

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust **Treated as a Private Foundation**

2			the Treasury		ed as a Private				2011
3	_		ue Service	Note The foundation may be a				ements	L
2.1	_	ne of fou		$\frac{1}{1}$ ax year beginning $\frac{07}{01}$,	and ending U6/	30/12		yer identification number	
	0	ZAR	KS HEALTH	ADVOCACY FOUNDATIO	N		43-	1551131	
			•	mber if mail is not delivered to street address)		Room/suite		one number (see instruction:	5)
			OX 3195 , state, and ZIP code				417	-866-4374	
			NGFIELD	MO 65808			C If exem	ption application is pending,	check here
	G C	heck a	all that apply	Initial return Initial retu	ırn of a former public	charity	D 1 For	eign organizations, check he	re 🕨
				Final return X Amended	l return		2 For	eign organizations meeting t	he
				Address change Name ch	ange		85%	6 test, check here and attach	computation 🕨
	H C	heck t	type of organization	on X Section 501(c)(3) exempt privat	e foundation		E If priva	te foundation status was tern	ninated under
. '\		Section	1 4947(a)(1) none	xempt charitable trust Other taxab	le private foundation	1	section	507(b)(1)(A), check here	▶ (_
.'	'l Fa	air mar	ket value of all as	sets at J Accounting method	X Cash A	ccrual	F If the fo	oundation is in a 60-month te	rmination
	er	nd of ye	ear (from Part II, o				under s	section 507(b)(1)(B), check h	ere
, ,		e 16)		108,764 (Part I, column (d) must	be on cash basis)				- 468 37 - 2-32
3~ ·	Pa	art I		venue and Expenses (The total of (b), (c) and (d) may not necessarily equal	(a) Revenue and expenses per		et investment	(c) Adjusted net	(d) Disbursements for charitable
(4) 				nn (a) (see instructions))	books	1	income	income	purposes (cash basis only)
.)		1	Contributions, gifts	, grants, etc , received (attach schedule)					
المراجع المراجع		2		he foundation is not required to attach Sch B					
SCANNED DEC 6.1 2015 NC CINCLE TO THE		3	Interest on savir	ngs and temporary cash investments	11,4	51	11,451		
		4	Dividends and in	iterest from securities	41,8	03	41,803		
()		5a	Gross rents						
<	ē	b	Net rental incom	• • • • • • • • • • • • • • • • • • • •					
DEC 6 1 2015 RC	ĭ	6a		sale of assets not on line 10 Stmt 1	29,5	13			
	ě	b	Gross sales price for a						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Ř	7		income (from Part IV, line 2)			0	0	
<u>ت</u>		8	Net short-term o	•					
EC		9	Income modifica	SIAINES	<u> </u>				
		10a		eturns & allowarpes ECEIVEC]				
		b	Less Cost of go	oss) (attach sche					
$\overline{\Pi}$		11	Other income (a	2 0 20.0					
		12	Total Add lines	1 through 1ACCOUNT MANAGEMENT	82,7	97	53,254	0	
3		13		of officers, directors, trustees, etc	<u> </u>	0			
SCANTED DEC 6	ses	14		salaries and wages					
	ens	15							
	ģ	16a	Legal fees (attac	ch scheduley EIVED					
è	₩	Ь	Accounting fees	(attach schedule) Stm 2	4,8	50			4,850
\$	ڲۣٚڹ	c	Other professional	sees (approprietable 2015 Street 3	15,7	17	15,747		
DEC 6 1 2015 RC	<u>. A</u>	17	Interest						
	F	18	Taxes (attach sche	edule) (see instructions)					
	<u>i</u>	19	Depreciation (attac	h scheduler and depletion					
Š	Š	20	Occupancy						100
ž	3 2	21	•	ces, and meetings	1:	92			192
1	g G	22	Printing and pub	A1 1. A	16.0	-			16,068
		23	Other expenses (att so		16,0				10,000
	មន្តិ	24		and administrative expenses.	36,8	57	15,747	0	21,110
4	X S	35	Add lines 13 thre	<u> </u>	76,3		-2,121		76,312
	ō	25	Contributions, gifts, gra	ants paid and disbursements. Add lines 24 and 25	113,1		15,747	0	
		26	Subtract line 26		/-				
		1		ue over expenses and disbursements	-30,3	72			
		a b		t income (if negative, enter -0-)	<u></u>		37,507		
		C		icome (if negative, enter -0-)				0	
		<u> </u>	jactou not n	(

Fo	rm 990	O-PF (2011) OZARKS HEALTH ADVOCACY FOUNDATION	43-155113	1	Page 2
	_		Beginning of year	End of	
1	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
Т	1	Cash—non-interest-bearing	47,152	25,894	25,894
1	2	Savings and temporary cash investments		·	
j		Accounts receivable			
j	3			1	
)		Less allowance for doubtful accounts			
]	4	Pledges receivable ►		}	
j		Less allowance for doubtful accounts ▶			
	5	Grants receivable		}	
- 1	6	Receivables due from officers, directors, trustees, and other			
- [disqualified persons (attach schedule) (see			
ĺ		instructions)			
	7	Other notes and loans receivable (att_schedule)		ĺ	
- [Less allowance for doubtful accounts ▶ 0			
\$	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments—U S and state government obligations (attach schedule) Stmt 5	28,282	1,052	1,052
- (b	Investments—corporate stock (attach schedule) See Stmt 6	2,269,607	2,081,818	2,081,818
- (C	Investments—corporate bonds (attach schedule)			
- {	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans			
}	13	Investments—other (attach schedule)			
}	14	Land, buildings, and equipment basis			
١		Less accumulated depreciation (attach sch.)	}	1	
- }	15	Other assets (describe ▶			
- 1	16	Total assets (to be completed by all filers—see the			
- 1		instructions Also, see page 1, item l)	2,345,041	2,108,764	2,108,764
7	17	Accounts payable and accrued expenses			
Ì	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable (attach schedule)			
ات	22	Other liabilities (describe >)			
ļ	23	Total liabilities (add lines 17 through 22)	0	0	
7		Foundations that follow SFAS 117, check here			
Ŋ		and complete lines 24 through 26 and lines 30 and 31.		•	
2	24	Unrestricted	2,345,041	2,108,764	
Net Assets or Fund Balances	25	Temporarily restricted			
	26	Permanently restricted			
밀		Foundations that do not follow SFAS 117, check here			
리		and complete lines 27 through 31.			
ö	27	Capital stock, trust principal, or current funds]	
इं	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Š	30	Total net assets or fund balances (see instructions)	2,345,041	2,108,764	
S	31	Total liabilities and net assets/fund balances (see			
	31	instructions)	2,345,041	2,108,764	
ہہ	Part				.,
		I net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	st agree with		
٠		of-year figure reported on prior year's return)		1 1	2,345,041
2		r amount from Part I, line 27a		2	-30,372
		er increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	2,314,669
		reases not included in line 2 (itemize) See Statement 7		5	205,905
		I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (I	b), line 30	6	2,108,764
		the second of this administration of and at Jam. fine			Form 990-PF (2011)

		ses for Tax on Investm	ent Income	_45 1551151	<u> </u>		rage
(a) List and d	escribe the kind(s) of property sold (e g , real estate, common stock, 200 shs MLC Co)		(b) How acquired PPurchase DDonation	(c) Date ad (mo , da		(d) Date sold (mo , day, yr)
1a N/A							
b							
С					ļ		
		·· ·			 		
<u>e</u>			,				
(e) Gross sales price	Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)				
_ a			 		 		
_ <u>b</u>	-		 		 		
<u>c</u>					 		
e			 		}		
Complete only for assets show	ving gain in o	column (h) and owned by the f	oundation on 12/3	1/69		0	(1)
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col (i)		•	(h) gain minus ess than -0-) or m col (h))
_a							
b							
_с	<u> </u>				L		
d	-		ļ				
_e	_l		<u> </u>		 		
2 Capital gain net income or (ne3 Net short-term capital gain or	(loss) as def	if (loss), enter -0- in ined in sections 1222(5) and (i	Part I, line 7		2		
If gain, also enter in Part I, line Part I, line 8				<u>-</u>	3		
		ction 4940(e) for Reduc			ome		
(For optional use by domestic priv If section 4940(d)(2) applies, leave	this part bla	ank		·			
Was the foundation liable for the s If "Yes," the foundation does not q			• •	e base period?			X Yes N
1 Enter the appropriate amount	ın each colu	mn for each year, see the insti	ructions before ma	king any entries			
(a) Base period years Calendar year (or tax year beginnin	g in)	(b) Adjusted qualifying distributions	s Net va	(c) slue of noncharitable-use asse	ts		(d) bution ratio lyided by col (c))
2010							
2009							
2008							
2007							
2006 2 Total of line 1, column (d)			<u>_</u>		2		
3 Average distribution ratio for the number of years the foundation	•	·	• •	ne	3		
4 Enter the net value of nonchar	ritable-use as	ssets for 2011 from Part X, line	e 5		4		
5 Multiply line 4 by line 3	5 Multiply line 4 by line 3				5_		
6 Enter 1% of net investment inc	come (1% of	Part I, line 27b)			6		
7 Add lines 5 and 6					7		
8 Enter qualifying distributions for If line 8 is equal to or greater to			o, and complete the	at part using a 1% tax	8_rate See the	<u></u>	
Part VI instructions		·					

Form	990-PF (2011) OZARKS HEALTH ADVOCACY FOUNDATION 43-1551131		F	age 4				
_Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)							
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1							
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			750				
	here ▶ and enter 1% of Part I, line 27b		_					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of							
_	Part I, line 12, col (b)							
2								
3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2			<u>0</u> 750				
	<u>├</u>			730				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)							
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			750				
6	Credits/Payments							
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a							
þ	Exempt foreign organizations—tax withheld at source 6b							
С	Tax paid with application for extension of time to file (Form 8868)							
d	Backup withholding erroneously withheld 6d							
7	Total credits and payments Add lines 6a through 6d Tax Paid w/ O.R. 1,366 7		1,	<u> 366</u>				
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			25				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			591				
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 0 Refunded ▶ 11			591				
Pa	rt VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	T	Yes	No				
	participate or intervene in any political campaign?	1a		X				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1						
-	of the instructions for definition)?	1b		x				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1.5	_					
	published or distributed by the foundation in connection with the activities							
_				-				
C	Did the foundation file Form 1120-POL for this year?	1c		X				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed]				
	on foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X				
	If "Yes," attach a detailed description of the activities							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of							
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X				
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X				
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either							
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		ı					
	conflict with the state law remain in the governing instrument?	6	X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X					
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)							
Ju	MO							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		'					
D		Oh	ı	x				
_		8b						
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			}				
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"			- T				
	complete Part XIV	9_		X				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
	names and addresses	10		<u> </u>				
		Form 99	IU-PF	(2011)				

	990-PF (2011) OZARKS HEALTH ADVOCACY FOUNDATION 43-1551131			<u>P</u>	age 5
Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			l	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	_	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	ı			
	person had advisory privileges? If "Yes," attach statement (see instructions)	-	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	Ĺ	13	_X_	
	Website address ► N/A				_
14	The books are in care of ► HEATHER LANDWER Telephone no ► 41	7-88	39-	255	U
	4650 S NATIONAL, SUITE A-1	810			
15	Located at ► SPRINGFIELD MO ZIP+4 ► 65 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	ото			
	and enter the amount of tax-exempt interest received or accrued during the year			,	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority			Yes	No
	over a bank, securities, or other financial account in a foreign country?	- 1	16	, 53	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of	1	.0 1		
	the foreign country				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
		No			
		No			
		No	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		-		
		No	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		1		
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X	No	1		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	NO	1		
U		/A	1b	Ì	
	Organizations relying on a current notice regarding disaster assistance check here				
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<u>' </u>	- 1		
		/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1		
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and		- 1		
	6e, Part XIII) for tax year(s) beginning before 2011?	No	- 1		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	. /	_	- 1	
		/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1		ĺ	
20	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		- 1		
3a		No			
b	at any time during the year? Yes If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or		1		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	İ			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the				
		/A	3b	ĺ	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	ſ	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	ſ			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4b		<u> </u>
		Fo	rm 99	0-PF	(2011)

Forn	1 990-PF (2011) OZARKS HEALTH ADVOCACY FOUNDATI		551131			Pa	age 6
P	art VII-B Statements Regarding Activities for Which Form	4720 May Be F	Required (cont	inued)			
5a	During the year did the foundation pay or incur any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?		res 🏻 No		Ì	
	(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,		_			ſ
	directly or indirectly, any voter registration drive?			res 🗓 No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			res 🏻 No			:
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)			res 🗓 No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, o	r educational	_				
	purposes, or for the prevention of cruelty to children or animals?			res 🗓 No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify und	er the exceptions of	lescribed in				
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see instructions)	>	N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check he			▶ ∐			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax	. —				
	because it maintained expenditure responsibility for the grant?		N/A 📗	∕es No			
	if "Yes," attach the statement required by Regulations section 53 4945-5(d)						
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ay premiums		==		- (
	on a personal benefit contract?			∕es X No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	rsonal benefit conti	ract?		6b		<u> </u>
	If "Yes" to 6b, file Form 8870					- 1	
	At any time during the tax year, was the foundation a party to a prohibited tax sh			res X No			
	If Yes, did the foundation receive any proceeds or have any net income attributa			N/A	7b		
F	art VIII Information About Officers, Directors, Trustees, Fo	undation ivian	agers, Hignly	Paid Employ	ees,		
4	and Contractors List all officers, directors, trustees, foundation managers and their compens	ation (one instrue	tions)				
<u> </u>	list all officers, directors, trustees, foundation managers and their compens	auon (see mstruc	dons).	(d) Contributions to			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit		ense ac	
	(a) name and address	devoted to position	-0-)	plans and deferred compensation	other	allowan	ces
	e Statement 9			- Componibation	 		
50					ļ		
			 				
			,				
					T		
		1	1				
2	Compensation of five highest-paid employees (other than those included of	n line 1—see inst	ructions). If none	e, enter			
	"NONE."		,	•			
		(b) Title, and average		(d) Contributions to			
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense aco allowan	
		devoted to position		compensation			
NC	NE					_	
]			Ì		
		<u> </u>					
Tota	number of other employees paid over \$50,000					Щ	0
				F	orm 99 ()-PF	(2011)

Part VIII Information About Officers, Directors, Trustees, Foundation Manager		Page 7
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see instructions). If none	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		1
		·
		
	 	
Total number of others receiving over \$50,000 for professional services		
Bowt IV A Summary of Direct Charitable Activities		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 Harmony House - to purchase and replace 160 mattr mattress covers for themselves and Victory Missio		
mattless covers for themserves and victory Missio		8,920
2 Isabel's House - for Family Advocate and Assistan	t Family	0,320
Advocate wages.		
		8,086
3 Doula Foundation of Mid-America - to provide Doul	a.	
services to 20 single teen mothers during pregnan	cy and	
the first 12 weeks postpartum.		6,751
4 Lighthouse Child & Family Development Center - to		
implement safe sleep and emergency preparedness p	rojects	
in their centers.		5,000
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	_	

qualifies for the section 4940(e) reduction of tax in those years

<u>Forn</u>	1990-PF (2011) OZAKIS REALIN ADVOCACT FOUNDATION 43-1551151		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreigns instructions.)	ın fou	indations,
_	see instructions)		r
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	}	
	purposes	١.	0 147 531
a	Average monthly fair market value of securities	1a	2,147,531
b	Average of monthly cash balances	1b	36,253
C	Fair market value of all other assets (see instructions)	1c	0 102 704
d	Total (add lines 1a, b, and c)	1d	2,183,784
е	Reduction claimed for blockage or other factors reported on lines 1a and	ļ	
_	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0 100 704
3	Subtract line 2 from line 1d	3	2,183,784
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see	ĺ	
	instructions)	4_	32,757
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,151,027
6	Minimum investment return. Enter 5% of line 5	6	107,551
Pá	art XI Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	107,551
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	750
3	Distributable amount before adjustments Subtract line 2c from line 1	_3_	106,801
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	_5_	106,801
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	106,801
P:	rt XII Qualifying Distributions (see instructions)		
	——————————————————————————————————————		 -
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	97,422
b	Program-related investments—total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	<u> </u>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	97,422
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		· -
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	97,422
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	

Form 990-PF (2011)

Fo	rm 990-PF (2011) OZARKS HEALTH ADVOCACY Part XIII Undistributed Income (see instructions	FOUNDATION	43-155113	1	Page
	Part XIII Undistributed Income (see instructions) 			
1	Distributable amount for 2011 from Part XI, line 7	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
2					106,80
	Undistributed income, if any, as of the end of 2011				
	a Enter amount for 2010 only				
3	b Total for prior years 20 , 20 , 20				
	Excess distributions carryover, if any, to 2011 a From 2006				
	b From 2007				
	c From 2008				
	d From 2009 29,576 2,092				
	f Total of lines 3a through e	21 660			
4	Qualifying distributions for 2011 from Part XII,	31,668			
	line 4 ▶ \$ 97,422	[
á	Applied to 2010, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
	required—see instructions)				
c	Applied to 2011 distributable amount				
	Remaining amount distributed out of corpus				97,422
5	Excess distributions carryover applied to 2011	9,379			
	(If an amount appears in column (d), the same	3,319			9,379
	amount must be shown in column (a))			-	
6	Enter the net total of each column as			ļ	
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	22,289			
	Prior years' undistributed income Subtract				
	line 4b from line 2b			1	
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see instructions				
е	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions	j			
f	Undistributed income for 2011 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2012				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	22,289			
10	Analysis of line 9				
а	Excess from 2007				
b	Excess from 2008				
C	Excess from 2009 20,197				
d	Excess from 2010 2,092				
е	Excess from 2011	Į.	1	1	

10

Part XV Supplementary Information (co	ntinued)			
Part XV Supplementary Information (co 3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	35711.721.011	·
a Paid during the year See Statement 10				76,312
			{	
Total			▶ 3a	76,312
b Approved for future payment N/A				
Total			▶ 3b	

Part XVI-A	Analysis of Income-Producing Act	ivities				
Enter gross am	ounts unless otherwise indicated		ed business income	Excluded	by section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program se	ervice revenue			code	, in oan	(See instructions)
a						
						
d						
f						
g Fees a	nd contracts from government agencies					
2 Membershi	p dues and assessments					
3 Interest on	savings and temporary cash investments			14	11,451	
4 Dividends a	and interest from securities		· · · · · · · · · · · · · · · · · · ·	14	41,803	
	ncome or (loss) from real estate		·····	ļl		<u></u>
	nanced property			 		
	ot-financed property	 		 		
	ncome or (loss) from personal property			 		
7 Other inves				 _ 		
	s) from sales of assets other than inventory			18	29,543	
	or (loss) from special events			├ ──┤		
	or (loss) from sales of inventory			 		
	nue a	<u> </u>		 		
		i	- -	}		
				 -		
				{ 		
12 Subtotal A	dd columns (b), (d), and (e)		0	1	82,797	
	line 12, columns (b), (d), and (e)	<u> </u>		<u>'l1</u>		82,797
	in line 13 instructions to verify calculations)				13	02,191
Part XVI-B		complishm	ent of Exempt P	urnoses		
Line No.	Explain below how each activity for which income					
▼	accomplishment of the foundation's exempt purpor					
N/A				<u>-</u>	· · · · · · · · · · · · · · · · · · ·	
				-		
- 						
						
					·- <u>-</u>	
						
	1					

rm 990-F	PF (2011) OZARKS HE	EALTH AD	VOCACY	FOUNDATI	ON 43	-1551131		Pag	ge 1 3
Part XV			isfers To an	d Transactio	ons and Rel	ationships With N	oncharitable		
	Exempt Organiza							 -	
	he organization directly or ind				-			Yes	No
	ction 501(c) of the Code (othe nizations?	er than section	501(c)(3) orgar	nizations) or in se	ection 527, rela	ting to political			
a Trans	sfers from the reporting found	lation to a nonc	charitable exem	pt organization o	of				
(1) C	Cash						1a(1)		X
(2) C	Other assets						1a(2)		X
b Other	r transactions								
(1) S	sales of assets to a noncharita	able exempt or	ganization				1b(1)		X
(2) P	Purchases of assets from a no	oncharitable ex	empt organizati	ion			1b(2)		X
(3) F	Rental of facilities, equipment,	or other asset	s				1b(3)		X
	Reimbursement arrangements	5					1b(4)		X
	oans or loan guarantees						1b(5)		X
	Performance of services or me						1b(6)		X
	ng of facilities, equipment, m	_					_ 1c	L	X
	answer to any of the above is					•			
	of the goods, other assets, o	_		-					
(a) Line	in any transaction or sharing (b) Amount involved		noncharitable exem			escription of transfers, transaction			
A	(b) Amount involved	(c) Name of	Tioriciantable exem	pt organization	(0) 00	escription of transfers, transacti	ons, and sharing an angeme	11(5	
					 				—
					 				
					 				
					 				
					 	 			—
	-				 				—
	- 				 				
					 				
					 				
-									
					<u> </u>				
descr	foundation directly or indirectly or indirectly or section 501(c) of the 6 s," complete the following scl	Code (other tha				izations	☐ Y€	es X	Nc
	(a) Name of organization		(b) Type of c	organization		(c) Description of	relationship		
N/A									
					 				
					 				
					 				
	nder penalties of perjury, I declare that	at I have avamined	this seture includes	a accompanya ash	adulas and statems	anto and to the heat of my kno	nulades and heliof it is tous		
	priect, and complete Declaration of p						May the IRS discuss this re with the preparer shown be	eturn elow	
gn ere	, s lindy	July	7	111	12/12	Preside	(see instructions)?	Yes	No No
	Signature of officer or trustee	11		Date		1 itle		F	_
d _	Print/Type preparer's name	. ()		Preparer's signatu		H CPL	Date	Check self-emp	if
•	Chomas J Everett Ellio	LL 70-7:	inson a	- d C	_/ /~	1	11/09/15 P00172) E C E	
Only	Firm's same N. H. I. I. C	DEE ROD	ากรดก ลา	വെ ധരത്തമ	nwar i.i.D	I DTIA	. POOT72	つわり	

1736 East Sunshine, Suite 913 Springfield, MO 65804

Firm's address

11/9/2015 4:08 PM

OHAF OZARKS HEALTH ADVOCACY FOUNDATION

Federal Statements

FYE: 6/30/2012

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

	Net Gain / Loss	10,496	29, 543
	Depreciation	S.	0
	Expense	٠ ٠	\$ O
	Cost	119,868 \$	119,868 \$
How Received	Sale Price	Purchase 130,364 \$ Purchase	149,411 \$
	Date Sold	.NT Various Various \$)F THE OZARKS Various Various	٠ د
Description	Date Acquired	EMENT Various Various N OF THE OZARKS Various Various	
)O	Whom Sold	ITI FINANCIAL MANAGEMENT Various Var COMMUNITY FOUNDATION OF THE OZARKS Various Var	Total

- Accounting Fees
ام
छ
퓝
긆
닌
ज्ञ
<u> </u>
990-PF, F
اع
뒤
ᆈ
ᅦ
N
뒴
의
틹
뛺
뙶
47 1

Charitable Purpose	\$ 4,850	\$ 4,850
Adjusted Net	ς _γ	S-
Net Investment	ψ.	S. C.
Total	\$ 4,850	\$ 4,850
Description	ACCOUNTING FEES	Total

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Charitable Purpose	\$	\$
Adjusted Net	\$	\$
Net Investment	\$ 15,747	\$ 15,747
Total	\$ 15,747	\$ 15,747
Description	INVESTMENT MANAGEMENT FEES	Total

₽Z
4:08
015
19/2
Ξ

OHAF OZARKS HEALTH ADVOCACY FOUNDATION 43-1551131

FYE: 6/30/2012

Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Charitable Purpose	100 562 990 10,000 191 728 750 185 2,562	ts	Fair Market Value	\$ 1,052		Fair Market Value \$ 724,597 1,357,221 \$ 2,081,818
Adjusted Net		nment Investmen	Basis of Valuation	Market	k Investments	Basis of Valuation Market
Net Investment		Part II, Line 10a - US and State Government Investments	End of Year	\$ 1,052	Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	End of Year \$ 724,597 1,357,221 \$ 2,081,818
Total	100 100 10,000 10,000 191 728 750 185 2,562 \$		Beginning of Year	\$ 28,282	rm 990-PF, Part II, Lin	Beginning of Year \$ 750,545 1,519,062 \$ 2,269,607
Description	Expenses HONORARIUMS AFP LUNCHEON AND AWARD ADVERTISING/PUBLIC RELATIONS ADMINISTRATIVE FEES OFFICE SUPPLIES TELEPHONE INSURANCE WEBSITE EXPENSES ACCRUAL TO CASH Total	Statement 5 - Form 990-PF,	Description	US GOVERNMENT AGENCIES Total	Statement 6 - Fo	COMMUNITY FOUNDATION MUTUAL FUNDS ITI FINANCIAL MANAGEMENT MUTUAL FUND Total

43-1551131

Federal Statements

FYE: 6/30/2012

Statement 7 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	 <u>Amount</u>
UNREALIZED LOSSES	\$ 115,174
PRIOR PERIOD CHANGE	81,285
ACCRUAL TO CASH ADJUSTMENT	9,073
PROVISION FOR TAXES	 373
Total	\$ 205,905

Statement 8 - Form 990-PF, Part VII-A, Line 8b - Not Filing with Attorney General Explanation

Description

NO SOLICITATION OF DONATIONS IN STATE OF MISSOURI. THEREFORE NO FILING REQUIREMENT WITH MISSOURI ATTORNEY GENERAL DUE TO FOUNDATION'S INCOME GENERATED FROM INVESTMENTS ONLY AND NOT SOLICITING DONATIONS IN STATE OF MISSOURI.

- OZARKS HEALTH ADVOCACY FOUNDATION	
OHAF	

Federal Statements

11/9/2015 4:08 PM

43-1551131 FYE: 6/30/2012

Statement 9 - Form 990-PF	Pal	e 1 - List of O	t VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	rustees, Etc.	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
65808	PRESIDENT	2.00	0	0	0
ELLEN HAMMOCK PO BOX 3195 SPRINGFIELD MO 65808	VICE-PRES	2.00	0	0	0
SUSAN KIRKMAN PO BOX 3195 SPRINGFIELD MO 65808	SECRETARY	2.00	0	0	0
RUTH SHRYACK PO BOX 3195 SPRINGFIELD MO 65808	TREASURER	2.00	0	0	0
65808	MEMBER	2.00	0	0	0
65808	MEMBER	2.00	0	0	0
65808	MEMBER	2.00	0	0	0
65808	MEMBER	2.00	0	0	0
65808	MEMBER	2.00	0	0	0
	MEMBER	2.00	0	0	0

თ

$\boldsymbol{\omega}$
Compensation 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
0 0 0 0
0 0 0
0 0 0
0 0
0

တ

	,
	(
	•
7	1
Ó	•
AT	
S	
9	
Ĭ	
Ó	
Š	
>	
AD	
Ξ	
٩L	
单	
S	
찟	
THAF OZARKS HEALTH ADVOCACY FOUNDATION	
¥	
Ĭ	

Federal Statements

11/9/2015 4:08 PM

OHAF OZARKS I 43-1551131 FYE: 6/30/2012

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the

Name	Ado	Address	!	
Address	Relationship	Status	Purpose	Amount
BOYS & GIRLS TOWN			Hacaatta Wkaccaa	6
COUNCIL CHURCHES OF THE OZARKS				00015
			PROGRAM SUPPORT	2,000
GOOD SAMARITAN CARE CLINIC			PROGRAM SUPPORT	2,811
GYN CANCERS ALLIANCE				000 8
INSIGHT MINISTRIES				
הסווטה מן וממגמו			PROGRAM SUPPORT	2,000
ISABEL S DOOSE			PROGRAM SUPPORT	980'8
MISSOURI MISSION OF MERCY			maccaalla Wkascaa	0
NAMI SOUTHWEST MISSOURI				000 15
			PROGRAM SUPPORT	2,000
OACAC			HACAAIIS WEASCAA	000 8
OZARKS COUNSELING CENTER				
#9 #11 4 COO 94 CK #0 C			PROGRAM SUPPORT	3,000
OZAKNS FOOD HARVESI			PROGRAM SUPPORT	2,000
THE SALVATION ARMY				
CHENTO WITHOUT			PROGRAM SUPPORT	2,250
IND VICILIA CENIER			PROGRAM SUPPORT	3,000
COUNCIL CHURCHES OF THE OZARKS				C
DOUL'A FOUNDATION OF MID-AMERICA			PROGRAM SUPPORT	006,2
; ; ;			PROGRAM SUPPORT	6,751
HAKMONI HOODE			PROGRAM SUPPORT	8,920
LIGHTHOUSE CHILD AND FAMILY DEVELOP	SLOP		Hacaally wraceaa	. 4

9

11/9/2015 4:08 PM	a	ţ i	4,994 5,000 76,312	
OHAF OZARKS HEALTH ADVOCACY FOUNDATION 43-1551131 FYE: 6/30/2012	Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)		PROGRAM SUPPORT PROGRAM SUPPORT	
	n 990-PF, Part XV, Line 3a - Gra <u>Year (continue</u>	Addres	Neighborson Status	
	Statement 10 - Form	Name	THE RARE BREED YOUTH SERVICES COXHEALTH Total	