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Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A F	or the	2012 calendar year, or tax year beginning and	ending		
Ва	heck if	ntification number			
	Addres change	GEORGE W. DONAGHEY FOUNDATION			
	Name change	Doing Business As		71	-0201619
]Initial return	mber			
	Termin	1-570-3528			
	Ameno	City, town, or post office, state, and ZIP code		G Gross receipts \$	15,730,893.
	Applic tion pendin	DITTLE ROCK, AR /2201		H(a) Is this a grou	
	penda	F Name and address of principal officer PHILLIP S. ANDERSOI		for affiliates?	
		111 CENTER STREET, SUITE 2200, LITTLE		- · ·	s included? Yes No
		empt status X 501(c)(3) 501(c) () ((Insert no.) 4947(a)(1) (or 527		ch a list. (see instructions)
		e: N/A	1	H(c) Group exem	
	orm of art I	organization. Corporation X Trust Association Other ► Summary	L Year	of formation: 192	9 M State of legal domicile; AR
	1	Briefly describe the organization's mission or most significant activities: Prov.	ide fi	inds to Un	iversity of
Governance		Arkansas at Little Rock			
rua	2	Check this box if the organization discontinued its operations or dispositions.	sed of mor	e thán 25% of its ne	et assets.
Š		Number of voting members of the governing body (Part VI, line 1a)	<u> </u>	10!	3 /
		Number of independent voting members of the governing body (Part VI, line b)			4 7
Activities &	5	rotal number of individuals employed in calonidar year 20 12 (rait v, into 44)()	MAY 14	1 2013 주 (윤	5 0
iχ	6	Total number of volunteers (estimate if necessary)		ا ب	6 0
Act	l .	Total unrelated business revenue from Part VIII, column (C), line 12)GDE		7a 0.
	b	Net unrelated business taxable income from Form 990-T, Ine 34	G. 9 CE.		7b 0.
		0	-	Prior Year	Current Year
e	Į.	Contributions and grants (Part VIII, line 1h)		$ \begin{array}{c c} 0 & 0 \\ \hline 0 & 0 \end{array} $	
Revenue	1	Program service revenue (Part VIII, line 2g)	-		
å å	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	6,879,43	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
? ? :::		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	6,879,43	
۲		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,542,08	
3		Benefits paid to or for members (Part IX, column (A), line 4)	-		0. $0.$
_		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			0. 0.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)			0. 0.
ibel		Total fundraising expenses (Part IX, column (D), line 25)	0.		
Û		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		372,38	6. 356,425.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,914,47	4. 2,487,429.
	19	Revenue less expenses Subtract line 18 from line 12		4,964,96	3. <60,724.>
Net Assets or Fund Balances			Ве	eginning of Current Ye	ear End of Year
sset	20	Total assets (Part X, line 16)		62,390,72	
nd Ag	21	Total liabilities (Part X, line 26)		66,77	
홢	22	Net assets or fund balances Subtract line 21 from line 20		62,323,94	4. 65,985,362.
	art II	Signature Block		- 	
		lties of perjury, declare that I have examined this return, including accompanying schedule:			of my knowledge and belief, it is
true	, correc	t, and complete. Declaration of praparary(other than officer) is based on all information of wh	nich prepare	r nas any knowledge.	7.2013
0:-	_	Signature of officer		Date	1, 6, 160, 1
Sig		PHILLIP S. ANDERSON, SECRETARY		outo 1	
Her	e	Type or print name and title			
		Print/Type preparer's name Reparer's signature		Date Check	k PTIN
Paid	ı	LINDSAY M. THOMAS	anan (05/04/13 if self-e	_
	arer	Firm's name L. COTTON THOMAS & CO.	1	Firm's EIN	
	Only	Firm's address 620 WEST THIRD ST., STE 400			
	-	LITTLE ROCK, AR 72201		Phone no.	(501) 375-9187
May	the IF	AS discuss this return with the preparer shown above? (see instructions)			X Yes No
	01 12-1		ons.		Form 990 (2012)

			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		_X_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		
_	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		х
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		-11
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_X_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	·- ·	<u> X</u>
b	Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	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	444		v
е	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		<u> </u>
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's separate or consolidated infancial statements for the tax year include a roothole that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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, Parts I and IV	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			7.7
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			37
4-	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		<u>X</u>
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		- 22
1.5	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	(2012)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
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 with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
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? If "Yes, " complete			:
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, 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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u>·</u>		
	Note. All Form 990 filers are required to complete Schedule O	38	X	
				(2012)

GEORGE W. DONAGHEY FOUNDATION
Statements Regarding Other IRS Filings and Tax Compliance Part V

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 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 2 0 1b 0 1c 1b 1c 1c 1c 1c 1c 1c 1c 1c	1c 2b	/es	No
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
(gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	2b	- 1	
filed for the calendar year ending with or within the year covered by this return [2a] [2a]	2b	i	
	2b		
	- 1		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			37
	3a		X
	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	.		х
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country	la		
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	İ		
	5a		Х
	5b		X
	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	Sa		Х
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	вь		
7 Organizations that may receive deductible contributions under section 170(c).			
	7a		Х
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	7f	_	X
	7g	-	
	7h	-	X
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	_		
	8	-+	
9 Sponsoring organizations maintaining donor advised funds.			
	9a 9b	-	
10 Section 501(c)(7) organizations. Enter	10		
a Initiation fees and capital contributions included on Part VIII, line 12		ľ	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter			
a 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?	2a _		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	3a		
Note. See the instructions for additional information the organization must report on Schedule O			
b Enter the amount of reserves the organization is required to maintain by the states in which the			
organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
	4a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	4b		

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
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		_X_
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		<u> X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		_X_
6	Did the organization have members or stockholders?	6		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	į		
	more members of the governing body?	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	<u>X</u>	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	405		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? Describe in Schedule O the process of any used by the organization to review this Form 990.	Ha		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
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		Х
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
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		X
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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨		
	Bart Roach - 501-551-4159			
	P.O. Box 3546, Little Rock, AR 72203			

Form 990 (2012)	1
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GEORGE W. DONAGHEY FOUNDATION

71-0201619

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

Check if Schedule O contains a response to any question in	in this Pa	art VII
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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization		F' '			nper	nsat				
(A)	(B)	(C) Position		(D)	(E)	(F)				
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	to						the	organizations	compensation
	hours for	direc				20		organization	(W-2/1099-MISC)	from the
	related	tee or	ıstee			nsati		(W-2/1099-MISC)	,	organization
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				and related
	below	Ividua	it sp	Officer	emb	hest c	Former			organizations
	line)	<u>=</u>	<u>=</u>	8	ş	돌	휸			
(1) Greg Flesher	0.00									
President		X		X	_			0.	0.	0.
(2) Philip S. Anderson	0.00							_		_
Secretary		X		X		_	_	0.	0.	0.
(3) Bart Roach	0.00							_	_ 1	_
Assistant Secretary		X	<u> </u>	X	ļ	ļ		0.	0.	0.
(4) French Hill	0.00		İ				Ì	_	_	_
Assistant Secretary		X	<u> </u>	X		<u> </u>	_	0.	0.	0.
(5) Walter E. Hussman, Jr.	0.00							_		
Assistant Secretary		X		X				0.	0.	0.
(6) John Riggs	0.00									
Assistant Secretary		X		X		_		0.	0.	0.
(7) George Worthen	0.00									
Assistant Secretary		X		X		<u> </u>	ļ	0.	0.	0.
			L	<u> </u>		-				
	-	-								
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rar	Section A. Officers, Directors, Trus	stees, Key Em	ploy	ees	, an	d Hi	ghe	st C	compensated Employe	es (continued)	 -			
	(A)	(B)			((C)			(D)	(E)			(F)	
	Name and title	Average			Pos				Reportable	Reportable	,	Es	tımate	ed
		hours per	box	, unle	ss pe	rson	than is bot	h an	compensation	compensation	nc	an	nount	of
		week	offi	ceran	nd a d	irecto	or/trus	tee)	from	from related	t		other	
		(list any	ector	l					the	organization		com	pensa	tion
		hours for	or dir	ربه [텵		organization	(W-2/1099-MIS	SC)		om th	
		related	stee				bens		(W-2/1099-MISC)			-	anızatı	
		organizations below	individual trustee or director	Institutional trustee		Key employee	Highest compensated employee						d relate	
		line)	1 Jakid	텵	Officer	y em	ghest	Former				orga	inizatio	ons
			트	=	5	중	호 등	윤						
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			1											
1b	Sub-total								0.		0.			0.
	Total from continuation sheets to Part V	II. Section A					•		0.		0.			0.
	Total (add lines 1b and 1c)	,							0.		0.			0.
2	Total number of individuals (including but i	not limited to th	nose	liste	ed a	bov	e) wi	no r		0.000 of reportab				
_	compensation from the organization						_,			,				C
													Yes	No
3	Did the organization list any former officer	director or tri	iste	e ke	ev er	nole	ovee	or	highest compensated e	mplovee on	1			
	line 1a? If "Yes," complete Schedule J for			٥,	, c.		,,,,	, O .	goc. compensates c			з	1	x
4	For any individual listed on line 1a, is the s			mn	onsa	atior	n and	to t	her compensation from	the organization				_ -
7	and related organizations greater than \$15	•							•	the organization		4	-	х
5	Did any person listed on line 1a receive or									idual for services	,			
3	rendered to the organization? If "Yes," con							Cia	led organization or indiv	IGUAL TOT SCI VICES	'	5	ŀ	X
Sec	tion B. Independent Contractors	ipiete Scriedar	6 0 1	01 3	ucii	pers	3011					<u> </u>		
	Complete this table for your five highest or	ompensated in	den	anda	ant o	Ont	ranto	ore *	that received more than	\$100 000 of con	nnens	ation f	rom	
1	the organization Report compensation for										hello	auon 1	, J111	
		trie caleridar y	Cai	enai	ng v	VILII	Oi W	161 111		year		(0	<u> </u>	
	(A) Name and busines:	s address	NT/	\\ti					(B) Description of s	services	С	رر ompei		n
			14/	INC	4									
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		· · · · · · · · · · · · · · · · · · ·									 -			
	T	<u> </u>							1 -12		 			
2	Total number of independent contractors	_	ot li	mıte	d to	tho	se li	stec	above) who received n	nore than				
	\$100,000 of compensation from the organ	ization_					<u>U</u>				Щ			

		Check if Schedule O conta	ains a response t	to any question ii	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts 1ts	1 a	Federated campaigns	1a					
e a	b	Membership dues	1b		!			
P, C	С	Fundraising events	1c					
# P	đ	Related organizations	1d					
S, C	е	Government grants (contributi	ons) 1e					,
isi	f	All other contributions, gifts, grant	[·					
Per la	_	similar amounts not included above	ł I					
ĒŌ	g							
Contributions, Gifts, Grants and Other Similar Amounts	-	Total. Add lines 1a-1f		. •				
				Business Code				
ا يو	2 a		•					
المَحَ	b				· · · · · · · · · · · · · · · · · · ·			
Program Service Revenue	c					-		
e a	d				•			
Pag	e							<u> </u>
P.	f	All other program service reve	nuė					
]		Total. Add lines 2a-2f		D				
	3	Investment income (including	dıvıdends, ıntere	est, and				
	•	other similar amounts)	,	•	1,808,204.	1,808,204,		
	4	Income from investment of tax	k-exempt bond p	roceeds	2,000,201,	2,000,2021		
	5	Royalties		•				
	Ū	. ioyaiiioo	(ı) Real	(II) Personal				
	6 a	Gross rents	V . 100.	- (1)/ 1 0 0 0 1 1 0 1				
	b							
	Č	Rental income or (loss)						
	4	Net rental income or (loss)		<u>'</u>				
		Gross amount from sales of	(i) Securities	(ıi) Other				
	, .	assets other than inventory	13,922,689.	Lily Giller				:
- 1	h	Less cost or other basis	13,322,003.					
1		and sales expenses	13.304.188.					
	_	Gain or (loss)	618,501.					•
	d		618,301.	•	618,501.	618,501		
		Gross income from fundraising	a events (not		010,501.	010,301.		
흴	Оа	including \$	of					
Other Reven		contributions reported on line						
æ		Part IV, line 18	а					
her	h	Less direct expenses	a b					
ō		Net income or (loss) from fund						
		Gross income from gaming ac	_					
	y d	Part IV, line 19	a a					
	h	Less: direct expenses	b					
		Net income or (loss) from gam						
		Gross sales of inventory, less			 	_		
	10 a	and allowances						
	h	Less cost of goods sold	a b					
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
	11 a			Dusiness Code				
							,	
	b			 				
	C	All other revenue						-
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			2,426,705,	2 426 705	0.	0.
23200 12-10	9	TOTAL TEVENUE. DEC INSTRUCTIONS.			2,420,703,	4,420,705,	<u> </u>	Form 990 (2012)
12-10	- 14							(- 0 1 -)

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	
	Check if Schedule O contains a respon	se to any question in thi		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	2,131,004.	2,131,004.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members			-	
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages				
7	Pension plan accruals and contributions (include				
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				
b	Legal		·		
	Accounting	4,500.		4,500.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	345,709.		345,709.	
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				· · · · · · · · · · · · · · · · · · ·
13	Office expenses				
14	Information technology				-
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				·
19	Conferences, conventions, and meetings				
20	Interest Payments to offiliates		-		
21	Payments to affiliates Depreciation, depletion, and amortization	· · · · · · · · · · · · · · · · · · ·			
22	Insurance	6,216.		6,216.	
23 24	Other expenses. Itemize expenses not covered	0,210.		0,210.	
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule O.)				·
a					
b c					
d					. . –
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,487,429.	2,131,004.	356,425.	0.
26	Joint costs. Complete this line only if the organization	, , , , , , , , , , , , , , , , , , , ,			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Par	t X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	1,656,909.	2	1,333,140.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
"		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	.	7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	4,093.	9	4,076.
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	60,570,396.	12	64,561,662.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets	450 000	14	4.5.6.0.50
	15	Other assets. See Part IV, line 11	159,322.	15	156,372.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	62,390,720.	16	66,055,250.
	17	Accounts payable and accrued expenses	66,776.	17	69,888.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
Lia I	!	key employees, highest compensated employees, and disqualified persons		_	
		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	-	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	66,776.	26	69,888.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	007770		03,000
Ø		complete lines 27 through 29, and lines 33 and 34.			
၁င	27	Unrestricted net assets	62,323,944.	27	65,985,362.
alar	28	Temporarily restricted net assets		28	
Fund Balances	29	Permanently restricted net assets		29	
Š		Organizations that do not follow SFAS 117 (ASC 958), check here ▶	V-1944		
P.		and complete lines 30 through 34.			
Net Assets or	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
χ¥	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	62,323,944.		65,985,362.
	34	Total liabilities and net assets/fund balances	62,390,720.		66,055,250.
					Farm 990 (2012)

	990 (2012) GEORGE W. DONAGHEY FOUNDATION	71-0	<u> 201619</u>	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	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	2,426		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,487		
3	Revenue less expenses Subtract line 2 from line 1	3	<60	7	<u>24.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	62,323	, 9	<u>44.</u>
5	Net unrealized gains (losses) on investments	5	3,722	1,1	<u>42.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	65,985	, 3	62.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.		İ	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis,			
	consolidated basis, or both		1 1	ļ	
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	•	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	iired audit			
-	or guide, explain why in Schedule O and describe any steps taken to undergo such guides		36		

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

GEORGE W. DONAGHEY FOUNDATION FINANCIAL FORMULE FOR STREET FOR STR

Part I	Reason	for Public Char	ty Status (All organiz	ations mu:	st complet	e this part) See inst	ructions		
he orga	nization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox)		·	
1	1		s, or association of church	_		=				
2	1		0(b)(1)(A)(ii). (Attach Sc							
3	1		al service organization		n section	170(b)(1)	ΔViii)			
4	7		operated in conjunction					/h)/4\/A\/ii	il Enter	the hospital's name
-	city, and stat	=	perated in conjunction	WILLI & FIOS	pital desci	ibed iii se	CHOII 170	ייאנייאניי	ii). Liitei	the hospital s hame,
5	, ,		benefit of a college or ur	owersity ov	wood or or	perated by	a doverni	mental uni	t describ	sed in
J	=	(b)(1)(A)(iv). (Comple	•	iiversity Ov	Wiled Of Op	berated by	a govern	nentai uni	t describ	
<u> </u>	•		•	t daaamba	d .ma:_	470/LV	IV AV. A			
7	7		ent or governmental unit					r from the	aanaral	nublic described in
,			eives a substantial part	or its supp	on from a	governme	ental unit o	r from the	general	public described in
	7	(b)(1)(A)(vi). (Comple		(0	D II.					
8	7		ection 170(b)(1)(A)(vi).						_	
9			eives: (1) more than 33							
		•	· ·	•	•	•			• •	from gross investment
			axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon	after June 30, 1975
_	٦	509(a)(2). (Complete	•							
10 🖳	٦	ion organized and op	perated exclusively to te	st for publi	c safety 5	See sectio	n 509(a)(4	I).		
11 LX.	An organizat	ion organized and op	perated exclusively for the	ne benefit (of, to perfo	orm the fui	nctions of,	or to carr	y out the	purposes of one or
	more publicly	y supported organiza	itions described in secti	on 509(a)(1	1) or section	on 509(a)(2	?) See sec	tion 509(a)(3). Ch	eck the box that
	describes the	e type of supporting	organization and comple	ete lines 1°	1e through	11h				
	a Type	I b 🗔 ту	rpell cXTT	ype III - Fui	nctionally i	ıntegrated	c	I 🔙 Тур	e III - No	n-functionally integrated
e X	By checking	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one or	more dis	qualified	persons other than
	foundation in	nanagers and other t	han one or more publicly	y supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or	section 509(a)(2)
f			ten determination from t		-					, , , ,
		rganization, check th			,	, -,	, , , ,			
g		•	rganization accepted ar	ov aift or co	antribution	from any	of the follo	owing ner	eone?	<u> </u>
9			rectly controls, either al			-		_		, Yes No
				one or tog	CUICI WILLI	persons c	iescribed i	ii (ii) aiiu (iii) DeiOw	
	-	• .	upported organization?							
			described in (i) above?				•			11g(ii) X
_		•	person described in (i) o	• •	-					11g(iii) X
h	Provide the f	following information	about the supported or	ganization((s)					
		T		·						I
(i) Nam	ne of supported	(ii) EIN	(iii) Type of organization		rganization			(vi) ls organizati	s the no in col	(vii) Amount of monetary
or	ganızatıon			in col. (i) lis governing (ion in col.	(i) organiz U.S	ed in the	support
			above or IRC section (see instructions))	governing		(i) oi you	Support	0.8	.7	•
				Yes	No	Yes	No	Yes	No	
	ersity						}			
of A:	<u>rkansas</u>	71-0236904	170(C)(1)	X		X		X		2,131,004.
				į	i					
	-	•			<u> </u>		Ī	· · · · · · ·		
								-		
otal	1									2,131,004.

	A (Form 990 or 990-EZ) 2012
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Page 2

	(Complete only if you checked fails to qualify under the tests				on failed to qualify	under Part III If th	e organization
Sec	ction A. Public Support		•	 			
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(2) 2000	10/ 200	(9/20.0	(4/25)	(0) 20 12	(1) 10101
	membership fees received (Do not						1
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				<u> </u>		
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						1
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		1]
_	column (f)		<u> </u>		 		
	Public support. Subtract line 5 from line 4		1				1
	• • • • • • • • • • • • • • • • • • • •	(a) 2008	(F) 2000	(a) 2010	(4) 2011	T (=) 2012	(6) Total
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
8	Gross income from interest,				 		
Ü	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources]	
9	Net income from unrelated business				 		
Ū	activities, whether or not the						
	business is regularly carried on						İ
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc (see instruct	ons)			12	
13	First five years. If the Form 990 is for	the organization	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)	
	organization, check this box and stor					·	_
	ction C. Computation of Publ					- 	
	Public support percentage for 2012 (•	column (f))		14	%
	Public support percentage from 2011					15	%
16a	33 1/3% support test - 2012. If the c				14 is 33 1/3% or	more, check this bi	ox and
	stop here. The organization qualifies		•				
b	33 1/3% support test - 2011. If the o	•		•	d line 15 is 33 1/39	% or more, check to	his box
	and stop here. The organization qual				10 10 10		
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			=		art IV now the organ	nization
	meets the "facts-and-circumstances"				-	47a and he - 45	100/ 200
D	10% -facts-and-circumstances tes		-				
	more, and if the organization meets the						▶ □
	organization meets the "facts-and-circ	Juniolanices lest	THE Organization	quannes as a publ	iciy supported org	ja: 112atiOH	

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

Schedule A (Form 990 or 990-EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

Sec	qualify under the tests listed be ction A. Public Support	low, please comp	plete Part II)			 	-
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(a) 2000	(b) 2003	(6) 2010	(0) 2011	(e) 2012	(i) iotai
•	membership fees received (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,				-	<u> </u>	
2	merchandise sold or services per-		İ				1
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that				 		-
3	are not an unrelated trade or bus-						
	iness under section 513		!				
4	Tax revenues levied for the organ-]			
	ization's benefit and either paid to			!			
_	or expended on its behalf				 		
5	The value of services or facilities						
	furnished by a governmental unit to					;	
_	the organization without charge				<u> </u>		
	Total. Add lines 1 through 5				-		
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3 received			ļ	 		
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year				 		
	Add lines 7a and 7b				-		
	Public support (Subtract line 7c from line 6) ction B. Total Support		<u> </u>		<u> </u>		
	, ,	(=) 0000	(h) 2000	(-) 0010	(-) 2011	(-) 2010	(A Tatal
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6 Gross income from interest,						
104	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources			<u> </u>	 		
	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	· '						
	Add lines 10a and 10b Net income from unrelated business				-		
	activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)		<u> </u>		 		
	Total support (Add lines 9, 10c, 11, and 12)		<u> </u>				
14	First five years. If the Form 990 is for	the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organız	ation,
<u></u>	check this box and stop here	- C			<u> </u>		
_	ction C. Computation of Publi				• .	-17 1	
	Public support percentage for 2012 (III		•	column (f))		15	
16	Public support percentage from 2011					16	<u>%</u>
	ction D. Computation of Inves		~			T 4 7 1	
	Investment income percentage for 20			ne 13, column (f))		17	
18	Investment income percentage from 2				. 45	18	<u>%</u>
198	a 33 1/3% support tests - 2012. If the	-					i/ is not
	more than 33 1/3%, check this box an	•	•	•	•		. ▶□
ł	o 33 1/3% support tests - 2011. If the	-				•	and
^~	line 18 is not more than 33 1/3%, chec			•			
<u>20</u>	Private foundation. If the organization	i did not check a	box on line 14, 19	a, or 19b, check t	nis box and see ir	nstructions	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. See separate instructions.

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

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

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

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

Rame of organization GEORGE W. DONAGHEY FOUNDATION Ret I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes Yes Yes	 Section 501(c)(4), (5), or (6) organizatio 				
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes Yes Yes			·	Emp	loyer identification number
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes Yes Yes	GEORGE W	. DONAGHEY FOUN	DATION		71-0201619
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	Part I-A Complete if the orga	nization is exempt und	ler section 501(c)	or is a section 527 o	organization.
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	2 Political expenditures	ion's direct and indirect politic	cal campaign activities		£
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3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	-				
## Was a correction made? b f "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities S Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Yes Yes		-			
b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV		1000 tax, aid it iiic i 0iiii 4720	Tor this year.		
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	·-				
 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities		nization is exempt und	ler section 501(c)	, except section 501	(c)(3).
exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	Enter the amount directly expended to	by the filing organization for se	ection 527 exempt fund	ction activities	B
Inne 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	2 Enter the amount of the filing organiza	, ,	•	section 527	· · · · · · · · · · · · · · · · · · ·
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	3 Total exempt function expenditures /	Add lines 1 and 2 Enter here a	and on Form 1120-POI	L ,	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	line 17b			. • 9	·
(a) Name (b) Address (c) FIN (d) Amount haid from (c) Amount of politic	5 Enter the names, addresses and emp made payments. For each organization contributions received that were promoted.	loyer identification number (El in listed, enter the amount pai nptly and directly delivered to	d from the filing organi a separate political org	ization's funds. Also enter t ganization, such as a separa	ch the filing organization he amount of political
filing organization's contributions received funds if none, enter -0- promptly and directly delivered to a separa	(a) Name	(b) Address	(c) EIN		delivered to a separate political organization

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

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012	<u>GEORG</u>	E W. D	ONAGHEY FOU	NDATION	71-0	201619 Page 2
Part II-A Complete if the org			npt under section	n 501(c)(3) and file	ea Form 5/68	
(election under sec			lakad anana (aad bak	. Don't IV and by affiliate of		a address FIN
				Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and shall		, ,				
Limi	ts on Lob	bying Expe	nd "limited control" pro nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
			· 			
1a Total lobbying expenditures to influ			,	}		
b Total lobbying expenditures to influ		-	dy (direct lobbying)	}	0	·
c Total lobbying expenditures (add li		d 1b)		}	0.	
d Other exempt purpose expenditure		. 10 000 10	n		0.	
e Total exempt purpose expenditure	•		•		0.	
f Lobbying nontaxable amount Ente				7 (<u> </u>	* .
If the amount on line 1e, column (a) on Not over \$500,000	ו (ט) וא.		bying nontaxable am the amount on line 1e	Durit IS.		
Over \$500,000 but not over \$1,000	000		00 plus 15% of the exc	200 OVOT \$500 000		
Over \$1,000,000 but not over \$1,000			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17.			00 plus 5% of the exce			
Over \$17,000,000	000,000	\$1,000.	· · · -	ss over \$1,500,000.		
Over \$17,000,000	L	Ψ1,000,	500			
g Grassroots nontaxable amount (er	ter 25% o	f line 1f)			0.	·- ··· · · · · · · · · · · · · · · · ·
h Subtract line 1g from line 1a If zer		•				
i Subtract line 1f from line 1c If zero					(=	
j If there is an amount other than ze	-		line 1i, did the organiza	ation file Form 4720	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
reporting section 4911 tax for this		JO O.	mio ii, ala tilo olganici			Yes No
	4	4-Year Ave	eraging Period Under	Section 501(h)		
, ,		at made a s	ection 501(h) election	n do not have to comp s 2a through 2f on pa		
	Lobi	oying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
					·	
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount			1			
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2012 GEORGE W. DONAGHEY FOUNDATION 71-0201619 Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes No **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? q Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? i Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-B 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a Carryover from last year 2b 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) **Supplemental Information** Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list), Part II-A, line 2; and Part II-B, line 1 Also, complete this part for any additional information

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Name of the organization

Employer identification number

GEORGE W. DONAGHEY FOUNDATION 71-0201619 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 Yes are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 2 day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 year -Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? _ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Sche		W. DONAGHE			•	7than	Cimail		01619	Page 2
3	Using the organization's acquisition, accessi	on, and other record	ds, check	any of the	following that ar	e a sign	iticant	use of its	collection i	tems
	(check all that apply)		. —.							
a	Public exhibition	C			hange programs					
ь	Scholarly research	6	• 🗀 0	ther			_			
C	Preservation for future generations							_		
4	Provide a description of the organization's co							ose in Par	t XIII.	
5	During the year, did the organization solicit of					ımılar as	sets	_	_	L
	to be sold to raise funds rather than to be m								Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa	-	ete if the c	organizatio	on answered "Yes	s" to Fo	rm 990), Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custod	an or other interme	diary for co	ontribution	ns or other assets	s not inc	luded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing ta	ble						
			_						Amount	
С	Beginning balance						1c		•	
d	Additions during the year						1d			<u> </u>
е	Distributions during the year						1e			
f	Ending balance					_	1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	217						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation	has been	provided in Part	XIII _				
Par	t V Endowment Funds. Complete	f the organization ar	nswered "	Yes" to Fo	rm 990, Part IV,	line 10				
		(a) Current year	1	or year	(c) Two years ba		Three y	ears back	(e) Four ye	ears back
1a	Beginning of year balance									
ь	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses					l				
g	End of year balance									
2	Provide the estimated percentage of the cur	rent vear end baland	ce (line 1a.	column (a	a)) held as				•	
а	Board designated or quasi-endowment	,	%	•	,,					
b	Permanent endowment	%								
	Temporarily restricted endowment ▶	%								
•	The percentages in lines 2a, 2b, and 2c shou									
За	Are there endowment funds not in the posse	-	ation that	are held a	and administered	for the	organiz	zation		
-	by.						- J		Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedu	le R?					3b	
4	Describe in Part XIII the intended uses of the								<u> </u>	
Par	t VI Land, Buildings, and Equipm									
	Description of property	(a) Cost or o	 		or other	(c) Accı	mulate	ed	(d) Book v	/alue
		basis (investi			(other)	• •	ciation			
1a	Land						_			
	Buildings									
	Leasehold improvements		-							
	Equipment							<u> </u>		
	Other									
	Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X. column	(R) line 1	10(c))					0.

Part VII Investments - Other Securities. Set (a) Description of security or category (including name of security)	e Form 990, Part X, line 12 (b) Book value		valuation: Cost or ei	nd-of-year market value
1) Financial derivatives	<u>S</u>		=	
Closely-held equity interests		<u> </u>		
3) Other				
(A) Securities and other				
(B) investments	64,561,662.	End-of-	Year Marke	t Value
(C)	04,501,002.	Diid OI	icar marke	c value
(D)				
(E)				
(F)			-	
	-	-		
(G)				
(H)				· · · · · · · · · · · · · · · · · · ·
(1)	CA FC1 CC2			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	64,561,662.			
Part VIII Investments - Program Related. Se			.1 .1	
(a) Description of investment type	(b) Book value	(c) Method of	valuation Cost or er	nd-of-year market value
(1)				· · · · · · · · · · · · · · · · · · ·
(2)				
(3)				
(4)				
(5)			····	
(6)				
(7)				
(8)				
(9)				
(10)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15		•	
	Description			(b) Book value
(1)	·			-
(2)				
(3)				
(4)				
(5)				
				
(6)	-			
(7)				
(8)		·····		
(9)				ļ
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line				<u> </u>
Part X Other Liabilities. See Form 990, Part X,		U V Danderraken	"	· · · · · · · · · · · · · · · · · · ·
1. (a) Description of liability		(b) Book value	_	
(1) Federal income taxes			_	
(2)			_	
(3)				
(4)			_	
(5)				
(6)				
(7)				
(8)			7	
(9)			7	
(10)		 -	7	
(11)			7	
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25)		1	
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the tex		nanization's financi	al statements that ~	norte the ergenization!
liability for uncertain tax positions under FIN 48 (ASC 7				_

Schedule D (Form 990) 2012 GEORGE W. DONAGHEY FOUNDATION

71-0201619 Page 3

	dule D (Form 990) 2012 GEORGE W. DONAGHEY FOUNDAT:			<u>-0201619 </u>	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per l	Retur	'n	
1	Total revenue, gains, and other support per audited financial statements	-	1	<u> </u>	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			1	
а	Net unrealized gains on investments	2a	_		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c	_		
d	Other (Describe in Part XIII)	2d	_		
e	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b		4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	<u> </u>	
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses pe	r Ret	urn	
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d	╛		
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5		
Pai	t XIII Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to			2b; Part V, line 4	1; Part

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

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

► Attach to Form 990.

Open to Public Inspection

Name of the organization	!	!					Employer identification number
GEORGE W. DONAGHE Part General Information on Grants and Assistance	DONAGHEY	FOUNDATION					6T9T070-T/
seo	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	sistance, and the selec	tion
criteria used to award the grants or assistance?	stance?						Yes X No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monit	oring the use of grant	funds in the Unite	d States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any received more than \$5,000. Part II can be disnicated if additional space is needed.	Governments and \$5 000. Part II can	f Organizations in the	is in the United States. Comif additional space is needed	Somplete if the orga	ınızatıon answered "`	Yes" to Form 990, Part	: IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ. of AR at Little Rock 2801 SOUTH UNIVERSITY AVENUE LITTLE ROCK, AR 72204	71-0236904		2,131,004,	, o			PROVIDE FUNDS TO UNIVERSITY OF ARKANSAS AT LITTLE ROCK
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	ganizations listed in th	le line 1 table				4
3 Enter total number of other organizations listed in the line 1 table	is listed in the line	1 table					4
LHA For Paperwork Reduction Act Notice, see the Instructions for Form	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2012)

71-0201619 Schedule I (Form 990) (2012)

Part III Grants and Other

Page 2

(Form 990) (2012) GEORGE W. DONAGHEY FOUNDATION Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	de the information	n required in Part I,	line 2, Part III, columi	ı (b), and any other additional ınf	ormation

Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

> GEORGE W DONAGHEY FOUNDATION

Employer identification number 71-0201619

GEORGE W. DONAGHET FOUNDATION /1 0201019
Form 990, Part VI, Section B, line 11: FORM 990 IS REVIEWED ANNUALLY PRIOR
TO FILING BY THE PRESIDENT AND SECRETARY
Form 990, Part VI, Section C, Line 19: THE ORGANIZATION HAS NEVER BEEN
REQUESTED TO MAKE IT'S GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY
AVAILABLE TO THE PUBLIC. FINANCIAL STATEMENTS FOR THE ORGANIZATION CONSIST
OF FORM 990 WHICH IS AVAILABLE TO THE PUBLIC THROUGH THE INTERNAL REVENUE
SERVICE.