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# SCANNED JUN 08

Form **990** 

**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

A F	or the	2011 calendar year, or tax year beginning and	lending		
B c	heck if pplicable	C Name of organization		D Employer identific	cation number
$\Gamma$	Addres:	GEORGE W. DONAGHEY FOUNDATION			
	Name change	Doing Business As		71-0	201619
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		······································
	Termin-	•	2200		570-3528
	Amende		<b>-</b>	G Gross receipts \$	23,889,861.
	Applica tion	LITTLE ROCK, AR 72201		H(a) Is this a group re	
	pending	F Name and address of principal officer PHILLIP S. ANDERSO	N	for affiliates?	Yes X No
		111 CENTER STREET, SUITE 2200, LITTLE	ROCK,	H(b) Are all affiliates inc	luded? Yes No
	Tax-exe	mpt status X 501(c)(3)	or 527	If "No," attach a	list. (see instructions)
J١	<b>N</b> ebsite	e:▶N/A		H(c) Group exemption	n number 🕨
		organization Corporation X Trust Association Other	L Year	of formation: 1929 N	State of legal domicile; AR
Pa	art I	Summary			
Ð	1 E	Briefly describe the organization's mission or most significant activities Prov	ride fu	unds to Univ	ersity of
Activities & Governance	<u> </u>	Arkansas at Little Rock			
ž	2 (	Check this box 🕨 🔙 if the organization discontinued its operations or dispo	sed of mor	e than 25% of its net as	sets
Š	3 1	lumber of voting members of the governing body (Part VI, line 1a)		3	7
නේ	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	7
es	5 7	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0
Ϋ́	6 7	otal number of volunteers (estimate if necessary)		6	0
<b>Act</b> i	7a 7	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	1 d	let unrelated business taxable income from Form 990-T, line 34		7b	<u> </u>
				Prior Year	Current Year
Revenue	8 (	Contributions and grants (Part VIII, line 1h)		0.	0.
	9 F	Program service revenue (Part VIII, line 2g)		0.	<u> </u>
ě	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		3,753,886.	6,879,437.
æ	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,753,886.	<u>6,879,437.</u>
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,654,057.	1,542,088.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), [injes 5-10)		0.	0.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.	0.
ă	b 7	otal fundraising expenses (Part IX, column (Q), line 25)	0.		
ш	11/	Other expenses (Part IX, column (A), lines 1/1a-1/1d, 11f-24e) 2 2012	<u> </u>	330,011.	<u>372,386.</u>
	18	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	ļ	1,984,068.	1,914,474.
- 70	19 F	Revenue less expenses Subtract line 18 from line 123 DEM UT		1,769,818.	4,964,963.
Sor			В	eginning of Current Year	End of Year
Sset	20	otal assets (Part X, line 16)		68,219,803.	62,390,720.
Net Assets or Fund Balances	21	otal liabilities (Part X, line 26)	_	54,456.	66,776.
꾡	22 1	Net assets or fund balances Subtract line 21 from line 20		68,165,347.	62,323,944.
	art II	Signature Block			<del></del>
		ties of periory, indeclare that I have examined this return, including accompanying schedul			y knowledge and belief, it is
true	, correct	, and complete. Declarate of of preparer (other than officer) is based on all information of w	thich prepare	r has any knowledge.	050
		MIDO ( WILLDOW, Secretary		IIIAH 8,	שוטוי
Sig	n	Signature of officer		Date	
Her	re	PHILLIP S. ANDERSON, SECRETARY			<del></del>
		Type or print name and title		Doto In	DTIN
	I	Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	1	LINDSAY M. THOMAS Judgay mills	nas	05/07/12 self-employ	<del></del>
	·	Firm's name L. COTTON THOMAS & CO.		Firm's EIN ▶	71-0552273
Use	Only	Firm's address 620 WEST THIRD ST., STE 400			F04\ 255 0455
_	I	LITTLE ROCK, AR 72201		Phone no. (	<u>501) 375-9187</u>
Ma		S discuss this return with the preparer shown above? (see instructions)			X Yes No
1330	01 01 22	142 I HA For Panerwork Reduction Act Notice see the senarate instruct	ions		Form <b>990</b> (2011)

Form 990 (2011)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		_X_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3_		X
7	during the tax year? If "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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	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		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	, , , , , , , , , , , , , , , , , , , ,			
	Part VI	11a	-	<u> </u>
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		v	
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	X	
·	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	110		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
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		_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  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, business,	14a		X
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	1-40		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			i
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
00	complete Schedule G, Part III	19		_ <u>X</u> _
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X_
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000 (	

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	'		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			77
	Schedule K If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			v
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		v
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	00		х
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		Λ
28	instructions for applicable filing thresholds, conditions, and exceptions)			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		<u> </u>
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
•	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ь	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (	2011)

# 2011) GEORGE W. DONAGHEY FOUNDATION Statements Regarding Other IRS Filings and Tax Compliance Form 990 (2011) **Part V** State

	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 1a 0			Į
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ļ
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		İ	
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		]	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		ŀ	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		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		ŀ	ı
	to file Form 8282?	7с		X
ď	If "Yes," indicate the number of Forms 8282 filed during the year		İ	
е	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	, , ,	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		İ	ı
^	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?			ı
a	· ·	9a		
10	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter	9b	$\rightarrow$	
а				
b	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)		İ	ı
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а		13a		
_	Note. See the instructions for additional information the organization must report on Schedule O	134	$\neg$	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		İ	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		_ <del></del> -

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			LX					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	7							
	If there are material differences in voting rights among members of the governing body, or if the governing		İ						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			ļ					
b		7							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	7							
_	officer, director, trustee, or key employee?	2		х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	-		21					
Ū	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-							
, .	more members of the governing body?			x					
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a	-						
		7b		x					
8	persons other than the governing body?								
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body?		₹.						
b	Each committee with authority to act on behalf of the governing body?	8a	X						
		8b	X	<u> </u>					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	_		٠,,					
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		X					
	tion B. 1 oncies (mis Section B requests information about policies not required by the internal Revenue Code.)		-	<del> </del>					
100	Did the organization have local chapters, branches, or affiliates?	40.	Yes	No					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		X					
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	401		]					
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Х						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a		<u> </u>					
12a		40.		<b>.</b>					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a		X					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b							
٠	in Schedule O how this was done	40-							
13	Did the organization have a written whistleblower policy?	12c		Х					
14	Did the organization have a written document retention and destruction policy?	13		X					
15	Did the process for determining compensation of the following persons include a review and approval by independent	14	<u> </u>	^					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a		х					
	Other officers or key employees of the organization	15b		X					
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100	<u> </u>						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
_	taxable entity during the year?	16a		х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100	_						
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure	1 100							
17	List the states with which a copy of this Form 990 is required to be filed None								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	le						
	for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, a	nd finar	ncial						
-	statements available to the public during the tax year								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation 🖿	•						
-	Bart Roach - 501-551-4159								
	P.O. Box 3546, Little Rock, AR 72203								
13200									

Form	990	(2011)	١
⊢orm	990	(2011	1

#### GEORGE W. DONAGHEY FOUNDATION

71-0201619

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent 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 employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Name and Title  Average hours per week (describe hours for related organizations in Schedule O)  (1) Bart Roach  President  (2) Philip S. Anderson  Secretary  (3) Grag Flesher  Trustee  (4) French Hill  Trustee  (5) Walter E. Hussman, Jr.  Trustee  (7) George Worthen  Reportable compensation from related organizations (W-2/1099-MISC)  Reportable compensation from related organizations (W-2/1099-MISC)  (2) Philip S. Anderson  Secretary  (3) Grag Flesher  Trustee  (4) French Hill  Trustee  (5) Walter E. Hussman, Jr.  Trustee  (7) George Worthen							nsat	sated any current officer, director, or trustee				
Notice   N	(A)	(B)			(C	C)	•		(D)	(E)	(F)	
Week (describe hours for related organizations in Schedule O)   President   X   X   X   X   X   X   X   X   X	Name and Title	-		not c	check	more	than				ř	
(describe hours for related organizations in Schedule O)  (1) Bart Roach President  (2) Philip S. Anderson Secretary  (3) Greg Flesher Trustee  (4) French Hill Trustee  (5) Walter E. Hussman, Jr. Trustee  (6) John Riggs Trustee  (7) George Worthen			box	, unle cer ar	ess pe	rson Irecto	ıs bot or/trus	th an stee)				
Trustee			<u> </u>		Ī		T	1				
Trustee		1 '	iect			1	_					
Trustee		1	50 00	stee	1		sate	Ì		(44-2/1099-141130)		
Trustee		1	truste	al trus		98	in per		(** 27 1000 111100)		_	
Trustee			lan	ıtıon:	_	음 때	ye so					
(1) Bart Roach       X       X       0.			lu div	Instit	)   	Ke	E E	Form			J	
(2) Philip S. Anderson       X       X       0. <td< td=""><td>(1) Bart Roach</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	(1) Bart Roach											
X   X   O. O. O. O. O. (3) Greg Flesher	President		X		X	<u> </u>	<u> </u> _		0.	0.	0.	
(3) Greg Flesher       X       0.       0.       0.         Trustee       X       0.       0.       0.         (4) French Hill       X       0.       0.       0.         (5) Walter E. Hussman, Jr.       X       0.       0.       0.         Trustee       X       0.       0.       0.       0.         (6) John Riggs       X       0.       0.       0.       0.         (7) George Worthen       X       0.       0.       0.       0.	(2) Philip S. Anderson				ŀ							
Trustee	Secretary		X		X		<u> </u>		0.	0.	0.	
(4) French Hill       X       0. <td>(3) Greg Flesher</td> <td></td>	(3) Greg Flesher											
Trustee       X       0.       0.       0.         (5) Walter E. Hussman, Jr.       X       0.       0.       0.         Trustee       X       0.       0.       0.         (6) John Riggs       X       0.       0.       0.         Trustee       X       0.       0.       0.         (7) George Worthen       0.       0.       0.       0.			X		ļ		ļ		0.	0.	0.	
(5) Walter E. Hussman, Jr.  Trustee  (6) John Riggs  Trustee  X  0. 0. 0. (7) George Worthen	(4) French Hill											
Trustee         X         0.         0.         0.           (6) John Riggs         X         0.         0.         0.           Trustee         X         0.         0.         0.           (7) George Worthen         0.         0.         0.         0.			X		ļ	<u> </u>	-	ļ.,	0.	0.	0.	
(6) John Riggs Trustee X 0. 0. 0. (7) George Worthen	(5) Walter E. Hussman, Jr.	,										
Trustee X 0. 0. 0. (7) George Worthen	Trustee		X			<u> </u>		ļ	0.	0.	0.	
(7) George Worthen	(6) John Riggs											
	Trustee		X						0.	0.	0.	
Trustee X 0. 0. 0. 0.	(7) George Worthen				ļ							
	Trustee		X		_		ļ		0.	0.	0.	
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					<del>                                     </del>	-	<del>  -</del>					

Par	T VII Section A. Officers, Directors, Tru	i	mple	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)			
	(A)	(B)			_ ((				(D)	(E)		(F)	
	Name and title	Average	(do		Pos heck			one	Reportable	Reportable	E	stımate	bŧ
		hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	a	mount (	of
		week (describe	<b>—</b>	T a	10 2 0	mecic	Jiruus	lee)	from	from related		other	
		(describe hours for	recto	İ					the	organizations		npensa	
		related	D TO	eg e			sated		organization	(W-2/1099-MISC)	- 1	rom the	
		organizations	ruster	fras		9	ia in		(W-2/1099-MISC)			ganızatı nd relate	
		in Schedule	dualt	tona		nploy	stcor					anizatio	
		O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			oig	u.n.zum	5110
			<u> </u>	T							1		
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										•			
1b	Sub-total .	1	<b>L</b>	1	ı	1	<b></b>		0.	0	•		0.
	Total from continuation sheets to Part V	II, Section A							0.	0			0.
<u>d</u>	Total (add lines 1b and 1c)						▶		0.	0	•		_0.
2	Total number of individuals (including but r	not limited to th	nose	liste	ed al	bove	e) wl	no re	eceived more than \$100	,000 of reportable			_
	compensation from the organization								<del>.</del>			Yes	0
3	Did the organization list any former officer,	director or to	ieto	o ka	w or	nnlo	waa	or	highest componented o	mplovoo op		res	No
3	line 1a? If "Yes," complete Schedule J for s			e, ne	y <del>C</del> I	пріс	уее	, OI	nignesi compensated e	inployee on	3		X
4	For any individual listed on line 1a, is the si			omo	ensa	ation	n and	to t	her compensation from	the organization	"	1	
•	and related organizations greater than \$15	•		•					•	the organization	4		Х
5	Did any person listed on line 1a receive or									dual for services			
	rendered to the organization? If "Yes," com	plete Schedul	e J i	or s	uch	pers	son				5		X
	tion B. Independent Contractors												
1	Complete this table for your five highest co the organization. Report compensation for										nsation	from	
	(A)				<u>g</u> .		<u> </u>		(B)	, , , , , , , , , , , , , , , , , , , ,	(	C)	
	Name and business	address	N	INC	E				Description of s	ervices		ensatio	n
								-					
								$\dashv$					
						-			-				
2	Total number of independent contractors (	including but r	ot li	mıte	d to	tho	se li:	sted	l above) who received m	nore than	· · · · ·		
	\$100,000 of compensation from the organi						0		· · · · · · · · · · · · · · · · · · ·				
											_	000 "	

Form 990 (2011)

(**D**) Revenue (A) (B) (C) Unrelated Total revenue Related or excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1605169. 1605169. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (II) Personal (ı) Real 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory 22,284,692 b Less: cost or other basis and sales expenses 17,010,424 c Gain or (loss) 5,274,268 5274268. 5274268 d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ \_\_\_\_\_ contributions reported on line 1c). See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a 11d 6879437. 6879437. 0. Total revenue. See instructions.

# Form 990 (2011) GEORGE W. DONAGHEY FOUNDATION 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 required to complete columns (B), (C), and (D)

	Check if Schedule O contains a respon	se to any question in thi			
	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	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				· · · · · · · · · · · · · · · · · · ·
	organizations in the United States. See Part IV, line 21	1,542,088.	1,542,088.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				-
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	-			
b	Legal				
С	Accounting	4,200.		4,200.	
d	Lobbying				<del></del>
е	Professional fundraising services. See Part IV, line 17	254 225			
f	Investment management fees	361,286.	<u>-</u>	361,286.	<del></del>
g	Other				
12	Advertising and promotion				
13	Office expenses				•
14	Information technology				- I
15	Royalties				
16	Occupancy		<del></del>		
17	Travel			•	<del></del>
18	Payments of travel or entertainment expenses		•		
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings Interest				
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization		· · · · · · · · · · · · · · · · · · ·		
23	Insurance	6,900.		6,900.	
24	Other expenses. Itemize expenses not covered	- 0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)		U.S. 61.		
a		-			<del>-</del>
b					
С			-		<del></del>
d				,	
	All other expenses	1 014 454	1 540 000	200 200	
25	Total functional expenses Add lines 1 through 24e	1,914,474.	1,542,088.	372,386.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

**Balance Sheet** Part X (A) Beginning of year End of year 1 Cash - non-interest-bearing 1 2,057,129. 1,656,909. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Assets Notes and loans receivable, net 7 Inventories for sale or use 8 4,794. 4,093. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 65,966,323. 60,570,396. 12 Investments - other securities See Part IV, line 11 12 13 Investments · program-related See Part IV, line 11 13 14 Intangible assets 14 191,557. 15 Other assets See Part IV, line 11 15 159,322. Total assets. Add lines 1 through 15 (must equal line 34) 68,219,803. 62,390,720. 16 16 66,776. 54,456. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 54,456. 66,776. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 68,165,347. 62,323,944. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 68,165,347. 33 Total net assets or fund balances 33 62,323,944. 68,219,803. 62,390,720. Total liabilities and net assets/fund balances

	990 (2011) GEORGE W. DONAGHEY FOUNDATION	<u>7</u> 1-	0201619	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,87	9,4	37.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,91	4,4	74.
3	Revenue less expenses Subtract line 2 from line 1	3	4,96	4,9	63.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	68,16	5,3	47.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<10,80	6,3	66.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	62,32	3,9	44.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>	X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			i
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	it		İ
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ıred aud	ıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u>.                                    </u>
			Form	990	(2011)

### **SCHEDULE A**

(Form 990 or 990-EZ)

Name of the organization

# **Public Charity Status and Public Support**

201

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection
Employer identification number

			GEORGE	W. DONAGHEY	FOUND	ATION		_		71	-020	<u> 1619</u>	
Pa	rt I	Reason	for Public Chari	ty Status (All organiz	ations mu	st complet	e this par	t) See inst	ructions.				
The	organ	ization is not a	a private foundation l	pecause it is (For lines 1	I through	11, check o	only one b	ox)					
1		A church, cor	nvention of churches	, or association of chur	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)					
2				0(b)(1)(A)(ii). (Attach Sc									
3				al service organization of			170(b)(1)	(A)(iii).					
4				perated in conjunction					(b)(1)(A)(ii	i), Enter th	e hospita	ıl's nan	ne.
		city, and stat		•		•				•			•
5		-		penefit of a college or ur	niversity ov	wned or on	erated by	a governr	nental uni	t described	l ın		
			(b)(1)(A)(iv). (Comple	•	•	•	,	J					
6				ent or governmental unit	t described	d in sectio	n 170(b)(	1)(A)(v).					
7	而			eives a substantial part					r from the	general pu	ıblıc des	cribed	ın
	_	=	b)(1)(A)(vi). (Comple	,			<b>3</b>		•	go p.			
8				ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9		-		eives (1) more than 33 1		•	om contri	butions, m	embershi	n fees, and	l gross re	eceints	from
-		-	•	ctions - subject to certa				•		•	•	•	
				axable income (less sect	•	•	•				•		
			509(a)(2). (Complete			,		4	, 90			,,	-
10				erated exclusively to te	st for publ	ıc safety. S	See <b>sectio</b>	n 509(a)(4	l).				
11	[X]	An organizati	on organized and op	erated exclusively for th	ne benefit o	of, to perfo	rm the fur	nctions of,	or to carr	y out the p	urposes	of one	or
		more publicly	supported organiza	tions described in section	on 509(a)( <sup>-</sup>	1) or section	n 509(a)(2	2) See sec	tion 509(	a)(3). Chec	k the bo	x that	
	describes the type of supporting organization and complete lines 11e through 11h												
	a Type I b Type II c X Type III · Functionally integrated d Type III · Other												
е	$\mathbf{X}$	By checking	this box, I certify tha	t the organization is not	controlled	directly or	r indirectly	by one or	more dis	qualified pe	ersons of	her tha	เท
		foundation m	nanagers and other tl	nan one or more publicly	y supporte	d organiza	tions des	cribed in s	ection 509	9(a)(1) or se	ection 50	9(a)(2).	
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		supporting of	rganization, check th	is box									
g		Since August	t 17, 2006, has the o	rganization accepted ar	ny gift or co	ontribution	from any	of the follo	owing per	sons?			
		(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons c	lescribed i	n (II) and (	III) below,		Yes	No
		the gove	erning body of the su	ipported organization?							11g(i)	4	X
		(ii) A family	member of a persor	described in (i) above?							11g(ii	<u> </u>	X
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	e?					11g(iii	<u></u>	X
h		Provide the f	ollowing information	about the supported or	ganızatıon	(s)							
			<del></del>	,,,,, ,			_						
(i)	Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) is organizati	s the	(vii) A	mount o	of
	orga	anization		(described on lines 1-9		sted in your document?		ion in col. r support?	(i) organiz U.S	ed in the l	su	pport	
				above or IRC section						<del>,</del>			
77	•			(see instructions))	Yes	No	Yes	No	Yes	No			
un - £	ive	rsity	71 000000	170/01/11	7.5		77		<b></b>		4	- 400	
OI	Ar	Kansas	71-0236904	1/0(0)(1)	Х		X		X		1:	<u>5420</u>	88.
					-			<del></del>	<u> </u>				
					1								
Tota	1										1,5	42,0	88.

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

Schedule A (Form 990 or 990-EZ) 2011

Pa	Support Schedule for (Complete only if you checked	-					•
	fails to qualify under the tests	listed below, plea	ase complete Part	III)			
	ction A. Public Support		<del>,                                     </del>		·	1	
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and		1				
	membership fees received (Do not						
	include any "unusual grants.")						<u> </u>
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				ļ		
3	The value of services or facilities						
	furnished by a governmental unit to						,
	the organization without charge						<del>                                     </del>
4	Total. Add lines 1 through 3						<u> </u>
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		1				
_	column (f)			<u> </u>			
	Public support. Subtract line 5 from line 4			<u>.l</u>	<u> </u>		
	ction B. Total Support	4 > 0007	T # 1 0000	4 ) 0000	1	1	T
	Indar year (or fiscal year beginning in)  Amounts from line 4	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
8	Gross income from interest,				<b>†</b>		
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources				1		
9	Net income from unrelated business						
3	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain				1		
10	or loss from the sale of capital						
	assets (Explain in Part IV)				·		
11	Total support. Add lines 7 through 10		1	1	1		
	Gross receipts from related activities,	, etc. (see instruct	ions)	1	<u> </u>	12	J
	First five years. If the Form 990 is for			rd. fourth, or fifth t	tax vear as a secti		
	organization, check this box and stop		,	, ,	,		
Se	ction C. Computation of Publ		rcentage				
14	Public support percentage for 2011 (	line 6, column (f) c	livided by line 11,	column (f))		14	9
15	Public support percentage from 2010	) Schedule A, Parl	III, line 14	.,,		15	9
16a	a 33 1/3% support test - 2011. If the	organization did n	ot check the box o	on line 13, and line	14 is 33 1/3% or	more, check this b	
	stop here. The organization qualifies	•		•			
k	33 1/3% support test - 2010. If the	. , , .,	-		d line 15 is 33 1/3	% or more, check t	his box
	and stop here. The organization qual	-				,	<b>.</b>
17a	10% -facts-and-circumstances tes				ne 13, 16a, or 16b.	, and line 14 is 10%	or more.
	and if the organization meets the "fac		-				•
	meets the "facts-and-circumstances"			-	·	. 3	▶[
ŀ	10% -facts-and-circumstances tes					r 17a, and line 15 is	10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support					<del></del>	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
ınclude any "unusual grants ")						
2 Gross receipts from admissions,						•
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that					<u>,</u>	
are not an unrelated trade or bus-						•
iness under section 513						
_						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to			1			
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge				<u></u>		
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)			_	-		
Section B. Total Support		l	·	-L	1	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	(a) 2001	(8) 2000	(0) 2000	(d) 2010	(6) 2011	(i) Total
10a Gross income from interest,				<del></del>	<del> </del>	
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources					<del> </del>	
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						-
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carned on						
12 Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization's	s first second thir	d fourth or fifth t	ax vear as a sectu	on 501(c)(3) organiz	ration
check this box and stop here	o o.gazao.,	5 mot, 0000mg, tim	a, 10a/a1, 0/ mar t	ax your as a soom	on do reoleo, organiz	
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2011 (li			column (fl)	· · · · · · · · · · · · · · · · · · ·	15	9
16 Public support percentage from 2010		•	30.0 (1))		16	9
Section D. Computation of Inves					1.101	
					47	
17 Investment income percentage for 20		· · · · · · · · · · · · · · · · · · ·	ie ia, column (t))		17	
18 Investment income percentage from 2	•	•			18	9
19a 33 1/3% support tests - 2011. If the	-					17 is not
more than 33 1/3%, check this box ar		_				▶∟
b 33 1/3% support tests - 2010. If the						<del></del>
line 18 is not more than 33 1/3%, che	ck this box and st	<b>top here.</b> The orga	anızatıon qualıfıes	as a publicly supp	orted organization	▶□
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	<u> </u>

# SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

2011

pen to Public Inspection

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.

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 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III			
Nan	ne of organization			Empl	oyer identification number
	GEORGE	W. DONAGHEY FOUN	DATION		71-0201619
Pa	rt I-A Complete if the or	ganization is exempt und	ler section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organ Political expenditures Volunteer hours	ization's direct and indirect politic	cal campaign activities	ın Part IV. ▶\$	
Pa	rt I-B Complete if the or	ganization is exempt und	ler section 501(c)	(3).	
1	Enter the amount of any excise ta	x incurred by the organization und	der section 4955	▶\$	
2	Enter the amount of any excise ta	x incurred by organization manag	ers under section 4955	5 ▶\$	
3	If the organization incurred a secti	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV				1721
Pa	irt I-C Complete if the or	ganization is exempt und	ler section 501(c)	, except section 501(	c)(3).
1	Enter the amount directly expende	ed by the filing organization for se	ction 527 exempt fund	tion activities	
2	Enter the amount of the filing orga	inization's funds contributed to of	her organizations for s	ection 527	
	exempt function activities			▶\$	
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here a	and on Form 1120-POL	-1	
	line 17b			▶\$	
	Did the filing organization file Forn				L Yes No
5	Enter the names, addresses and e	· •		•	• •
	made payments For each organize contributions received that were p				
	political action committee (PAC)			•	ne segregated fund of a
			T	<u> </u>	<del></del>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011					71-0	201619 Page 2
Part II-A Complete if the org			mpt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under sec		<del>-:</del>		<del></del>		
				n Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and sha						
B Check L if the filing organiza	ition check	ed box A a	nd "limited control" pro	ovisions apply		<del>г</del>
Limi	ts on Lob	oying Expe	nditures		(a) Filing	(b) Affiliated group
			unts paid or incurred.	)	organızatıon's totals	totals
1a Total lobbying expenditures to infl				-		
b Total lobbying expenditures to infl			dy (direct lobbying)	_		
c Total lobbying expenditures (add I	ines 1a an	d 1b)		ļ	0.	
d Other exempt purpose expenditur				ļ.		
<ul> <li>Total exempt purpose expenditure</li> </ul>					0.	
f Lobbying nontaxable amount Ent	er the amo	unt from th	e following table in bot	h columns	0.	
If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000		\$1,000,	000			
			· · · · · · · · · · · · · · · · · · ·			
g Grassroots nontaxable amount (er	nter 25% o	f line 1f)			0.	
h Subtract line 1g from line 1a If zer	o or less, e	enter -0-				
i Subtract line 1f from line 1c If zero	o or less, e	nter -0-				
j If there is an amount other than ze	ro on eithe	er line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?					Yes No
		4-Year Ave	eraging Period Under	Section 501(h)		
				n do not have to comp		
co	lumns be	low. See th	e instructions for line	es 2a through 2f on pa	ge 4.)	
	Lobi	ying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year						
(or fiscal year beginning in)	(a)	2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount	_	_				· · · · ·
b Lobbying ceiling amount						
(150% of line 2a, column(e))						<del>-</del> -
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
<ul> <li>f Grassroots lobbying expenditures.</li> </ul>	l		I	r l	j	

# Schedule C (Form 990 or 990 EZ) 2011 GEORGE W. DONAGHEY FOUNDATION 71-0201619 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

or e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)		
of the	e lobbying activity	Yes	No	Amo	ount	
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	1				
	or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
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	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
1	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or se	ction		
	501(c)(6).					
				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 carry over lobbying and political expenditures from the prior year?		3			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or se	ction		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	l "No" OR	(b) Part	III-A, line	e 3, is	
	answered "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	ical				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b		•	
С	Total		2c			
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 ex	cess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5	_		
Par		-			-	
Comi	olete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, P	art II-A <sup>,</sup> and	Part II-B Jir	e 1 Also o	omolete	
	art for any additional information			. , ,,,,,,,	omploto	
•	· · · · · · · · · · · · · · · · · · ·					
		<del></del>		<del></del>	_	
				·, <u>.</u>		
			<del></del>			
					·	

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

GEORGE W. DONAGHEY FOUNDATION

Employer identification number

71-0201619

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised f	funds
-	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	
•	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990, Part	
1	Purpose(s) of conservation easements held by the organization		
-	Preservation of land for public use (e.g., recreation or e		cally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of a	conservation easement on the last
_	day of the tax year		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the ord	
_	year▶	,	
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements i	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	<del>-</del>	· ·
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	ion easements in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the	organization's accounting for
	conservation easements		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er 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 (AS	SC 958), not to report in its revenue statemen	t and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherance	of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, 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		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial ga	un, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1	-	<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

		V. DONAGHE								Page 2
Par	t III   Organizations Maintaining Co	ollections of A	rt, His	torical Tr	easures, or	r Other	Simil	ar Asse	ts (contir	nued)
3	Using the organization's acquisition, accession	on, and other record	is, chec	k any of the	following that	are a sıgr	nificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d		Loan or excl	hange progran	ทร				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explai	n how tl	ney further th	ne organizatioi	n's exemp	ot purpo	ose in Pari	XIV	
5	During the year, did the organization solicit or	receive donations	of art, h	storical trea	sures, or other	r sımılar a	ssets			
	to be sold to raise funds rather than to be ma	intained as part of t	he orga	nization's co	ollection?				Yes	No No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	e organizatio	n answered "Y	es" to Fo	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Part									
	Is the organization an agent, trustee, custodia	an or other intermed	lary for	contribution	s or other ass	ets not in	cluded			
	on Form 990, Part X?		-						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	llowing	table						
-	, .	•	Ū						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
-	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. line	212						Yes	No
	If "Yes," explain the arrangement in Part XIV	,,							2	
Par		the organization an	swered	"Yes" to Fo	rm 990. Part I\	V. line 10				
		(a) Current year		Prior year	(c) Two years		) Three v	ears back	(e) Four	years back
1a	Beginning of year balance	(a) content year	(2)	nor your	(6) ) 04	- Jusin (u	111.00	June Duon	(0) 100	Jouro Duon
b	Contributions									
	Net investment earnings, gains, and losses	<del></del>								
d	Grants or scholarships	· •		<del></del>	-				<u></u>	
_	Other expenditures for facilities									
e	and programs									
	Administrative expenses				<del></del>			-		
f	End of year balance				<del></del>					<del></del>
g	-	ant was and halans	L	a saluma (s	1					
2	Provide the estimated percentage of the curre	erit year erio balanc		g, column (a	i)) rielo as.					
a	Board designated or quasi-endowment	%	_%							
D	Permanent endowment									
С	Temporarily restricted endowment	%								
_	The percentages in lines 2a, 2b, and 2c should be a second for the decrease of		-4 41-	bl.d .		l				
3a	Are there endowment funds not in the posses	ssion of the organiz	auon in	at are neid a	nu auministere	eu ior trie	organi	2ation	Г	V N-
	by									Yes No
	(i) unrelated organizations								3a(i)	<del></del>
	(ii) related organizations		0 - 1	dl D0					3a(ii)	
	If "Yes" to 3a(ii), are the related organizations	•							3b	
Par	t VI Land, Buildings, and Equipm							<del></del>	<del></del>	
i ai					or other	(a) A = -		-d	(d) Past	· value
	Description of property	(a) Cost or of basis (investing		` '	or other (other)	(c) Acc	umulate eciation		(d) Book	value
	Lond	Dasis (ilivesti	enty	Dasis	(Striet)	debit	aliUli	-		
	Land .	<del>                                     </del>		<del> </del>						
b	Buildings			<del> </del>	-					
C	Leasehold improvements			-	<del></del>					
d	Equipment								<del></del>	<del></del>
	Other		V 554:	(D) /rr : 1	10(-1)	-				

(6)(7) (8) (9) (10)(11)

	dule D (Form 990) 2011 GEORGE W. DONAGHEY FOUNDAT			<u> 71-0201</u>	<u>.619 Page 4</u>
Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finar	icial Stat	ements	
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		
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		
10_	Excess or (deficit) for the year per audited financial statements. Combine lines 3 ar		10		
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With Reve	nue per	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.				
а	Net unrealized gains on investments	_2a		<b>」</b> │	
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c		_}	
d	Other (Describe in Part XIV)	2d		_]	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		_	
С	Add lines 4a and 4b			4c	
_5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expe	enses pe	r Return	
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				
а	Donated services and use of facilities	2a		_	
b	Prior year adjustments	2b		_	
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d		<u> </u>	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		_	
С	Add lines 4a and 4b			4c	
_5_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	<del> </del>		5	
	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I e 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also com				
					···
		·V			
	- West Art of				
		· · · · · · · · · · · · · · · · · · ·			

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

2011
Open to Public Inspection

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

▶ Attach to Form 990.

Schedule I (Form 990) (2011) % ⊠ UNIVERSITY OF ARKANSAS AT Employer identification number 71-0201619 (h) Purpose of grant or assistance PROVIDE FUNDS TO Yes 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 ITTLE ROCK recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government (f) Method of (g) Description of reach assistance or government (f) Method of (g) Description of reach assistance other) Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection o Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 1,542,088 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table FOUNDATION LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table DONAGHEY General Information on Grants and Assistance 71-0236904 criteria used to award the grants or assistance? GEORGE W. 1 (a) Name and address of organization 2801 SOUTH UNIVERSITY AVENUE Univ. of AR at Little Rock LITTLE ROCK, AR 72204 Name of the organization Part Part II

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71-0201619

GEORGE W. DONAGHEY FOUNDATION

Schedule I (Form 990) (2011)

Part III

# SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

GEORGE W. DONAGHEY FOUNDATION

Employer identification number 71-0201619

Form 990, Part VI, Section B, line 11: FORM 990 IS REVIEWED ANNUALLY PRIOR
TO FILING BY THE PRESIDENT AND SECRETARY
Form 990, Part VI, Section C, Line 19: THE ORGANIZATION HAS NEVER BEEN
REQUESTED TO MAKE IT'S GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY
AVAILABLE TO THE PUBLIC. FINANCIAL STATEMENTS FOR THE ORGANIZATION CONSIST
OF FORM 990 WHICH IS AVAILABLE TO THE PUBLIC THROUGH THE INTERNAL REVENUE
SERVICE.
Form 990, Part XI, line 5, Changes in Net Assets:
Net unrealized losses on investments: -10,806,366