С	Net investment earnings, gains,							1		
	and losses .	221,651		05,579		3,955	* , , , , , , , , , , , , , , , , , , ,		<u> </u>	
d	Grants or scholarships	89,268	1	08,051	10	9,657	79 AM		) in	·
е	Other expenditures for facilities								,	
	and programs .	45.004		38,550				_		
T	Administrative expenses	15,384		14,514		9,291				
g ว	End of year balance	1,884,363		65,544	1,61	8,079				
2	Provide the estimated percentage of the ye	ai end baland								
a b	Board designated or quasi-endowment  Permanent endowment	%	100%							
c	Term endowment ▶ %	/9								
3a	Are there endowment funds not in the poss	ession of the	organizatio	n that a	re held and a	adminis	tered for the			
	organization by.	0001011 01 1110	o.gamzano		re neid and t	2011111110	tered for the		Yes	No
	(i) unrelated organizations .							3a(i)		X
	(ii) related organizations					•		3a(ii)		X
b	If "Yes" to 3a(II), are the related organizatio	ns listed as re	equired on S	Schedul	e R?			3b	$\Box$	
4	Describe in Part XIV the intended uses of the	ne organizatio	n's endowr	ment fun	ids.			<b></b>		
art								<del></del>		
	Description of investment	(a) Cost or ot			st or other		Accumulated	(d) B	ook value	e
		(ınvestm		basis	s (other)	de	epreciation			
1a	Land		0		434,059	<del></del>				<u>4,059</u>
b	Buildings	ļ	0		2,888,121		1,177,036		<u>1,71</u>	<u>1,085</u>
C	Leasehold improvements		0		0		0			0
d	Equipment		0		79,135		74,974			<u>4,161</u>
е	Other	L	0		0		0			0

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) )

Part VII	Investments—Other Securities	es. See Form 990, Part X,	line 12	
	a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
	al derivatives	0		
• •	held equity interests	0		
		0		<del></del>
		0		
		0		
		0		<del></del>
		0		
		0		<del></del>
(F)		0	<del></del>	
		0	· · · · · · · · · · · · · · · · · · ·	
		0		
Total (Column (	b) must equal Form 990, Part X, col (B) line 12)	0		
Part VIII	Investments—Program Relati	<u> </u>	line 13	
rait	(a) Description of investment type	(b) Book value	(c) Method of va	
(1)	<del></del>	0		
(2)	<del></del>	0		<del></del>
(3)		0		
(4)		0		
(5)		0		
(6)		0		
(7)		0		
(8)		0		
(9)		0		
(10)		0		
	(b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		· **
Part IX	Other Assets. See Form 990,	Part X, line 15		
		(a) Description		(b) Book value
(1)				0
(2)		<del></del>		0
(3)				0
				0
<u>(5)</u>				0
<u>(6)</u> <u>(7)</u>	······································			0
(8)	· ·			0
(9)				0
(10)				0
Total. (Col	umn (b) must equal Form 990, Part X,	col (B) line 15) .		0
Part X	Other Liabilities. See Form 9			
1.	(a) Description of liability	(b) Amount		
	al income taxes	0		
(2)		0		
(3)		0		
(4)		0		
(5)		0		
(6)		0		
	<u> </u>	0		
(8)	· · · · · · · · · · · · · · · · · · ·	0		
				<b>!</b>
(9)				Į
(9) (10)		0		
(9) (10) (11)	(b) must equal Form 990, Part X, col (B) line 25)	0 0		

Sched	ule D (Form 990) 2010		Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	0
4	Net unrealized gains (losses) on investments .	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	0
Par		er Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities . 2b	<del>-</del>	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)	<del></del>	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV) . 4b		
C	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	0
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	•	
a	Donated services and use of facilities 2a		
b	Prior year adjustments		
c	Other losses	<del>-</del>  ,	
d	Other (Describe in Part XIV )	*	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	<u> </u>	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	¥ .	
b	Other (Describe in Part XIV)	<del></del>	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	0
	t XIV Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; 2b, Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b part to provide any additional information		)
			<b></b>

# ASC-SE ARK ENDOWMENT FUND INC 71-0636240 Schedule D (Form 990) 2010 Page 5 Supplemental Information (continued) Part XIV

# SCHEDULE (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047 Open to Publi 2010

71-0636240

X Yes No

Inspection for identification number

Depar	Department of the Treasury	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
Intern	Internal Revenue Service	► Attach to Form 990.
Name	Name of the organization	Employer identifica
ASC	ASC-SE ARK ENDOWMENT FUND INC	ENT FUND INC
Pa	(I General In	Part I General Information on Grants and Assistance
-	Does the organizat	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and
	the selection criteri	the selection criteria used to award the grants or assistance?
7	Describe in Part IV	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II	Grants and Other Assistance to Governments Form 990, Part IV, line 21, for any recipient that re	Assistance to line 21, for any	Governments a recipient that rec	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part I	n the United States 000 Check this box	. Complete if the or, if no one recipient r	ganization answered	d "Yes" to \$5,000 Part II
	can be duplicated if additional space is needed	additional spac	ce is needed.		•			•
1 (a) Name	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE ARTS & TO1 MAIN STRE	(1) THE ARTS & SCIENCE CENTER FOR SEARK 701 MAIN STREET PINE BLUFF, AR 71601	71-0401966	509(a)(3)	89,268	74,131	Book	DEPR OF FACILITIES	FINANCIAL SUPPORT
(2)				0	0		-	
(3)				0	0			
(4)				0	0			
(5)				0	0		-	
(9)				0	0			
(7)				0	0		_	
(8)				0	0			
(6)				0	0			
(10)				0	0			
(11)				0	0			
(12)				0	0		_	
2 Enter 3 Enter	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	n 501(c)(3) and ç organizations	government organi.	zations				

For Paperwork Reduction Act Notice, see the Instructions for Form 990. (HTA)

Schedule I (Form 990) (2010)

Schedule I (Form 990) (2010)

Page 2

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) 0 (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance Part III Part IV ო ß 9

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

# **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

Department of the Treasury Internal Revenue Service

(8) (9) (10) ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Inspection

Open To Public

OMB No 1545-0047

Name of the o	iganization						=	iibioaei	identini	Jauon II	uniber	
ASC-SE A	RK ENDOWMENT FUND INC						71.	-06362	40			
Part I	Excess Benefit Transaction Complete if the organization a							990-E	EZ, Pa	rt V, lır	ne 40b	_
	<del>_</del>									,	(c) Con	
1	(a) Name of disqualified pers	son			(b) Description	of trans	action		<u> </u>	_=	Yes	No
(1)					<del>-</del>							
(2)												
(3)			_									
(4)												
(5)												
(6)												
un	nter the amount of tax imposed or der section 4958 hter the amount of tax, if any, on I					s duri	ng the	year	<b>&gt;</b>	\$ \$		
Part II	Loans to and/or From Intere			n Form 990, Part IV	/, line 26, or F	orm 9	90-EZ	, Part	V, line	38a		
(a) Na	me of interested person and purpose		to or from inization?	(c) Original principal amount	(d) Balance o	due	(e) In (	default?	by bo	proved pard or nittee?	107	/ritten ment?
		То	From				Yes	No	Yes	No	Yes	No
(1)				0		0		<u> </u>				
(2)				0		0						
(3)				0		0		L				<u></u>
(4)		4		0		0			L	<u> </u>	<b></b> _	<u> </u>
(5)			<u> </u>	0		0				<b>└</b> ─	ļ <sup>1</sup>	
(6)			ļ	0		0				ļ	<u> </u>	<u> </u>
(7)		<del></del>		0		0			<u> </u>	<b>├</b>	<u> </u>	<u> </u>
(8)				0		0			<b></b>	<b>├</b>	<b> </b> -	Ь—
<u>(9)</u>			ļ	0		0			<b>-</b>	<del> </del>	<u> </u>	—
(10)			<u> </u>	0	<del></del>	0		200.1.4 1 12000	Salar-Azen			ALCOHOL:
Total . Part III	Grants or Assistance Benerous Complete of the organization	_				0						
	(a) Name of interested person	7		between interested persorganization			(c) A	Amount a	ınd type	of assis	tance	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
		1 -										

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. (HTA)

Schedule L (Form 990 or 990-EZ) 2010

Part IV	Business Transactions In Complete if the organization	volving Interested Persons. n answered "Yes" on Form 99	00, Part IV, line 28a, 2	8b, or 28c		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(e) Amount of transaction	(d) Description of transaction	organi	anng of zation's nues?
					Yes	No
(1)			0			
(2)		<del></del>	0		-	
(3)			0		-	
<u>(4)</u> <u>(5)</u>			0		<del></del>	-
(6)	<del></del>		0		<del>                                     </del>	t —
(7)			0			<u> </u>
(8)			0			
(9)			0		_	<u> </u>
(10)		<b>_</b>	0			L
Part V	Supplemental Information				>	
	Complete this part to provid	de additional information for re	esponses to questions	on Schedule L (see instruction	ons)	
				,		
				~		
					<del></del> -	
				<i></i>	- <b></b>	
				····		
			_			
					- <b></b>	
						- <i></i>
		_				
						<b></b> .
						- <b></b>
						<b>-</b> -
						<del></del> -
			*******		••••··································	<b></b> - ·

# SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or 990-EZ.

ASC-SE ARK ENDOWMENT FUND INC	71-0636240
Form 990 Part VI Section B Line 11a RETURN IS EXPLAINED AND DISCUSS	SED AT REGULARLY SCHEDULED
BOARD MEETING	
Form 990 Part VI Section C Line 19 ANNUAL NOTICE PUBLISHED IN LOCAL	NEWSPAPER AFTER FORM 990
FILED	
•	

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization	Employer identification number
ASC-SE ARK ENDOWMENT FUND INC	71-0636240
<u>-</u>	

Schedule O (Form 990 or 990-EZ) (2010)

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

		<u> </u>	Cash	Noncash
1	Federated Campaigns	1		
2	Membership dues	. 2		
3	Fundraising events	3 —		
4	Related organizations	4		
5	Government grants (contributions)	. 5	···	
6	All other contributions, gifts, grants, and similar amounts not included above		·	
	MEMORIALS, HONORARIUMS		1,820	
-			-	
_	Other contributions total	6	1,820	0
_7_	Total	7	1,820	0

# Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

									Totals		SS	Cost, other	other		•	
										sales	es	basis and expenses	expenses			
								P.	Public Securities		618,939		608,051			
								Non-Pub	Non-Public Securities		0		0			
	ı								Other sales		0		0			.
			Check if										Expense			
			gain/loss is	gain/loss is	Check If						Cost or ot	Cost or other basis	of sale and	_		
			from sale	from sale of	purchaser						(Enter one field only)	field only)	cost of			
			of public	non public	is a		Date	Acquisition	Date	Gross sales		Donated	-ехолфш		Description of	
Description		CUSIP #	securities	securities	pusiness	Purchaser	acquired	method	plos	price	Cost	value	ments	Depreciation	Basis Method	
SIMMONS GENERAL & NAMED ENDOWNENT			×			VARIOUS	ကြ	PURCHASE	VARIOUS	463 189	449,818					
PINE BLUFF NATIONAL BANK			×			VARIOUS	ı	PURCHASE	VARIOUS	95,000						
TALBOT CAPITAL MANAGEMENT			×			VARIOUS	VARIOUS	PURCHASE	VARIOUS	60,750	63,414					
							1									
	ļ															
													-			
																1
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																1

Part IX, Line 22 (990) - Depreciation, Depletion, and Amortization

		_		(A)	(B)	(C)	(D)
				Total	Program	Management	Fundraising
					services	and general	_
1 Depreciation			. 1	74,131	74,131	•	
2 Depletion		•	2	0			<u></u>
3 Amortization			. 3	0	<u></u>		
4 Total .			4	74,131	74,131	0	0

Part X, Line 3 (990) - Pledges and Grants Receivable

		Pledges and g	rants receivable	Allowance for o	loubtful accounts
		Beginning	End	Beginning	End
1	1 [				
2	2 [				
3	3 [				
4	4 [				
5	5				
6	6				
7	7 [				
8	8				
9	9 [				
10	10 [				
11 Total pledges and grants receivable	11	0	0	0	0

Part X, Line 4 (990) - Accounts Receivable

		Account	s re	ceivable	Allowance for de	oubtful accoun	ts	_
		Beginning		End	Beginning	End		
1	1 [							
2	2							
3	3							
4	4							
5	5			_				
6	6							•
7	7							
8	8							
9	9							
10	10						_	
11 Total accounts receivable .	11	0		0	0		0	

# Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

								3,401,315	1,327,878	1.402.010	0	2,073,437	1,999,305
			Leasehold			Check If	Check if		Beginning	Ending			
mel an another C	700	Buildings	Improve-	Formant.	ç	Investment	Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Ending
1 LAND-701 SOUTH MAIN	×	S	2	ומוומווה	5	19950	Passagela	216,200	0			216,200	216,200
2 LAND-LOT AT 8TH & STATE	×							44,768	0			44,768	44,768
↾▔	×							23,091	0			23,091	23,091
Γ		×						2,648,090	1,015,343	1,08		1,632,747	1,566,545
Ī		×						19,836	6,944			12,892	12,396
6 BUILDING-623 MAIN		×						16,721	2,717	3,135		14,004	13,586
П		×						5,974	3,654	4,252		2,320	1,722
8 CURBING & LOT	×							150,000	150,000	150,000		0	0
9 SITE PREPARATION		×						197,500	75,726	80,664		121,774	116,836
10 GROUP ASSETS				×				79,135	73,494	74,974		5,641	4,161
1								0	0			0	0
12			į					0	0			0	0
13								0	0			0	0
14								0	0			0	0
15								0	0			0	0
16								0	0			0	0
17								0	0			0	0
18								0	0			0	0
19								0	0			0	0
20								0	0			0	0
21								0	0			0	0
22								0	0			0	0
23								0	0			0	0
24								0	0			0	0
25								0	0			0	0
26								0	0			0	0
27								0	0			0	0
28								0	0			0	0
29								0	0			0	0
30								0	0			0	0
31								0	0			0	0
32								0	0			O	0
33								0	0			0	0
34								0	0			0	0
35								0	0			0	0
36								0	0			0	0

# Part X, Lines 11 and 12 (990) - Investments - Securities

Check one box below to indicate how securities are reported X Cost

End of year market value (FMV)

						0		1,833,384
		Check if		Check if			Beginning	Ending
		Publicly		Closely-Held	Number	Value	Balance	Balance
		Traded	Financial	Equity	of Shares/	at Time of	Book Value	Book Value
	Description	Securities?		Interests	Face Value	Donation	Cost	Cost
1	SIMMONS-GENERAL AND NAMED ENDOWMENTS	×			VARIOUS	VARIOUS	914,349	903,241
7	PINE BLUFF NATIONAL BANK	×			VARIOUS	VARIOUS	493,890	
3	TALBOT CAPITAL MANAGEMENT	×			VARIOUS	VARIOUS	471,993	455,234
4								0
2					00.0	0	0	0
9					00 0	0	0	0
7					00 0	0	0	0
8					0.00	0	0	0
6					00 0	0	0	0
10					00 0	0	0	0
11					00 0	0	0	0
12					000	0	0	0
13					00 0	0	0	0
14					00 0	0	0	0
12					00 0	0	0	0
9					00 0	0	0	0
=					00 0	0	0	0
18					00 0	0	0	0
13					00.0	0	0	0
20					00 0	0	0	0

SIMMONS FIRST TRUST CO., N.A.

Realized Gain/Loss Report

Run on 08/04/2011 09:12:18 AM

Administrator: BRENDA HARTSFIELD 870-541-1412

Start Date: 01/01/2010

End Date: 12/31/2010

Account:

X Logo

1050010057

ARTS & SCIENCE CENTER FOR SOUTHEAST ARKANSAS ENDOWMENT

**FUND, INC** 

,				· • -	
Description	Sold	Acquired	Proceeds	Cost	Gain/Loss Covered
** SHORT TERM CAPITAL GAIN (LOSS)					
330 SHARES OF MARKET VECTORS GOLD MINERS ETF	01/07/2010	11/06/2009	16,128.16	15,843 63	284 53
294 SHARES OF PFIZER INC	01/20/2010	07/22/2009	5,869.10	4,682 63	1,186 47
316 SHARES OF PFIZER INC	01/20/2010	07/29/2009	6,308 29	4,996 78	1,311 51
202 SHARES OF	01/21/2010	10/14/2009	5,062.93	5,986.35	923 42-
NYSE EURONEXT 138 SHARES OF	01/21/2010	10/22/2009	3,458 83	4,054 72	595 89-
NYSE EURONEXT 60 000000 SHARES OF ISHARES NASDAQ BIOTECHNOLOGY INDEX FUND	02/12/2010	07/02/2009	5,030.66	4,227.28	803 38
70 SHARES OF	02/25/2010	07/02/2009	5,921.73	4,931 82	989 91
ISHARES NASDAQ BIOTECHNOLOGY INDEX FUND 240 SHARES OF	03/12/2010	02/12/2010	14,707.54	11,389 10	3,318 44
UNITED STATES STEEL CORP  125 SHARES OF  RESECTOR MAYERS SOUTHER COMPANY	03/16/2010	05/21/2009	3,223 11	2,586.24	636 87
BRISTOL MYERS - SQUIBB COMPANY 955 SHARES OF	03/30/2010	01/26/2010	12,430.26	11,336 65	1,093.61
SOUTHWEST AIRLINES 305 SHARES OF AVON PRODS INC	04/13/2010	12/24/2009	10,006.24	9,830 21	176 03
15 SHARES OF	05/12/2010	02/05/2010	942.94	772 44	170 50
ISHARES S&P SMALLCAP 600 INDEX 210 SHARES OF	05/19/2010	03/17/2010	12,891.90	12,799 52	92 38
KIMBERLY-CLARK CORPORATION 305 SHARES OF MERCK AND COMPANY INC	05/27/2010	10/15/2009	10,218 12	10,171 48	46 64
160 SHARES OF CUMMINS INC	07/19/2010	06/08/2010	11,243 91	10,355 59	888 32
191 SHARES OF CATERPILLAR INC	07/22/2010	01/08/2010	12,955.94	11,468 69	1,487 25
310 000000 SHARES OF	08/03/2010	08/25/2009	9,733 49	7,871.74	1,861 75
SYSCO CORP 50 SHARES OF SPDR SED MIDCAR 400 FTE TRUST	09/22/2010	02/05/2010	7,104.60	6,288.61	815 99
SPDR S&P MIDCAP 400 ETF TRUST 25.000000 SHARES OF	09/28/2010	08/24/2010	7,199 09	6,051.40	1,147 69
180 SHARES OF	09/30/2010	08/25/2010	8,039 06	7,132 28	906 78
ISHARES MSCI EMERGING MKT 30 SHARES OF APPLE INC.	10/18/2010	08/24/2010	9,308 27	7,261.69	2,046 58
** TOTAL SHORT TERM CAPITAL GAIN (LOSS)			177,784 17	160,038 85	17,745.32
** LONG TERM CAPITAL GAIN (LOSS)					
70 SHARES OF	02/10/2010	03/07/2008	3,156.01	4,298 53	1 142.52-
XTO ENERGY INC 10000 UNITS OF	02/15/2010	05/24/2000	10,000.00	10,000 00	0 00
U.S TREASURY NOTES 6.5% 02/15/2010 230 SHARES OF	02/23/2010	09/26/2008	12,157 65	14,244.18	2,086 53
ISHARES S&P 500 BARRA VALUE 37 SHARES OF	02/23/2010	09/29/2008	1,955.79	2,194.31	238 52

RealzdGainLoss	-				Page 2 of 3
ISHARES S&P 500 BARRA VALUE				_	
203 SHARES OF ISHARES S&P 500 BARRA VALUE	02/23/2010	10/01/2008	10,730 45	12,156 21	1,425 76-
101 SHARES OF ISHARES S&P 500 BARRA VALUE	02/23/2010	10/10/2008	5,338 79	4,661 02	677.77
42 SHARES OF ISHARES S&P 500 BARRA VALUE	02/23/2010	10/28/2008	2,220 09	1,859 61	360.48
187 SHARES OF	02/22/2010	05/08/2008	10,045.45	10,663.11	617 66-
WAL-MART STORES INC 78 SHARES OF	02/22/2010	09/23/2008	4,190.08	4,634 34	-14-i 2 <del>6</del> -
WAL-MART STORES INC 136 664 SHARES OF	03/09/2010	01/15/2008	11,900 70	14,359.28	2,458.58-
VANGUARD 500 INDEX FUND-SIGNAL SHARES 305 SHARES OF	03/16/2010	12/10/2008	7,864 38	6,495 73	- 1,368 65
BRISTOL MYERS - SQUIBB COMPANY 237 SHARES OF	04/16/2010	06/19/2008	3,864 95	5,296 38	1,431 43-
SELECT SECTOR SPDR FINANCIAL 573 SHARES OF	04/16/2010	09/22/2008	9,344 38	11,913.18	2,568 80-
SELECT SECTOR SPDR FINANCIAL 205 000000 SHARES OF	04/21/2010	12/05/2007	13,029 59	13,441 18	411 59-
ISHARES S&P SMALLCAP 600 INDEX					
580 SHARES OF ISHARES S&P 500 BARRA VALUE	05/10/2010	10/28/2008	32,467 37	25,680 33	6,787 04
17 SHARES OF ISHARES S&P SMALLCAP 600 INDEX	05/12/2010	12/05/2007	1,068.66	1,114 63	45 97-
162 SHARES OF ISHARES S&P SMALLCAP 600 INDEX	05/12/2010	06/02/2008	10,183.71	10,489 86	306.15
116 SHARES OF ISHARES S&P SMALLCAP 600 INDEX	05/12/2010	06/19/2008	7,292 04	7,483 56	191 1/-
154 SHARES OF FOREST LABS INC	06/17/2010	09/12/2007	4,167.45	5,783 89	1 616 44-
76 SHARES OF	06/17/2010	11/20/2007	2,056.67	2,736.54	679.87
FOREST LABS INC 88 SHARES OF	06/21/2010	11/20/2007	2,391.84	3,168 62	476 78-
FOREST LABS INC 112 SHARES OF	06/21/2010	05/07/2009	3,044.17	2,539 97	504 20
FOREST LABS INC .22 SHARES OF	07/13/2010	01/15/2009	1 58	1 68	0 10-
FRONTIER COMMUNICATIONS CORP 1096 041 SHARES OF	07/14/2010	10/31/2008	11,596 11	10,905 61	690 50
FEDERATED MDT ALL CAP CORE FUND 74 19 SHARES OF	08/04/2010	01/15/2009	560 88	566 31	5.43-
FRONTIER COMMUNICATIONS CORP 70 81 SHARES OF	08/04/2010	06/02/2009	535 33	537.81	2 48-
FRONTIER COMMUNICATIONS CORP					
35000 UNITS OF HOME DEPOT INC 4 625% 08/15/2010	08/15/2010	08/09/2005	35,000 00	35,000 00	0.00
170 SHARES OF SYSCO CORP	09/02/2010	08/25/2009	4,821.76	4,316.76	505.00
99 000000 SHARES OF SPDR S&P MIDCAP 400 ETF TRUST	09/03/2010	03/03/2008	13,733.19	14,176 08	93 \ 8ô°
781 SHARES OF GENERAL ELECTRIC COMPANY	09/17/2010	11/13/2008	12,605 98	11,827.01	778 97
391 SHARES OF GENERAL ELECTRIC COMPANY	09/17/2010	11/18/2008	6,311.06	6,266 83	44 23
12 SHARES OF SPDR S&P MIDCAP 400 ETF TRUST	09/22/2010	03/03/2008	1,705 10	1,718.31	13 21
28 SHARES OF	09/22/2010	03/11/2008	3,978 58	3,842 77	135.81
SPDR S&P MIDCAP 400 ETF TRUST 105 SHARES OF	09/22/2010	07/09/2008	14,919 67	14,998 11	78 44-
SPDR S&P MIDCAP 400 ETF TRUST 86 SHARES OF	09/30/2010	03/24/2008	3,840.88	3,840 78	0 10
ISHARES MSCI EMERGING MKT 164 SHARES OF	09/30/2010	08/20/2008	7,324.48	6,567 01	757.47
ISHARES MSCI EMERGING MKT	• •	·			
** TOTAL LONG TERM CAPITAL GAIN (LOSS)			285,404.82	289,779.53	4,374 71-

\*\* LONG TERM CAPITAL GAINS DIVIDENDS

1661.144 BASIS SHARES OF
FAIRHOLME FUND

\*\* TOTAL LONG TERM CAPITAL GAINS DIVIDENDS

0 00 0 00 2,807 90

**SUMMARY** 

RealzdGainLoss

Description	Amount
** SUMMARY OF CAPITAL GAINS AND LOSSES **	
TOTAL SHORT TERM CAPITAL GAIN (LOSS) TOTAL SHORT TERM CAPITAL GAINS DIVIDENDS NET SHORT TERM CAPITAL GAIN (LOSS)	17,745 32 0 00 17,745 32
TOTAL LONG TERM CAPITAL GAIN (LOSS) TOTAL LONG TERM CAPITAL GAINS DIVIDENDS TOTAL 28% RATE CAPITAL GAINS DIVIDENDS TOTAL SEC 1250 CAPITAL GAINS DIVIDENDS TOTAL SEC 1202 CAPITAL GAINS DIVIDENDS NET LONG TERM CAPITAL GAIN (LOSS)	2,807 90 0 00 0 00 0 00 0 00 .,508 81
NET CAPITAL GAIN (LOSS)	16,178 51
TOTAL GAIN/LOSS FROM SALES WITH UNKNOWN COST/ACQUISITION DATE	0 00

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# ARTS & SCIENCE CENTER FOR SOUTHEAST ARKANSAS

Account 052501

Report Period From 1/1/2010 To 12/31/2010

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		1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
Date D	escription	Units / Price	Income Cash	Principal Cash	
ACQUIRED DISF 5/29/2007 11/1	POSED_TERM 2/2010 LT	FED G/L 0 00			
2/8 2010 SALE OF MONE	Y MARKET	(359 83)		359 83	<b>13</b> 59 30
ACQUIRED DISF 6/29/2007 12/		FED G/L 0 00			
weep Sales (0) 1/1/2010 T	o 12/31/2010	0 00	0 00	0 00	- 5:
otal Sale of Asset		(101,267.75)	0 00	101,267 75	(101 267 75
laturities & Calls					
12 2010 ASSET MATURE FNMA 3 % 07/12		(20,000 00)		20 005 00	9 838 3
ACQUIRED DISF 7/2 2008 - 7/1		FED G/L 61 20			
3 000 0 ASSET MATURE FHLB 4 70 08/10		(50 300 90)		50 000 00	50 C - 3
ACQUIRED DISF 1011/2007 8/1		FED G/L (71 50)			
1 2010 ASSET MATURE FHLB 3%, 12/10	-	(25 000 00)		25 000 00	24 Bu⊤ ∂
ACQUIRED DISF 7/7/2008 12/1		FED G/L 192 16			
otal Maturities & Calls		(95,000 00)	0.00	95 000.00	194 818 1
Capital Gain					
2	LONG TERM REIN SER TR SMLL CP	VAL CL			<u> 137 -</u>
:NSTL	LONG TERM SOR SER I SMALL ( on 948 407 Shares	CAP		739 76	
2 20 2010 CAPITAL GAIN ROWE T PRICE AMERICA		!N		92 44	
Total Capital Gain		4.51	0 00	832 20	207 4
•		7.01	0 00	002	
Purchases + 4 2010 PURCHASE OF TRADE DATE (		6 21		(6 21,	8.1
1 12 2010 PURCHASE OF TRADE DATE (	MONEY MARKET	300 00		(300 00)	200
2 . 2010 PURCHASE OF TRADE DATE (	· · · · · · · · · · · · · · · · · · ·	5 96		;5 <del>9</del> 6,	ā s
(C 3310 PURCHASE OF TRADE DATE (		1 175 00		r 175 00,	11 51
2 16 2010 PURCHASE OF	MONEY MARKET	137 50		137 50;	CT 5

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Page 2 of 5

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Account Number 1260-2742

Report Period Jahuary 1 - December 31, 2010

2010 Year-End Schwab Gain/Loss Report

Realized Gain or (Loss)		TO SECULO SE			Accounting Method	Accounting Method First in First Out (FIFO)
Shoit-Term	Quantiy/Par	Acquira/ Openod	Sold/ Closed	Total Proceeds	Cost Basis	Realized Gain of (Loss)
BUCKI F INC BKE	230 0000	09/21/09	09/21/09 08/19/+0	\$5 799 64	\$6,687 65	(\$888 01)
Security Subtotal				\$5,799 64	\$6,687.65	(\$888.01)
Total Shuit-Term				\$5,799 64	\$6,687.65	(\$986.01)
Long-Term	QuantityPar	Acquired/ Opened	Sekt/ Closed	Total Proceeds	Cost Basis	Realized Gain or (Loss)
DFA US CORE EQUITY 2 PORTFOLIO DFQTX	955 1100	20/110/07	07/10/07 11/08/10	\$9,950.05	\$12,11364	(\$2,163 59)
Security Subtotal				\$9,950.05	\$12,113.64	(52,163.39)
FED HM I.N MTG 475XXX**MATURED** DUE 12/08/10 3128X2EV3	25,000 000d	12/08/03	12/08/03 12/08/10	\$25,000 00	\$25,155 00 <sup>d</sup>	(\$155 00)
Socurity Subjetal				\$25,000.00	\$25,155 00	(\$155.00)

Please are Embraces for Your Actount' section for an explanation of the enditore chalce and symbols of this report

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Arts & Science Center

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Schwab One® Account
ARTS & SCIENCE C
SOUTHEAST ARKA
INSTITUTIONAL
FILMD INC.

Schwab One® Account of ARTS & SCIENCE CENTER FOR SOUTHEAST ARKANSAS ENDOWMENT FUND INC

Report Pendd January 1 - December 31,

> Account Number 1260-2742

# 2010 Year-End Schwab Gain/Loss Report

Realized Gain or (Loss) (continued)					Accounting Method.4-rst in First Out [FIFO]	st in First Out [FIFO]
Long-Term (continued)	Quantity/Par	Acquired/ Opened	Sold/ Closed	Told! Proceeds	Cost Basis	Realized Gain or (Loss)
WAL-MAH! STORES 4 0XXX***MATCHHED** DUE 01/15/10, 931142BX0	20,000 0000	40/60/40	01/21/10 40/00/40	\$20,000 00	\$19,457.75	\$542 25
Securliy Subtotal				\$20,000.00	\$19,457.75	\$542.25
Total Long-Term				\$54,950.05	\$56,726.39	(\$1,776.34)

(\$2,664.35)Schwab hJs provided realized gain and loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your hindings. See Terms \$63,414.04 \$60,749.69 Total Realized Gain or (Loss) and Conditions

Option Customed Beahzed gamiloss of underlying securities is adjusted to reflect the premiums of assigned or exercised options. Please consult IRS publication 550 Investment Income and Exponses, tot additional information on Options

# **Endnotes For Your Account**

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Arts & Science Center

Data for this holding has been edited or provided by the advisor

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