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## Form 990-PF

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

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2012

Open to Public Inspection

For calendar year 2012 or tax year beginning , and ending A Employer Identification number Name of foundation 58-2024178 Arkansas Eastman Scholarship Trust Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Citizens Bank, PO Box 2156 City or town, state, and ZIP code C If exemption application is pending, check here 72503 Batesville Initial return of a former public charity G Check all that apply. Initial return D 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test Address change Name change check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here Fair market value of all assets at end J Accounting method X Cash Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), Other (specify) line 16) ► \$ 69,610 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes books the amounts in column (a) (see instructions) ) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 2,153 4 Dividends and interest from securities 2,153 2,153 5 a Gross rents b Net rental income or (loss) Revenue -2.001 6 a Net gain or (loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) MAK 2013 Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 2,153 2,153 152 13 1,000 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 728 728 728 **b** Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 22 22 18 Taxes (attach schedule) (see instructions) 22 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings and 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 750 750 Add lines 13 through 23 1,750 8,000 25 Contributions, gifts, grants paid 8,000 26 Total expenses and disbursements. Add lines 24 and 25 750 750 9,750 8,000 27 Subtract line 26 from line 12 -9.598 2 Excess of revenue over expenses and disbursements 1,403 **b Net Investment Income** (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-)

1.403

_		Attached schedules and amounts in the description column	beginning or year	Enac	n year
Pa	rt II	Balance Sheets Attached scriedules and anitomis in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing .			
	2	Savings and temporary cash investments	4,094	193	193
:	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
Assets	8	Inventories for sale or use			· · · · · · · · · · · · · · · · · · ·
	9	Prepaid expenses and deferred charges			
	10 :	Investments—U S and state government obligations (attach schedule)			-·
	l	b Investments—corporate stock (attach schedule)	94,191	88,494	69,417
		C Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	98,285	88,687	69,610
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
E E	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
a	21	Mortgages and other notes payable (attach schedule)		<u> </u>	
	22	Other liabilities (describe  )			
	23	Total liabilities (add lines 17 through 22)	0	0	
40		Foundations that follow SFAS 117, check here			
ě		and complete lines 24 through 26 and lines 30 and 31.			
alances	24	Unrestricted			
	25	Temporarily restricted .			
8	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
Net Assets or Fund	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	200,100	20,100	
SS	29	Retained earnings, accumulated income, endowment, or other funds	-101,815	68,587	
tΑ	30	Total net assets or fund balances (see instructions)	98,285	88,687	
ē	31	Total liabilities and net assets/fund balances (see			
		instructions)	98,285	88,687	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with		
		of-year figure reported on prior year's return)	1	98,285	
2		r amount from Part I, line 27a	•	. 2	-9,598
3		r increases not included in line 2 (itemize)			
4		lines 1, 2, and 3		4	88,687
5					
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, c	olumn (b), line 30	6	88,687

(a) List and describe the kill	nd(s) of property sold (e.g., real estat or common stock, 200 shs MLC Co	te,		(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr )	(d) Date sold (mo , day, yr )
1a							
<b>b</b>							
С							
d		•					
e							
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)			other basis nse of sale			or (loss) minus (g)
a							
b							
C							
d							
е							
Complete only for assets showing	g gain in column (h) and owned	by the	foundation	n on 12/31/69		(I) Gains (Col	(h) gain minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69			ss of col (i) (j), if any			less than -0-) <b>or</b> om col (h))
а							
b							
c							
d							
e							
2 Capital gain net income or (ne	et capital loss) { If gain, a				2		
3 Net short-term capital gain or					<del> +</del>		<del>`</del>
If gain, also enter in Part I, line							
in Part I, line 8	e e, column (e) (eee mearcea	0110, 1	, (1000), 0	}	3		C
	er Section 4940(e) for Re	oduce	d Tay	n Nat Investm	ent in	come	
If section 4940(d)(2) applies, leav Was the foundation liable for the If "Yes," the foundation does not d	section 4942 tax on the distri qualify under section 4940(e)	) Don	ot compl	ete this part			Yes No
	nt in each column for each ye	ear, se	e the ins	tructions before m	naking .	any entries	
(a) Base penod years	(b)			(c)	ŀ	Dist	(d) ribution ratio
Calendar year (or tax year beginning in)	Adjusted qualifying distribution	ns	Net value	of nonchantable-use a	ssets		livided by col (c))
2011		4,300		7	1,764		0 059919
2010		5,300		92	2,050		0 057577
2009							0 000000
2008							0 000000
2007							0 000000
2 Total of line 1, column (d)					L	2	0 117496
3 Average distribution ratio for t					1		
the number of years the found	dation has been in existence	if less	than 5 y	ears	L	3	0 058748
4 Enter the net value of noncha	aritable-use assets for 2012 f	rom P	art X, line	5	L	4	
5 Multiply line 4 by line 3					1	5	
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b	)				6	(
	(1.1. 21.7 21.1) 2.0	•			Ī		
7 Add lines 5 and 6	•	•			}	7	(
8 Enter qualifying distributions						8	(
If line 8 is equal to or greater		Part \	/I, line 1t	, and complete th	at part	using a 1% t	ax rate See
the Part VI instructions							

Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	truction	18)		
1 a	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)			- 1	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			28	
_	here  and enter 1% of Part I, line 27b			ĺ	
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%  of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			ol	
3	Add lines 1 and 2			28	
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-			28	
6	Credits/Payments				
а	2012 estimated tax payments and 2011 overpayment credited to 2012				
b	Exempt foreign organizations—tax withheld at source 6b			l	
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d			0	
8	Enter any penalty for underpayment of estimated tax. Check here				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			28	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0	
11	<u> </u>			0	
Par	t VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	ļ		Yes	No
	participate or intervene in any political campaign?	<u> </u>	a		<u> </u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	. ا	.	ŀ	v
	Instructions for the definition)?	-	b		_ <u>X</u> _
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			J	
_	published or distributed by the foundation in connection with the activities		c		Х
	Did the foundation file <b>Form 1120-POL</b> for this year?  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	<del>                                     </del>			
u	(1) On the foundation > \$ (2) On foundation managers > \$	İ	- 1		
A	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-	- 1		
	on foundation managers > \$		ı		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	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	i	ĺ		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	L	3		_X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-	la		_X_
	if "Yes," has it filed a tax return on Form 990-T for this year?	<u> </u>		N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u>	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 language in the governing instrument, or  By attack level that offerture the government and the government and that no mandatory directions.		Ì		
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> <li>that conflict with the state law remain in the governing instrument?</li> </ul>		6	Х	
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	
	Enter the states to which the foundation reports or with which it is registered (see instructions)				
_ •	AR				
ь	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				
_	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8	3b_	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)		$\neg$		
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing				
	their names and addresses		10		Х

Part	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 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► Citizens Bank of Batesville Telephone no ► 870-793-44	41	·	
	Located at ► P O Box 2156 Batesville AR ZIP+4 ► 72503		·	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fieu of Form 1041—Check here		>	• 🗀
	and enter the amount of tax-exempt interest received or accrued during the year	-	Van	No
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	16	Yes	X
	over a bank, securities, or other financial account in a foreign country?	10		_^_
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign country.			
Dar	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Гаг	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ī	Yes	No
1a	·		100	140
Id	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(e) Fullian goods, solviess, or issumes to (at assept them noting a state and	1		
	for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the 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 )			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	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))  At the end of tax year 2012, did the foundation have any undistributed income (lines 6d		<b> </b>	1
а	and 6e, Part XIII) for tax year(s) beginning before 2012?  Yes X No		i	
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>▶</b> 20 20 20		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business		ŀ	
	enterprise at any time during the year?			1
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3ь	N/A	
4		4a	14/7	X
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	740	<del> </del>	<del>  ^</del>
IJ	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		×

orm'990	PF (2012) Arkansas Eastman Scholarshi	p Trust			8-2024178	Page <b>6</b>
art V		ies for Which For	m 4720 May Be f	Required (continued)		
a Dur	ing the year did the foundation pay or incur any					
(1)	Carry on propaganda, or otherwise attempt to	influence legislation (s	section 4945(e))?	Yes X	] No	
(2)	Influence the outcome of any specific public of	election (see section 49	55), or to carry		,	!
	on, directly or indirectly, any voter registration	n drive?		Yes X	No	
(3)	Provide a grant to an individual for travel, stu-	dv. or other similar purp	oses?	X Yes	No	
	Provide a grant to an organization other than				1	
, ,	in section 509(a)(1), (2), or (3), or section 494			Yes X	No	
(5)	Provide for any purpose other than religious,	charitable, scientific, lite	erary, or		-	1
•	educational purposes, or for the prevention o	f cruelty to children or a	inimals?	Yes X	No	
) If a	ny answer is "Yes" to 5a(1)–(5), did <b>any</b> of the t	ransactions fail to quali	fy under the exception	s described in		
	julations section 53 4945 or in a current notice i				5b	X
•	anizations relying on a current notice regarding			▶ _		
-	e answer is "Yes" to question 5a(4), does the fo					
	because it maintained expenditure responsibilit			Yes	] No	
	es," attach the statement required by Regulat		i(d)			
a Did	the foundation, during the year, receive any fur	nds, directly or indirectly	/, to pay		_	
	miums on a personal benefit contract?			Yes X	No	
<b>b</b> Did	the foundation, during the year, pay premiums,	directly or indirectly, or	n a personal benefit co	ontract?	6b	X
	Ves" to 6b, file Form 8870				_	
a. Ata	any time during the tax year, was the foundation	a party to a prohibited	tax shelter transaction	η? Yes X	No	
	es," did the foundation receive any proceeds of				7b	N/A
Part '	Information About Officers	Directors, Truste	es, Foundation	Managers, Highly Pa	id Employ	/ees,
	and Contractors					
1 Lis		ion managers and t	heir compensation	(see instructions).		
1 Lis	and Contractors	ion managers and t (b) Title, and average hours per week	heir compensation (c) Compensation (if not paid, enter	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
	and Contractors t all officers, directors, trustees, foundat (a) Name and address	ion managers and t (b) Title, and average hours per week devoted to position	heir compensation (c) Compensation	(see instructions). (d) Contributions to	(e) Expen	se account,
itizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
itizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address	ion managers and t (b) Title, and average hours per week devoted to position	heir compensation (c) Compensation (if not paid, enter	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
itizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
itizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
itizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
itizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
itizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions). (d) Contributions to employee benefit plans	(e) Expen	se account,
Citizen	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville ox 2156 Batesville, AR 72503	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions).  (d) Contributions to employee benefit plans and deferred compensation	(e) Expen other al	se account,
O Bo	and Contractors t all officers, directors, trustees, foundat  (a) Name and address s Bank of Batesville ox 2156 Batesville, AR 72503	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00	heir compensation (c) Compensation (if not paid, enter -0-)	(see instructions).  (d) Contributions to employee benefit plans and deferred compensation	(e) Expen other al	se account,
O Bo	and Contractors t all officers, directors, trustees, foundat (a) Name and address s Bank of Batesville ox 2156 Batesville, AR 72503	clon managers and to (b) Title, and average hours per week devoted to position.  Trustee 5 00	heir compensation (c) Compensation (if not paid, enter -0-)  1,000	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If r	(e) Expen other al	se account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundat  (a) Name and address s Bank of Batesville ox 2156 Batesville, AR 72503	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions).  (d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If recompleted in the plans and the plans are plans and the plans are plans and the plans are plant are plans are plant are plans are plant are plans are plant	(e) Expen other al	ise account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and to  (b) Title, and average hours per week devoted to position  Trustee 5 00  ees (other than those)	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If r	(e) Expen other al	se account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If reference in the compensation i	(e) Expen other al	ise account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If reference in the compensation i	(e) Expen other al	ise account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If reference in the compensation i	(e) Expen other al	ise account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If reference in the compensation i	(e) Expen other al	ise account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If reference in the compensation i	(e) Expen other al	ise account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If reference in the compensation i	(e) Expenother al	ise account, llowances
2 Co	and Contractors t all officers, directors, trustees, foundate (a) Name and address s Bank of Batesville (b) 2156 Batesville, AR 72503  mpensation of five highest-paid employeer "NONE."	ion managers and t  (b) Title, and average hours per week devoted to position  Trustee  5 00  (b) Title, and average hours per week devoted to position  Trustee	heir compensation (c) Compensation (if not paid, enter -0-)  1,000  e included on line	(d) Contributions to employee benefit plans and deferred compensation  1—see instructions). If reference in the compensation i	(e) Expenother al	ise account, llowances

Total number of other employees paid over \$50,000

Form 990-PF (2012)	Arkansas Eastman Scholarship Trust		58-2024178 Page <b>7</b>
Part VIII	Information About Officers, Directors, Trustee	es, Foundation Managers, Highly Pa	id Employees,
	and Contractors (continued)		
	st-paid independent contractors for professional services		
	lame and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			}
<del></del>			
Total number of	others receiving over \$50,000 for professional services	<b>_</b>	<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
		nt statistical information such as	T
	s four largest direct chantable activities during the tax year. Include releva inizations and other beneficiaries served, conferences convened, research		Expenses
1 The purpose	of this trust is to provide scholarships for full-time student	ts who are qualified to attend	
college Dur	ing 2010, three scholarships of \$100 and four scholarship	s of \$1,000 per student were	
awarded			8,000
2			
3			<del> </del>
<b></b>			
4			
Part IX-B	Summary of Program-Related Investments (se		· · · · · · · · · · · · · · · · · · ·
	rgest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1 None			
2			
All other program-re	elated investments. See instructions		
3			
			1

Total. Add lines 1 through 3

0

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

Part	XIII Undistributed incom	ne (see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from	m Part XI,	Corpus	Years pnor to 2011	2011	2012
	line 7					3,381
2	Undistributed income, if any, as o	of the end of 2012				
а	Enter amount for 2011 only	<u></u>			0	
b	Total for prior years 20, 2	20, 20				
3	Excess distributions carryover, if	any, to 2012				
а	From 2007	19,396				
b	From 2008	10,266				
C	From 2009	447				
d	From 2010	708				
е	From 2011	734				
f	Total of lines 3a through e	_	31,551			
4	Qualifying distributions for 2012 f					
	XII, line 4 > \$					
	Applied to 2011, but not more that	ļr.				<del></del>
b	Applied to undistributed income of	·				
_	(Election required—see instruction					
С	Treated as distributions out of co	rpus (Election				
	required—see instructions)	<b>.</b>				3,381
	Applied to 2012 distributable amo	Г	4.619			3,301
е 5	Remaining amount distributed ou Excess distributions carryover ap	· -	4,019			
3	(If an amount appears in column	•				
	same amount must be shown in					
6	Enter the net total of each col				,	
_	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	36,170			
b	Prior years' undistributed income	Subtract				
	line 4b from line 2b .	. L		0		
C	Enter the amount of prior years'	undistributed				
	income for which a notice of defi-	ciency has				
	been issued, or on which the sec	ction 4942(a)				•
	tax has been previously assesse					
d	Subtract line 6c from line 6b Tax	rable				
	amount—see instructions	-				
е	Undistributed income for 2011 S	1				
	4a from line 2a Taxable amount	—see			o	
	instructions	\b.4				
T	Undistributed income for 2012 S			ļ		
	lines 4d and 5 from line 1. This a	imount must				0
7	be distributed in 2013  Amounts treated as distributions	out of				
•	corpus to satisfy requirements in					
	section 170(b)(1)(F) or 4942(g)(3					
8	Excess distributions carryover from	· · ·			····	
•	not applied on line 5 or line 7 (se		19,396			
9	Excess distributions carryove	Г				
•	Subtract lines 7 and 8 from line 6		16,774			
10	Analysis of line 9	  -				
	Excess from 2008	10,266				
	Excess from 2009	447			1	
	Excess from 2010	708		1		
	Excess from 2011	734		ļ		
	Excess from 2012	4,619				

Form	1 990-P	F (2012) Arkansas Eastman Scholars	hip Trust			58-2024	178 Page <b>10</b>
Par	t XIV			nd Part VII-A, q	uestion 9)		
1 a		foundation has received a ruling or determin dation, and the ruling is effective for 2012, ent	•		<b>•</b>	3/3/1993	
b	Chec	k box to indicate whether the foundation is a	private operating found	dation described in s	section	X 4942(j)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net		Tax year		Prior 3 years		
		ne from Part I or the minimum tment return from Part X for each	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total
	year	listed .	1,403	1,113	542	1,230	4,288
b	85%	of line 2a .	1,193	946	461	1,046	3,646
С		fying distributions from Part XII, for each year listed	8,000	4,300	5,300	5,300	22,900
d		unts included in line 2c not used directly ctive conduct of exempt activities .					0
	for a	fying distributions made directly ctive conduct of exempt activities ract line 2d from line 2c	8,000	4,300	5,300	5,300	22,900
3 a	alterr "Asse	plete 3a, b, or c for the native test relied upon ets" alternative test—enter.			70.000	70.024	455 407
	(1)	Value of all assets			76,863	78,634	155,497
		Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	of ma	owment" alternative test—enter 2/3 nimum investment return shown in X, line 6 for each year listed	2,273	2,392	3,069	3,235	10,969
C	"Sup	port" alternative test-enter					
	•	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	` .	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3)	Largest amount of support					
		from an exempt organization					0
	(4)	Gross investment income .	2,153	2,124	2,007	2,184	8,468
Pa	rt XV	Supplementary Information (Co assets at any time during the ye	•	-	ndation had \$5	ni erom ro 000,	
1		rmation Regarding Foundation Manage		_			
а		any managers of the foundation who have co re the close of any tax year (but only if they h				he foundation	
NO							
р		any managers of the foundation who own 109 ership of a partnership or other entity) of which				rtion of the	
NO		ership of a partitlership of other entity) of which	ar the loundation has a	10 % or greater title	51631		
<u>NO</u> 2		rmation Regarding Contribution, Gran	t. Gift. Loan. Schola	rship, etc., Progr	rams:		
-	Chec	ck here  if the foundation only make elicited requests for funds. If the foundation may conditions, complete items 2a, b, c, and d	s contributions to prese	elected chantable o	rganizations and do		
а	The	name, address, and telephone number or e-r	mail of the person to wh	nom applications sh	nould be addressed		
		Eastman Scholarship Trust P O Box 23				<del></del>	
b	The	form in which applications should be submitted	ed and information and	materials they sho	ula include		
No	set a	oplication forms are required for submissi	ion				

c Any submission deadlines

### No submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Full time students from North Central AR qualified to attend college who are interested in math and/or science or related studies

Total

# Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the		for Future	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		
a Paid during the year				
Jonathan Farrar	None	N/A	Scholarship Recipient	1,000
P O Box 2156				
Batesville, AR 72503				
Megan Holifield	None	N/A	Scholarship Recipient	1,000
P O Box 2156				
Batesville, AR 72503				
Alexander Cossey	None	N/A	Scholarship Recipient	1,000
P O Box 2156		ļ		
Batesville, AR 72503	Mana	N/A	Cabalanshin Bassasat	4 000
Terran Jones P O Box 2156	None	N/A	Scholarship Recipient	1,000
Batesville, AR 72503				
Lauren Gunderman	None	N/A	Scholarship Recipient	1,000
P O Box 2156	None	1970	Conditional Strip Recipient	1,000
Batesville, AR 72503				
Samantha Comer	None	N/A	Scholarship Recipient	1,000
P O Box 2156		}		.,000
Batesville, AR 72503				
Nelson Heringer	None	N/A	Scholarship Recipient	1,000
P O Box 2156			, ,	
Batesville, AR 72503				
Andrew Todd	None	N/A	Scholarship Recipient	1,000
P O Box 2156				
Batesville, AR 72503				
		]		
Total			<b>▶</b> 3a	8,000
<b>b</b> Approved for future payment				
		ł	1	
		1		
		<u> </u>		

0

**▶** 3b

art XVI-A Analysis of Income-Producing Act	ivities				
nter gross amounts unless otherwise indicated	Unrelated busin	ness income	Excluded by section	512, 513, or 514	(e)
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exemp function income (See instructions
a					
b	-		-		
c d	·				
e f					
<ul><li>g Fees and contracts from government agencies</li><li>2 Membership dues and assessments</li></ul>					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities .			<u> </u>		2,15
5 Net rental income or (loss) from real estate			<u> </u>		
a Debt-financed property			<u> </u>		
b Not debt-financed property					<del></del>
6 Net rental income or (loss) from personal property 7 Other investment income				···	
8 Gain or (loss) from sales of assets other than inventory				<del></del> -	-2,00
9 Net income or (loss) from special events .		-			
O Gross profit or (loss) from sales of inventory					
1 Other revenue a	-				
b			<del>- </del>		
c		· · · · · · · · · · · · · · · · · · ·			<del></del>
de			<del></del>		<del>                                     </del>
•					+
2 Subtotal. Add columns (b), (d), and (e)			0 .	0	15
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)			0	0 13	<del></del>
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations)			=1		<del></del>
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations)  Part XVI-B Relationship of Activities to the Ad	ccomplishment	of Exempt	Purposes	13	<del></del>
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations)  Part XVI-B Relationship of Activities to the Ad	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15
2 Subtotal. Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Adultine No. Explain below how each activity for which incom	ccomplishment	of Exempt	Purposes  XVI-A contributed imp	13	15.

# Form 990-PF (2012) Arkansas Eastman Scholarship Trust 58-2024178 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Did the organization directly or indirectly engage in any of the following with any other organization described

•	ın secti			ection 501(c)(3) organiza					108	NO			
а	Transfe	ers from the reporting	foundation to a	a noncharitable exempt o	organization of								
	(1) Ca						ļ	1a(1)		X			
	• •	her assets					ļ	1a(2)		<u> </u>			
b		transactions											
		les of assets to a none		, ,				1b(1)		<u> </u>			
				ble exempt organization			ļ	1b(2)		<u> </u>			
		ental of facilities, equip		assets				1b(3)		_X_			
		eimbursement arrange						1b(4)		<u> X</u>			
		ans or loan guarantee						1b(5)		_ <u>X</u> _			
				ip or fundraising solicitat				1b(6)		_X_			
	-	•	-	s, other assets, or paid e	•		l	1c		_X			
	value o	of the goods, other ass n any transaction or st	sets, or service	complete the following so es given by the reporting ement, show in column (c	foundation If the I) the value of the	foundation receive goods, other ass	ved less than fail ets, or services	r marke receive	ed				
(a)	Line no	(b) Amount involved	(c) Name	of nonchantable exempt organi	zation (d) D	escription of transfers,	transactions, and sh	arıng arra	ngeme	nts			
			<del> </del>				<del></del>						
			<del> </del>										
			<u> </u>		<del></del>		·						
			<del> </del>	<del> </del>									
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									_				
				<u> </u>									
	describ		of the Code (ot	ted with, or related to, or ther than section 501(c)(				es 🗌	No				
		(a) Name of organization	1	(b) Type of orga	inization	(c)	Description of relation	nship					
			<del> </del>										
						<del> </del>				_			
			<del> </del>	·					_				
_				· <u></u>			<del></del>						
				this return, including accompanying s taxpayer) is based, on all information			ledge and belief, it is true						
	gn ere	Signature of officer or truste	Bue Box	) 03/08/30/3) Date		ident.	May the IRS d with the prepa instructions)?		below				
		Print/Type preparer's n		Preparer's signature		Date	-	PTIN					
	id epare	Dark and D. Maratta		RD Whatth	CPA	3/2/2013	Check if self-employed	P00490	0774				
	•	5 N O	F Fiser and C	Company		• • • • • • • • • • • • • • • • • • • •							
US	e Onl	y		Ave, Springdale, AR 72	764			751-4					
			The Eddi Elimina 710, Opinigatio, 711 12701						- 000 DF				