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DLN: 93493014008743

Department of the Treasury

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 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012 D Employer identification number **B** Check if applicable ARKANSAS 4-H FOUNDATION INC ✓ Address change 71-6060767 E Telephone number Doing Business As Name change (501)671-2044 ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite **G** Gross receipts \$ 2,585,428 2301 SOUTH UNIVERSITY Terminated City or town, state or country, and ZIP + 4 LITTLE ROCK, AR 72204 Amended return Application pending Name and address of principal officer Is this a group return for **VONDA CROCKER** 2301 SOUTH UNIVERSITY LITTLE ROCK, AR 72204 H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions) **▽** 501(c)(3) **□** 501(c) () **◄** (insert no) ☐ 4947(a)(1) or ☐ 527 Group exemption number > Website: ► WWW ARKANSAS4HFOUNDATION COM **L** Year of formation 1951 M State of legal domicile AR Part I Summary Briefly describe the organization's mission or most significant activities SEE SCHEDULE O Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 17 Number of independent voting members of the governing body (Part VI, line 1b) . 17 4 5 0 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . Total number of volunteers (estimate if necessary) 6 10,000 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 539,398 **7**a **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b -125,080 **Prior Year Current Year** 763.808 8 Contributions and grants (Part VIII, line 1h) . 189,997 9 Program service revenue (Part VIII, line 2g) . 1,697,363 1,601,082 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 595,404 -100,865 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12,182 6,577 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 3,068,757 1,696,791 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 44.650 51,095 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 560.396 608,499 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 0 1,756,337 1,750,859 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,361,383 2,410,453 19 Revenue less expenses Subtract line 18 from line 12 . 707,374 -713,662 t Assets or ind Balances **Beginning of Current End of Year** Year 10,698,187 20 Total assets (Part X, line 16) . . . 11,627,881 Net / 21 Total liabilities (Part X, line 26) 475,545 259,513 22 Net assets or fund balances Subtract line 21 from line 20 11,152,336 10,438,674 Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. ***** 2013-01-14 Signature of officer Sign Here VONDA CROCKER PRESIDENT Type or print name and title Date Check if Preparer's taxpayer identification number Preparer's 2013-01-14 JEFF SHANEYFELT (see instructions) P01001009 Paid employed 🕨 🧧 Preparer's LITTLE SHANEYFELT MARSHALL & CO Firm's name (or yours EIN > 71-0804806 if self-employed), address, and ZIP + 4 **Use Only** 1501 N UNIVERSITY SUITE 600 Phone no (501) 666-2879 LITTLE ROCK, AR 72207

May the IRS discuss this return with the preparer shown above? (see instructions) .

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							i age a
Par	t III	Statement of Check if Schedul		ervice Accomp response to any o		art III		r
1	Brief	ly describe the org	janization's mis	sion				
CON	TRIBU	DATION PROVID JTING MEMBERS (GE, SKILLS, AND I	OF SOCIETY T	HROUGH EXPER	IENTIAL LEARN	IING PROGRAMS		G, PRODUCTIVE, AND JTH GAIN THE
_								
2	the p	ne organization und rior Form 990 or 9	90-EZ?					┌ Yes ┌ No
		es," describe these						
3	servi	ne organization cea ces?				wit conducts, an	y program • • • •	┌ Yes ┌ No
	If "Y∈	es," describe these	changes on Sc	hedule O				
4	exper	ribe the organizationses Section 501(s and allocations t	(c)(3) and 501	(c)(4) organizatior	ns and section 49	947(a)(1) trusts a	are required to rep	
4a					UE FOR 4-H GROUP	S WITH FACILITIES TO		1,289,221) M TRAINING SESSIONS, AWARD
4b	(Cod	e) (Expenses \$	100,495	ıncludıng grants (of \$) (Revenue \$	100,495)
	CONS		ORK AND WORKIN	GS OF AMERICAN GOV	/ERNMENT, AS WELL	. AS DUTIES AND SER	VICE EXPECTED FROM	FOR YOUTH TO UNDERSTAND THE I PRODUCTIVE CITIZENS, SUCH
4c	(Cod	e) (Expenses \$	48,610	ıncludıng grants (of \$) (Revenue \$	48,610)
		SHOOTING SPORTS TH ESSARY SAFETY REQUI			BERS IN ARKANSAS	O PARTICIPATE IN A	CTIVITIES TO LEARN T	HE PROPER OPERATION AND THE
	(Cod	e) (Expenses \$	492,926	ıncludıng grants (of \$ 5:	1,095) (Revenue \$	492,926)
	ABOL EDUC THE 5 TO IN AF EXTE ARE COMI COLL HELP FOCU LOWI GRAD THES	JT THE ENVIRONMENT, CATION THE ARKANSA: FOUNDATION CREATES 19 YEARS OF AGE IN A KKANSAS TO DIRECTLY NSION SYSTEM THIS CEXPOSED TO NEWER PIPUTER SCIENCE CURFEGE GRADUATES EARN TO BRIDGE THE GAP I JSING THEIR EFFORTS ER ON THE RISK/PROBDES, WERE MORE BEHACHED GROUPS WITHIN SE SPECIFIC SKILLS WI	AGRICULTURAL S S 4-H PROGRAM T S 6-OPPORTUNITIES, ALL 75 COUNTIES O CONNECT 4-H YC CONNECTION STRA ROJECTS AND EME RENTLY, ONLY 18 F I SCIENCE, ENGINI N SCIENCE APTITL ON THE 5 C'S A S ILEM BEHAVIOR ME AVIORALLY AND EM THE STUDY IT IS THIN OUR YOUTH RADES 3 THROUGH	CIENCES, FAMILY AND EACHES KNOWLEDGE WHICH PROMOTE PO FOF ARKANSAS 'ONE M OUTH AND THE 4-H PR ATEGICALLY POSITIONS ERGING TECHNOLOGIE PERCENT OF US HIGH SERUNG OR TECHNOLOGIE STUDY BY TUFTS UNIV ASURE THAN YOUTH IN OTIONALLY ENGAGE THE GOAL OF THE FO BY DEVELOPING CURE H 12, POST COLLEGE A	O CONSUMER SCIENT AND LIFE SKILLS WI SITIVE YOUTH DEVE ILLION NEW SCIENT OGRAM WITH OVER S 4-H TO STRENGTH S, FOSTERING INTE SCHOOL SENIORS A OGY DEGREES BY ED STUDENTS WHILE FERSITY FOUND 4-H WHO PARTICIPATED WITH SCHOOL, AND UNDATION AND THE RICULA AND PROJECT AND FORM A PERSON	CE, CONSERVATION, VICE ENHANCE QUALL LOPMENT ARKANSAS SOME MILLION N 106 LAND GRANT UN EN US GLOBAL COMPREST IN ROCKETRY, RE PROFICIENT IN SCHOOL OF SOME AND AND THE SOME ARKANSAS 4-H PROFISCH WERE MOST SOME LASO FUND ALL DEVELOPMENT ST	WILDLIFE AND ITS HAY ITY OF LIFE FOR YOUN 4-H CURRENTLY REA EW IDEAS' (TM) WAS IWERSITIES AND COLL ETITIVENESS AND LEA ROBOTICS, BIO-FUELS COPING PROJECTS IN TO FOCUS, ARKANSAS 4- IGHER ON THE CONTE CHOOL ACTIVITIES IN TO SEE THEMSELVES GRAM TO CONTINUE TO ING AND IMPLEMENTI TANDPOINT WE ARE CO	OMPETITIONS TO TEACH YOUTH BITAT AND HUNTER SAFETY NG PEOPLE IN ARKANSAS ALSO, CHES OVER 131,000 YOUTH AGES DEVELOPED AND IS IMPLEMENTED EGES OF COOPERATIVE DERSHIP THROUGH 4-H, YOUTH 5, RENEWABLE ENERGY AND WHILE ONLY 5 PERCENT OF US THESE THREE AREAS, 4-H WILL-H AND ITS FOUNDATION ARE RIBUTION MEASURE AND 41% ADDITION, THEY HAD BETTER GOING TO COLLEGE THAN OTHER TO FOSTER THE DEVELOPMENT OF US AND WITH DEVELOPING
	O+h-	er program service	s (Describe in	Schedule O)				
TU		enses \$	492,926	including grants	of\$	51,095)(Rev	enue \$	492,926)
4e	Tota	al program service	expenses > \$	2,125,8	59			

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💋	2	Yes	<u></u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
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		No
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 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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		No
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	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 21		No
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	5 22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,00 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d an complete Schedule K. If "No," go to line 25			No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	. 24c		
d	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 we a disqualified person during the year? If "Yes," complete Schedule L, Part I	1th 25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? I "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	or 26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substant contributor, or a grant selection committee member, or to a person related to such an individual? <i>If</i> "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part instructions for applicable filing thresholds, conditions, and exceptions)	ίΛ		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Schedule N, Part II	32		No
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		No
	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		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13	3)? 35a		No
b	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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19	7 38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•						
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable							
	1a 0							
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b							
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable							
	gaming (gambling) winnings to prize winners?	1c	Yes					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax							
	Statements filed for the calendar year ending with or within the year covered by this return							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?							
		2b	Yes					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1					
За	Did the organization have unrelated business gross income of \$1,000 or more during the vear?	3a	Yes					
ь	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	Yes					
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 or securities	4a		No				
h	account)?	Tu		No				
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							
	See instructions for ining requirements for Form 1 D F 30-22 1, Report of Foreign Ballk alla Fillaticial Accounts							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No				
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?							
		5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo				
h	organization solicit any contributions that were not tax deductible?							
U	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).			1				
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and							
h	services provided to the payor?	7b	Yes					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	70	165					
	file Form 8282?	7c		Νo				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
	Did the annual to a second and advantable on advantable to a second and a second beautiful.							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	_						
	required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h						
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. DId							
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess		1					
	business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.	1 _	1					
_	Did the organization make any taxable distributions under section 4966?	9a						
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b							
U	facilities							
11	Section 501(c)(12) organizations. Enter							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other							
	sources against amounts due or received from them)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the							
12	year							
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?							
a	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue							
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a						
h	Enter the aggregate amount of reserves the organization is required to maintain by							
U	the states in which the organization is licensed to issue qualified health plans							
c	Enter the aggregate amount of reserves on hand							
1/-	L. L.	1/1-		N.o.				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No				
O	II 163. Has it lied a Form 720 to lepoit these payments (11 170. provide di expidiidtion in Schedule O	14D						

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

Se	ction A. Governing Body and Management					
			Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year					
b	Enter the number of voting members included in line 1a, above, who are independent					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No		
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No		
6 Did the organization have members or stockholders?						
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?						
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
а	The governing body?	8a	Yes			
b Each committee with authority to act on behalf of the governing body?						
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	9		No		
	ection B. Policies (This Section B requests information about policies not required by the Internal					
ке	venue Code.)		Yes	No		
102	Did the organization have local chapters, branches, or affiliates?	10a	163	No		
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		110		
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes			
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes			
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes			
13	Did the organization have a written whistleblower policy?	13	Yes			
14	Did the organization have a written document retention and destruction policy?	14		No		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	15a		No		
b	Other officers or key employees of the organization	15b		No		
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?						
Se	ection C. Disclosure	· · · · · · · · · · · · · · · · · · ·				
17	List the States with which a copy of this Form 990 is required to be filed▶AR					

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.

✓ Own website ✓ Another's website ✓ Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization PATRICIA MADDOX
 2301 S UNIVERSITY

LITTLE ROCK, AR 722044940 (501) 671-2044

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organiza	•	ated or	ganız	atıo	ns c	ompe	nsat	ed any current or fo	ormer officer, direct	or, or trustee
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	unles an	on (d e thai	n one son er ai /trus	e bo: is bo nd a stee)	x, oth	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JIM BAKER BOARD MEMBER	1 00	X	Ψ.			ř		0	0	0
(2) ETTA BELDEN BOARD MEMBER	1 00	Х						0	0	0
(3) VONDA CROCKER PRESIDENT	1 00	Х		х				0	0	0
(4) LAVERNE FEASTER BOARD MEMBER	1 00	Х						0	0	0
(5) SANDY WHITE BOARD MEMBER	1 00	Х						0	0	0
(6) DARWIN HENDRIX BOARD MEMBER	1 00	Х						0	0	0
(7) STEVE LUELF BOARD MEMBER	1 00	х						0	0	0
(8) CHARLES ED MABRY III BOARD MEMBER	1 00	Х						0	0	0
(9) GLEN MANCHESTER BOARD MEMBER	1 00	Х						0	0	0
(10) JOE MILLS VICE PRESIDNET	1 00	Х		Х				0	0	0
(11) MARY ETHEL MORGAN BOARD MEMBER	1 00	Х						0	0	0
(12) PHYLLIS PIPKIN BOARD MEMBER	1 00	Х						0	0	0
(13) BOB ROTEN BOARD MEMBER	1 00	Х						0	0	0
(14) RALPH SHOPTAW TREASURER	2 00	Х		Х				0	0	0
(15) ANNE SORTOR SECRETARY	1 00	Х		Х				0	0	0
(16) EWELL WELCH BOARD MEMBER	1 00	Х						0	0	0
(17) TONY WINDHAM BOARD MEMBER	1 00	Х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(B) A verage hours per week (describe hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						Repo compe fron organiza	ntable nsation n the ation (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estima amount o compens from t organizati relate	ted f other ation he on and
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			HI3C)		organiza	
	BRAD DAVIS JTIVE DIRECTOR	40 00			Х					0		0		46,069
LALC	TIVE DIRECTOR													
												+		
												-		
												+		
1b	Sub-Total							•						
С	Total from continuation sheets							•						
d	Total (add lines 1b and 1c) .							<u> </u>		0		0		46,069
2	Total number of individuals (incli \$100,000 of reportable compens					ted	above) who	received	l more tha	in			
2	Did the surrenment on list on. form				- I.								Yes	No
3	Did the organization list any form on line 1a? If "Yes," complete Sch					eye •	mproy •	ee, o		• •	• • •	3		No
4	For any individual listed on line 1	La, is the sum of	report	able	omi	oens	ation	and	other com	pensatio	n from the	<u> </u>		
	organization and related organization	ations greater th	an \$15	0,00	0 ? <i>I</i>		es," co	mple	ete Schedu	le J for su	ch			
5	Did any person listed on line 1a			•	• tion			unrol	lated orga	· ·	er individual for	4		No_
3	services rendered to the organiz								_			5		Νo
												<u> </u>		
	ction B. Independent Con													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio												
	Nan	(A) ne and business add	dress							Desc	(B) ription of services		(C) Compen	
	Total number of independent conti	wa a tawa (in a lii din		a t 1 . m		1 + - 1	.	l.ata.	امدوطما	h				

\$100,000 of compensation from the organization $\blacktriangleright 0$

Form 99								Page 9
	/1111	Statement o			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
まま	1a	Federated cam	paigns 1a					
준	b	Membership du	ies 1b					
ું.≝	С	Fundraising eve	ents 1c					
<u>≅</u> ,ਰ	d		zations 1d					
ans, Sim	e	Government grants		20,000		ļ		ļ
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	ibutions included in	169,997				
S ₩	h	Total. Add lines	s 1a-1f	▶	189,997			
				Business Code				
Program Service Revenue	2a	LODGING/CONF RO	OOMS	611600	723,432	403,352	320,080	
₽e∡	ь	MEAL/BEVERAGE II	NCOME	611600	565,789	346,471	219,318	
9	С	PARTICIPANT/PRO	G FEES	611600	311,861	311,861		
že.	d							
3	e							
Š Š	f	All other progra	am service revenue					
ξ	g	Total. Add lines	s 2a-2f	<u></u> ▶	1,601,082			
	3		ome (including dividen					
		and other simila	aramounts)	▶ [147,028			147,028
	4	Income from inves	stment of tax-exempt bond	proceeds				
	5	Royalties		•				
			(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	-	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)	-				
		Gross amount	(ı) Securities 631,381	(II) Other				
	7a	from sales of assets other than inventory Less cost or	879,274					
	b	other basis and sales expenses	679,274					
	c	Gain or (loss)	-247,893					
	d	Net gain or (los	ss)		-247,893			-247,893
une	8a	Gross income f events (not inc	luding					
Other Revenue			s reported on line 1c) ne 18 a					
ф	b		penses b					
0	c		(loss) from fundraising	events 🟲 				
	9a		rom gaming activities ne 19 a					
	ь		penses b					
	10a	Net income or (Gross sales of returns and allo		vities				
	.	_	a .	11,721				
	b c		oods sold b (loss) from sales of inv	9,363	2,358	2,358		
	F	Miscellaneous		Business Code	2,330	2,530		
	11a	outinaneou.						
	ь							
	c			+				
	d	All other reven	ue	+	4,219	4,219		
	e	Total. Add lines			•	·		
	12		See Instructions .	*	4,219 1,696,791	1,068,261	539,398	-100,865
	1			1	1,000,791	1,000,201	000,000	100,000

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 response to any question in this Part IX

	neck if Schedule O contains a response to any question in this Part IX	<u></u>		· · ·)	<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	51,095	51,095		
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	474,268	370,279	103,989	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	·	,	,	_
9	Other employee benefits	134,231	96,574	37,657	
10	Payroll taxes				
11	Fees for services (non-employees)				_
а	Management				
b	Legal				_
С	Accounting	28,474		28,474	
d	Lobbying				_
е	Professional fundraising See Part IV, line 17				
f	Investment management fees	25,351	22,552	2,799	
g	Other	96,488	45,331	51,157	_
12	Advertising and promotion	26,417	26,141	276	
13	Office expenses	25,034	16,638	8,396	
14	Information technology	52,698	31,458	21,240	
15	Royalties				
16	Occupancy	336,231	336,231		
17	Travel	175,335	169,080	6,255	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	67,944	66,399	1,545	
20	Interest	1,882	1,882		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	355,487	355,487		
23	Insurance	76,379	76,379		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	FOOD SERVICE COST	220,899	220,899		
b	OTHER OPERATING SUPPLIE	131,059	108,253	22,806	
c	DEMO/WORKSHOP SUPPLIES	68,709	68,709		
d	CONTRACT LABOR	37,955	37,955		
e					
f	All other expenses	24,517	24,517		
25	Total functional expenses. Add lines 1 through 24f	2,410,453	2,125,859	284,594	0
26	Joint costs. Check here ▶ ┌ If following				
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
				Fo	rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 374,237 223,141 1 1 1.181.624 2 1.298.390 2 3 145,000 10,000 3 8.628 4 36.721 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 11.054 8 10.477 9 9 Prepaid expenses and deferred charges 11,231,836 10a Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b b Less accumulated depreciation 5,770,196 5,712,339 10c 5,461,640 11 11 4,008,959 3,703,681 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 69,274 70,903 15 15 11,627,881 10,698,187 16 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 133,211 102,034 17 17 Accounts payable and accrued expenses . 18 18 19 104,781 19 1,993 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 125,436 23 84,246 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 112,117 25 71,240 D 26 475,545 26 259,513 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 6,856,851 27 Unrestricted net assets 6,484,980 3,413,133 28 3,077,527 28 Temporarily restricted net assets Fund 29 882,352 29 876, 167 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 11.152.336 33 10.438.674 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 11.627.881 34 10.698.187

Ра	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,6	596,79
2	Total expenses (must equal Part IX, column (A), line 25)	2			110,45
3	Revenue less expenses Subtract line 2 from line 1	3		-7	713,66
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		11,1	152,33
5	Other changes in net assets or fund balances (explain in Schedule O)	5			(
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		10,4	138,67
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	৮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i	eenad		103	
u	on a separate basis, consolidated basis, or both	ssueu			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the i	required	3b		

Employer identification number

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

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

Public Charity Status and Public Support

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

Name of the organization ARKANSAS 4-H FOUNDATION INC

Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
-									
Total									

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)

and (III) below, the governing body of the the supported organization?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

(ii) a family member of a person described in (i) above?

Yes

11g(i)

11g(ii)

11g(iii)

No

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

S	ection A. Public Support	e organización i	ano to quamy t	111401 (110 (0010 1	ioted below, pie	<u>. 450 001</u>	iipiete i	arc III.)
	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	111	(f) Total
	ın)	(a) 2007	(b) 2008	(6) 2009	(u) 2010	(e) 2	711	(I) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual	309,409	308,69	478,042	493,808		189,997	1,779,949
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its							
_	behalf The value of services or facilities		-					
3	furnished by a governmental unit to							
	the organization without charge	´						
4	Total. Add lines 1 through 3	309,409	308,69	3 478,042	493,808		189,997	1,779,949
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included or	n						
	line 1 that exceeds 2% of the amount shown on line 11, column							
	(f)							
6	Public Support. Subtract line 5 from	n Total						1 770 040
	line 4							1,779,949
S	ection B. Total Support							
Cale	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	11	(f) Total
_	in)							
7	Amounts from line 4	309,409	308,693	478,042	493,808		189,997	1,779,949
8	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties	183,644	123,016	103,809	134,516		147,028	692,013
	and income from similar	·	,	,	, i		<i>'</i>	
	sources							
9	Net income from unrelated							
	business activities, whether or							
	not the business is regularly carried on							
10	Other income (Explain in Part							
10	IV) Do not include gain or loss							
	from the sale of capital assets							
11	Total support (Add lines 7							2,471,962
	through 10)	<u> </u>						
12	Gross receipts from related activit	, ,	ŕ			12		
13	First Five Years If the Form 990 is	for the organization	on's first, second	, thırd, fourth, or fı	fth tax year as a !	501(c)(3) organız	'
	check this box and stop here							▶┌
-54	ection C. Computation of Pul	hlic Sunnort D	ercentage					
14	Public Support Percentage for 201			11 column (f))		14		72 010 %
15	Public Support Percentage for 201	•		(.,,		-		
	-		•			15		70 630 %
16a	33 1/3% support test—2011. If the				ne 14 is 33 1/3%	or more	, check t	his box ► ▼
h	and stop here. The organization qual 33 1/3% support test—2010. If the				a and line 15 is 3	23 1/30%	or more	
	box and stop here. The organizatio				a, and mic 15 is a	, 5 1, 5 70	or more,	•neek tins
17a	10%-facts-and-circumstances test	·		<u> </u>	e 13, 16a, or 16b	and line	14	. ,
	is 10% or more, and if the organiza							
	in Part IV how the organization me	ets the "facts and	cırcumstances"	test The organiza	ition qualifies as a	a publicl	y support	· —
L	organization	2010 Ifthe arm		ahaaka hayaa !	م 12 16- 164 -	r 1 7	d line	►
D	10%-facts-and-circumstances test 15 is 10% or more, and if the organ							
	Explain in Part IV how the organiza							
	supported organization			3000 , 110				▶ □
18	Private Foundation If the organizat	tion did not check	a box on line 13	, 16a, 16b, 17a or	17b, check this I	oox and	see	
	Instructions							▶ □

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

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

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

Additional Data

Software ID:

Software Version:

EIN: 71-6060767

Name: ARKANSAS 4-H FOUNDATION INC

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

) (Expenses \$ 492,926 including grants of \$ 51,095) (Revenue \$ (Code 492,926) ARKANSAS 4-H ALSO PROVIDES PROGRAMMING IN THE FORM OF OUTDOOR CAMPS, WORKSHOPS, SEMINARS AND STATEWIDE COMPETITIONS TO TEACH YOUTH ABOUT THE ENVIRONMENT, AGRICULTURAL SCIENCES, FAMILY AND CONSUMER SCIENCE, CONSERVATION, WILDLIFE AND ITS HABITAT AND HUNTER SAFETY EDUCATION THE ARKANSAS 4-H PROGRAM TEACHES KNOWLEDGE AND LIFE SKILLS WHICH ENHANCE QUALITY OF LIFE FOR YOUNG PEOPLE IN ARKANSAS ALSO, THE FOUNDATION CREATES OPPORTUNITIES, WHICH PROMOTE POSITIVE YOUTH DEVELOPMENT ARKANSAS 4-H CURRENTLY REACHES OVER 131,000 YOUTH AGES 5 TO 19 YEARS OF AGE IN ALL 75 COUNTIES OF ARKANSAS 'ONE MILLION NEW SCIENTISTS, ONE MILLION NEW IDEAS' (TM) WAS DEVELOPED AND IS IMPLEMENTED IN ARKANSAS TO DIRECTLY CONNECT 4-H YOUTH AND THE 4-H PROGRAM WITH OVER 106 LAND GRANT UNIVERSITIES AND COLLEGES OF COOPERATIVE EXTENSION SYSTEM THIS CONNECTION STRATEGICALLY POSITIONS 4-H TO STRENGTHEN US GLOBAL COMPETITIVENESS AND LEADERSHIP THROUGH 4-H, YOUTH ARE EXPOSED TO NEWER PROJECTS AND EMERGING TECHNOLOGIES, FOSTERING INTEREST IN ROCKETRY. ROBOTICS, BIO-FUELS, RENEWABLE ENERGY AND COMPUTER SCIENCE CURRENTLY, ONLY 18 PERCENT OF US HIGH SCHOOL SENIORS ARE PROFICIENT IN SCIENCE (NAEP 2005), WHILE ONLY 5 PERCENT OF US COLLEGE GRADUATES EARN SCIENCE, ENGINEERING OR TECHNOLOGY DEGREES BY EXPANDING AND DEVELOPING PROJECTS IN THESE THREE AREAS, 4-H WILL HELP TO BRIDGE THE GAP IN SCIENCE APTITUDE OF HIGH SCHOOL STUDENTS WHILE EXPANDING PROJECT FOCUS, ARKANSAS 4-H AND ITS FOUNDATION ARE FOCUSING THEIR EFFORTS ON THE 5 C'S A STUDY BY TUFTS UNIVERSITY FOUND 4-H YOUTH WERE 25% HIGHER ON THE CONTRIBUTION MEASURE AND 41% LOWER ON THE RISK/PROBLEM BEHAVIOR MEASURE THAN YOUTH WHO PARTICIPATED IN OTHER OUT OF SCHOOL ACTIVITIES IN ADDITION. THEY HAD BETTER GRADES, WERE MORE BEHAVIORALLY AND EMOTIONALLY ENGAGED WITH SCHOOL, AND WERE MORE LIKELY TO SEE THEMSELVES GOING TO COLLEGE THAN OTHER MATCHED GROUPS WITHIN THE STUDY IT IS THE GOAL OF THE FOUNDATION AND THE ARKANSAS 4-H PROGRAM TO CONTINUE TO FOSTER THE DEVELOPMENT OF THESE SPECIFIC SKILLS WITHIN OUR YOUTH BY DEVELOPING CURRICULA AND PROJECTS WHILE ALSO FUNDING AND IMPLEMENTING PROGRAMS THAT HELP THEM TO ACHIEVE SUCCESS IN GRADES 3 THROUGH 12, POST COLLEGE AND FORM A PERSONAL DEVELOPMENT STANDPOINT WE ARE CHARGED WITH DEVELOPING TOMORROW'S LEADERS AND FEEL IT NECESSARY TO SPEND BOTH THE FINANCIAL AND VOLUNTEER CAPITAL NEEDED TO DO SO

DLN: 93493014008743

OMB No 1545-0047

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

ntema	al Revenue Service	► Attach to Fe	orm 990. ► See sepa	rate instructions.			Inspec	tion
Name of the organ			Empl	ation numb	er			
ARI	KANSAS 4-H FOUNDA	ALION INC			71-6	060767		
Pa		izations Maintaining Donor A					. Comple	te if the
	organiz	cation answered "Yes" to Form 99	, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			L) F d d .		
1	Total number a	t and of year	(a) Donor a	dvised funds	(b) Funds and o	other accou	ints
2		ributions to (during year)						
3		ts from (during year)						
4	Aggregate valu	• • •						
5	Did the organiz	ration inform all donors and donor advi rganization's property, subject to the			nor advis	sed	┌ Yes	┌ No
6	Did the organiz used only for cl conferring impe		☐ Yes	┌ No				
Pa	rt III Conse	rvation Easements. Complete	ıf the organızatıoı	າ answered "Yes" t	o Form	990, Part I\	/, line 7.	
2	Preservati Protection Preservati Complete lines	conservation easements held by the o on of land for public use (e g , recreati of natural habitat on of open space 2a-2d if the organization held a qual ne last day of the tax year	on or pleasure) F	Preservation of an Preservation of a	certified	historic struc	=	ea
						Held at the	End of the	e Year
а	Total number o	f conservation easements			2a			
b	Total acreage i	restricted by conservation easements			2b			
c	Number of cons	er of conservation easements on a certified historic structure included in (a)						
d	Number of cons	servation easements included in (c) a	2d					
3	Number of cons	servation easements modified, transfe	erred, released, extir	guished, or terminate	ed by th	e organızatıon	during	
	the taxable yea	ar ⊩						
4	Number of stat	es where property subject to conserva	ation easement is lo	:ated ►				
5	-	nization have a written policy regarding the conservation easements it holds		ring, inspection, hand	dling of	violations, and	☐ Yes	┌ No
6	Staff and volun	teer hours devoted to monitoring, insp	pecting and enforcing	j conservation easem	nents du	ırıng the year l	<u> </u>	
7	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing co	nservation easement:	s during	the year		
	► \$							
8		servation easement reported on line 2) and 170(h)(4)(B)(ii)?	2(d) above satisfy th	e requirements of sec	ction		┌ Yes	┌ No
9	balance sheet,	escribe how the organization reports of and include, if applicable, the text of the n's accounting for conservation easer	the footnote to the o					
Par		izations Maintaining Collection ete ıf the organızatıon answered '			or Oth	er Similar	Assets.	
1a	art, historical t	cion elected, as permitted under SFAS reasures, or other similar assets held to XIV, the text of the footnote to its fir	for public exhibition	, education or resear	ch ın fur			e,
b	historical treas	cion elected, as permitted under SFAS cures, or other similar assets held for owing amounts relating to these items	public exhibition, ed					
	(i) Revenues II	ncluded in Form 990, Part VIII, line 1				► \$		
		uded in Form 990, Part X					1	97,072
2	If the organizat	cion received or held works of art, hist nts required to be reported under SFA			or financ			

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tre</u>	asures, c	r Othe	<u>r Simila</u>	<u>r Asse</u>	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	lowing th	at are a sıgr	nificant u	ise of its c	ollection	1	
а	Public exhibition		d	\sqcap	Loan or	exchange p	rograms	;			
b	Scholarly research		e	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y further	the organiza	ition's ex	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							nılar	Г	Yes	√ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	ete ıf	the	organiz	ation answ		es" to Fo	rm 990),	<u> </u>
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ian or other interme	ediary	for c	ontrıbutı	ons or other	assets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng t	able			1	Amou	ınt	
С	Beginning balance						1c		Alliot		
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on Fo	orm 000 Dar+ V I	_ 717					1		Yes	□ No
2a	-		e 21 '						ı	1 62	i iAO
	If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete		n and		ad "Vac'	" to Form (100 Da	rt IV/ Juna	10		
Pa	endowinent Funds. Complete	(a)Current Year)Prior		(c)Two Years		I)Three Years)Four Y	ears Back
1a	Beginning of year balance	1,632,713			,368,299		58,350	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7	
b	Contributions	106,141			109,954	4	58,356				
c	Investment earnings or losses	-42,059			189,297		84,587				
d	Grants or scholarships										
e	Other expenditures for facilities and programs	44,265			34,837		32,994				
f	Administrative expenses										
g	End of year balance	1,652,530		1	,632,713	1,3	68,299				
2	Provide the estimated percentage of the yea	r end balance held	as		•		•				
а	Board designated or quasi-endowment 🕨	24 000 %									
b	Permanent endowment - 76 000 %										
c	Term endowment ►										
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	are held a	and adminis	tered for	the			
	organization by									Yes	No
	(i) unrelated organizations			•					3a(i)		No
L	(ii) related organizations								3a(ii)	<u> </u>	No
ь 4	Describe in Part XIV the intended uses of the	•							3b		
	t VI Land, Buildings, and Equipme					<u> </u>					
FCI		int. See roini 93	о, га					(-) (
	Description of property) Cost or o		t or other (other)	(c) Accum deprecia		(d) Bo	ok value
1a	Land						210,200				210,200
b I	Buildings		•				9,252,583	5,	770,196		3,482,387
c l	Leasehold improvements										
d I	Equipment						646,327				646,327
	Other						1,122,726				1,122,726
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	nn (B)), line	10(c).)			•			5,461,640
								Sched	lule D (F	orm 9	90) 2011

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)O ther		
(A) UBS INVESTMENTS - RESTRICTED FUND	836,305	F
(B) UBS REYNOLDS MAINTENANCE	1,162,856	F
(C) UBS INVESTMENTS - 4-H FOUNDATION	1,704,520	F
	2702604	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. Se		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, II	ne 15.	
(a) Descri	ption	(b) Book value
Part X Other Liabilities. See Form 990, Part X, col.(B) line 3		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	(b) Amount	
	24.442	
CUSTOMER DEPOSITS DUE TO AFFILIATE	24,442 46,798	
DOL TO ATTILIATE	40,730	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	71,240	
, , , , , , , , , , , , , , , , , , ,	/1,240	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,696,791
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,410,453
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-713,662
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 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-713,662
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,706,154
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	9,363
3	Subtract line 2e from line 1	3	1,696,791
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		
c	Add lines 4a and 4b	4 c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,696,791
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	2,419,816
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	9,363
3	Subtract line 2e from line 1	3	2,410,453
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		, ,
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
	Add inico the driver of the control		
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	2,410,453

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") HAS ISSUED STANDARDS UNDER THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING STANDARDS BOARD CODIFICATION (THE "CODIFICATION") RELATED TO UNCERTAINTIES IN INCOME TAXES THE FOUNDATION HAS ADOPTED THESE STANDARDS AND ACCORDINGLY, MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 9,363
PART XIII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 9,363

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Schedule I (Form 990)

Department of the Treasury

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

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

OMB No 1545-0047

DLN: 93493014008743

Inspection

Internal Revenue Service			Attach to Form 990				Inspection
Name of the organization ARKANSAS 4-H FOUNDATION IN	С					Employer identification	on number
Company Linda was a	: Gt	I A: - t				71-6060767	
Part I General Informat 1 Does the organization mainta the selection criteria used to 2 Describe in Part IV the organization	ın records to substantı award the grants or as	ate the amount of the sistance?					┌ Yes ┌
Form 990, Part IV, I	ine 21 for any recip	ient that received r	rganizations in the nore than \$5,000. Ch needed	eck this box if no one	recipient receive	ed more than \$5,000.	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of section	501(c)(3) and govern	nent organizations lis	ted in the line 1 table .			. _	
3 Enter total number of other or	ganızatıons lısted ın th	e line 1 table				🕨	

(a)Type of grant or assistance

Return Reference

(1) COLLEGE SCHOLARSHIPS

Identifier

(f)Description of non-cash assistance

Schedule I (Form 990) 2011

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

44,875

(d)A mount of

non-cash assistance

(e)Method of valuation (book,

FMV, appraisal, other)

(c)A mount of

cash grant

(b)Number of

36

Explanation

recipients

(2) 4H ACTIVITIES	1	500					
(3) 4H PROGRAM GRANT AWARDS	20	5,720					
Part IV Supplemental Informat	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.						

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DLN: 93493014008743

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization ARKANSAS 4-H FOUNDATION INC

Employer identification number

D.=	Tunos of Dronoutin				71-6060767			
Pa	Types of Property	(a) Check ıf applıcable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	(d Method of d contribution	etermır		
1	Art—Works of art			-				
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
.2	Securities—Miscellaneous							
.3	Qualified conservation contribution—Historic							
.4	structures							
5	Real estate—Residential .							
6	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	GLASS DOOR AND							
25	Other \blacktriangleright (INSTALLLATION)	Х	1	7,000	FMV GOODS			
26	BUILDING Other►(<u>DISCOUNT</u>)	Х	1	6,500	FMV GOODS			
	Other►(<u>VARIOUS</u>)	X	5	11,017	FMV GOODS			
8	O ther ▶ ()				1			
29	Number of Forms 8283 received for which the organization compl				29			i
	Duran with a second of the sec	4	a haa aanka ta t		1 20 1		Yes	No
sva	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif					31	 	Νo
52a	Does the organization hire or use contributions?	e third part	ies or related organizations	to solicit, process, or sell	non-casn	32a		Νo
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

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DLN: 93493014008743

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization ARKANSAS 4-H FOUNDATION INC

Employer identification number

71-6060767

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 3	THE FOUNDATION OPERATES UNDER A COOPERATIVE AGREEMENT WHEREBY SIGNIFICANT ADMINISTRATIVE SERVICES ARE PROVIDED TO THE FOUNDATION BY THE UNIVERSITY OF ARKANSAS COOPERATIVE EXTENSION SERVICES (CES) AT NOT COST TO THE FOUNDATION THESE SERVICES INCLUDE PROGRAM, ADMINISTRATION, AND ACCOUNTING SERVICES PROVIDED BY CES IN ADDITION, CES ALSO PROVIDES OFFICE FACILITIES FOR THE EXECUTIVE DIRECTOR, FOUNDATION ACCOUNTANT AND HALF TIME SECRETARY IN CONSIDERATION OF THIS AGREEMENT, CES RECEIVES AN IN-KIND GIFT OR COMPENSATION TO USE THE ORGANIZATIONS FACILITIES AT REDUCED OR NO COST TO CES
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS REVIEWED BY EXECUTIVE DIRECTOR, ACCOUNTANT, AND BOARD MEMBERS FORM 990 WILL BE EMAILED TO BOARD MEMBERS
	FORM 990, PART VI, SECTION B, LINE 12C	A CONFLICT OF INTEREST STATEMENT IS REQUIRED YEARLY FROM EACH DIRECTOR
	FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS ARE PRESENTED AND HARD COPIES PROVIDED TO BOARD MEMBERS AT QUARTERLY BOARD MEETINGS DOCUMENTS ARE ALSO POSTED ON THE ORGANIZATION'S WEBSITE AND ARE AVAILABLE UPON REQUEST
		THE ARKANSAS 4-H PROGRAMS PROGRAMS ARE DESIGNED TO DEVELOP LEADERSHIP & LIFE SKILLS DEVELOPING YOUTH TO BE SELF-DIRECTING, PRODUCTIVE, AND CONTRIBUTING MEMBERS OF SOCIETY THROUGHT 82 PROJECT AREAS THAT HELP YOUTH GAIN THE KNOWLEDGE, SKILLS, AND BEHAVIOR NEEDED TO BE SUCCESSFUL ADULTS PREPARING YOUTH FOR THEIR FUTURE ROLES IN AREAS CRITICAL TO OUR WORKFORCE, LIKE SCIENCE, TECHNOLOGY, ENGINEERING AND MATHEMATICS ALSO, THE 4-H PROGRAM FOCUSES ON THE "5 C'S" OF POSITIVE YOUTH DEVELOPMENT COMPETENCE, CONFIDENCE, CONNECTION, CHARACTER AND CARING/COMPASSION BY INSTILLING AND DEVELOPING THE "5 C'S", CONTRIBUTION IS OFTEN DEVELOPED, A CONTRIBUTION TO SELF, FAMILY, COMMUNITY AND THE INSTITUTION OF A CIVIL SOCIETY YOUTH WHO DO NOT DEVELOP A HIGH LEVEL OF THE FIVE C'S WOULD BE AT HIGHER RISK FOR A DEVELOPMENTAL PATH THAT INCLUDED PERSONAL, SOCIAL AND BEHAVIORAL PROBLEMS AND RISKS (LERNER 2004)