

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



990

SCANNED JUN 1 2 2014

For Paperwork Reduction Act Notice, see the separate Instructions.

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)

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

OMB No 1545-0047 Open to Public Inspection

Form 990 (20)2)

A	For the 2012 c	alendar year, or tax year beginning $07/01/12$, and ending $06/30/13$										
В	Check if applicable	C Name of organization	P	Employe	r identifica	ation number						
	Address change	NAC FOUNDATION, INC.		71_(1060	026						
	Name change	Doing Business As Number and street (or B.O. boy if mail is not delivered to street address) Room/suite	E	71-0486926 Telephone number								
	Initial return	Nullipar and Subst (of P O Box is main is not desired to desire desired)	٦	•		-3000						
=		1515 PIONEER DRIVE		870	743	-3000						
亅	Terminated	City, town or post office, state, and ZIP code				E00	652					
_	Amended return	HARRISON AR 72601 F Name and address of principal officer	G G	ross receip	its \$	599,	, 652					
	Application pending		a group re	etum for aff	ilıates?	Yes	X No					
		H(b) Are a	11 affiliates	: included:	,	Yes	No					
					see instruc	tions)						
			,	,		,						
<u>.</u>	Tax-exempt status	X 501(c)(3) 501(c) (n avamatı	on numbe								
<u> </u>		X Corporation Trust Association Other ► L Year of formation) exempli			legal domicile						
****	Form of organization Part I St	Immary			er Otata or	iegai dominic						
	T	scribe the organization's mission or most significant activities										
	1 -	NHANCE NAC PROGRAMS										
ည	10 2	Mission the thousan										
naı												
Ver	0 05	is box > if the organization discontinued its operations or disposed of more than 25% of its net ass	note									
Ĝ)E(S.	3	0							
مخ ده	1	of voting members of the governing body (Part VI, line 1a)	,		0							
ţį		of independent voting members of the governing body (Part VI, line 1b)		4	0							
Activities & Governance		nber of individuals employed in calendar year 2012 (Part V, line 2a)		5	0							
Ac		nber of volunteers (estimate if necessary)		6			0					
		elated business revenue from Part VIII, column (C), line 12		7a								
	b Net unre	lated business taxable income from Form 990-T, line 34	Year	7b		urrent Year	0					
	9 Contribut	ione and exents (Part VIII, Inc. 1b)	359,	529		286,	536					
e	8 Contribut	ions and grants (Part VIII, line 1h)	<u>, .</u>			200,	0					
Revenue	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 10 10 10 10 10 10 10 10 10 10 10 10 10 1											
æ	10 Investme	0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 60, 04										
	11 Other rev	venue (Part VIII, Column (A), lines 5, od, 6C, 9C, 10C, and 1191	167,			<u>285,</u> 599,						
		enue – add lines 8 through 11 (must equal Part Vill-column (A), line 12)	107,	= - /		399,	032					
		nd similar amounts paid (Part IX, column (A), lines 1-3) paid to or for members (Part IX, column (A), line 4)					- 0					
				-			0					
ses	15 Salanes,	other compensation, employee benefits (Part IX, column (A), lines 5–10)		+			- 0					
Expenses	16a Professio	onal fundraising fees (Part IX, column (A), line 11e)				 						
X	b lotal tun	draising expenses (Part IX, column (D), line 25) ► 21,038	217,	255		201	760					
_	17 Other ex		217,			201,						
	1		250,			201,						
-9	19 Revenue	eless expenses Subtract line 18 from line 12 Beginning of				397 , and of Year	884					
Net Assets or	S 20 Total ass		328,			,727,	228					
ASS	21 Total liab	olities (Part X, line 26)		977			325					
ž	22 Net asse		328,			725,						
		gnature Block		0101		,,20,	<u> </u>					
	•	perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the be	et of my	knowled	ge and ho	liof it io						
		complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		Kilowieu	ge and be	iici, it is						
		N . 1 D /				·						
Sid	gn P	Symature of officer		Date								
	ere	JUN / DON SULGE, OFFICE	2		5//4/	1291	4					
		Type or print name and title			-1' <i> </i>	01	/					
		pe preparer's name Preparer's signature Date		Chast		TIN						
Pa	ia	(LATTOLLE ON		Check	□"							
	anarer Robert	HOTEL CHINDON CDAG DA	1	self-emp		01388131						
	e Only	1413 MCCOY DRIVE STE B	Firm's	EIN	/	-08030	00					
- •	·	WARDTONI AR 70.001 2527			070	7/1 6	:200					
NA-	Firm's ac		Phone	no	0/0-	-741-6						
ivid	iy are into discus	ss this return with the preparer shown above? (see instructions)			I	Yes	No,					

orm 990 (2012) NAC FOUNDATION	, INC	71-0486926	Page 2
Part III Statement of Program S	ervice Accomplishments ains a response to any question in	this Part III	X
1 Briefly describe the organization's mission TO ENHANCE NAC PROGRAM			
Did the organization undertake any signific	ant program services during the year which	h were not listed on the	
prior Form 990 or 990-EZ? If "Yes," describe these new services on S	chedule O		Yes X No
3 Did the organization cease conducting, or services? If "Yes," describe these changes on Scheoo	make significant changes in how it conduc	ts, any program	Yes X No
Describe the organization's program service expenses. Section 501(c)(3) and 501(c)(4) the total expenses, and revenue, if any, for	ce accomplishments for each of its three la organizations are required to report the a		
4a (Code:) (Expenses \$ SCHOLARSHIPS	93,010 including grants of \$) (Revenue \$)
	25 400		
4b (Code) (Expenses \$ OTHER SUPPORT OF NAC	25,409 including grants of \$) (Revenue \$,
4c (Code) (Expenses \$	including grants of \$) (Revenue \$	
4d Other program services (Describe in Sch	•		
(Expenses \$ 4e Total program service expenses▶	including grants of \$ 118,419) (Revenue \$	
AA .		· · · · · · · · · · · · · · · · · · ·	Form 990 (2012

Form 990 (2012) NAC FOUNDATION, INC.

Pa	ert IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	- 1		
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	T		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		ŀ	
	Part III	5	- 1	X
_			1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	ļ		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		x
_	"Yes," complete Schedule D, Part I	•		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	\dashv	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		į	x
_	complete Schedule D, Part III	8		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	1		
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			v
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40	~	
		10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		1	
	VII, VIII, IX, or X as applicable		ŧ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		.	
	· · · · · · · · · · · · · · · · · · ·	11a	X	
b				77
		11b		X
С				77
_		11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			32
	· · · · · · · · · · · · · · · · · · ·	11d		X
e		11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	, , , , , , , , , , , , , , , , , , ,	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			77
		12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
		12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		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			
4-		14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
40	F	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	_		
. -	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	_		
40		17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40		18		<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
		19		X
20a		20a		X
<u>ь</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

<u>Form</u>	1 990 (2012) NAC FOUNDATION, INC. /1-	0486926		Pa	age 4
P	Checklist of Required Schedules (continued)				
			\dashv	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government	·		- 1	v
	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		<u> </u>		x
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		1		
	organization's current and former officers, directors, trustees, key employees, and highest comp		_	- 1	x
24-	employees? If "Yes," complete Schedule J	-	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answ	!			v
	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 excep		4b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during	· '			
	to defease any tax-exempt bonds?		4c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the	′ <u> </u> -	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess ben				77
L	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	}-	25a		<u> </u>
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified personal that the transaction has not been appropriately as a second to be a	'			
	year, and that the transaction has not been reported on any of the organization's prior Forms 99			}	37
20	If "Yes," complete Schedule L, Part I		5b	 	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compens	· ·	_		37
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete S		26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key emplo			ĺ	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% co				v
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	F	27	_	X
28	Was the organization a party to a business transaction with one of the following parties (see Sch	nedule L,		I	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions).		_	ŧ	37
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Pa		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," comp	·			37
_	Schedule L, Part IV	_	8b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family mem	·	.		37
29	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part I		8c	-	X
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete So Did the organization receive contributions of art, historical treasures, or other similar assets, or other similar assets, or other similar assets, or other similar assets.		29		X
30	conservation contributions? If "Yes," complete Schedule M	·	20		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete S		30	_	
٠.	Part I	·	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "		31 +		
-	complete Schedule N, Part II	· · ·	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under		32		
•	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	- j	33	İ	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R		33	_	<u>~</u>
•	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)?		5a		$\frac{x}{x}$
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction		- Ja	_	
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V		5b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-cl	·	-55	$\overline{}$	
	related organization? If "Yes," complete Schedule R, Part V, line 2		36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related		+		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedul	•		1	
	Part VI	· '	37		¥

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

19? Note. All Form 990 filers are required to complete Schedule O

38

Form 990 (2012) NAC FOUNDATION, INC.

Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		V	
4	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	F*****	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 1b			Ė
b	Did the organization comply with backup withholding rules for reportable payments to vendors and			ĺ
С	reportable gaming (gambling) winnings to prize winners?	1c	Ì	ĺ
2a		10		
Za	Statements, filed for the calendar year ending with or within the year covered by this return 2a			į
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	1
J	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	- 		<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
••	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			1
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			ĺ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			ĺ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	ļ	
d	If "Yes," indicate the number of Forms 8282 filed during the year			ĺ
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<u>7e</u>	 	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<u> </u>	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as rec			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form	1098-C? 7h	ļ	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			İ
•	organization, have excess business holdings at any time during the year?	8	-	
9	Sponsoring organizations maintaining donor advised funds.			ŧ
a b	Did the organization make any taxable distributions under section 4966?	9a		-
10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b	-	<u> </u>
a	Initiation fees and capital contributions included on Part VIII, line 12			ĺ
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:			
	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.ls the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	- 177	7 "	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	1	
	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	Į.		İ
С	Enter the amount of reserves on hand			ĺ
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes." has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	146		$\overline{}$

71-0486926 Form 990 (2012) NAC FOUNDATION, INC. Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part.VI 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 Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 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. 1b þ Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 X The governing body? 8a X h Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ٩ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 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? a The organization's CEO, Executive Director, or top management official X 15a X **b** Other officers or key employees of the organization 15b 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? X 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available 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, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization DON SUGG

1515 PIONEER DRIVE

AR 72601

HARRISON

Form 990 (2012) NAC FOUNDATION, INC. Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees. and Part VII **Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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

- 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

X Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x, uni	Pos check ess pe	erson	than o	ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(***2103348130)	organization and related organizations
(1) DAVE MORTON						ļ				
	5.00									
DIRECTOR	0.00	X			<u> </u>	Ш		0	0	0
(2) CATHY BRANDT										
	5.00	ŀ				i l				_
DIRECTOR	0.00	X			ļ.,			0	0	0
(3) MELANIE SAVELLS				1						
	5.00	1		1	İ			_		
DIRECTOR	0.00	X	ļ	 	├			0	0	0
(4) WAYNE THOMPSON	F 00	1				'				
D.T.D.T.G.T.O.D.	5.00	۱,,						_	_	_
DIRECTOR MADIC	0.00	X	<u> </u>		⊢	╁		0	0	0
(5) KAY MARIS	5.00	l								
DIRECTOR	0.00	$ \mathbf{x} $						0	o	_
(6) PAT REED	0.00	╀┻	-	┼	╁─		_	0		0
(0) IAI REED	5.00	İ								
DIRECTOR	0.00	x	ŀ					0	o	0
(7) JAY HERRIN	0.00	1	\vdash	┢	┢	+				<u> </u>
(.,)	5.00	1								
DIRECTOR	0.00	x						0	O	o
(8) STEVE STAFFORD		 			 	1	···			
•	5.00	1								
DIRECTOR	0.00	x						l 0	0	l o
(9) KEN MILBURN										
	5.00					1				
DIRECTOR	0.00	X						0	0	0
(10) JERRY JACKSON										
	5.00									
PRESIDENT	0.00	X		<u> </u>	<u> </u>			0	0	0
(11) LESLIE EDDINGS					1	'				
	5.00					1				
DIRECTOR	0.00	X				<u> </u>	<u> </u>	0	0	
DAA										Form 990 (2012)

DAA

Form **990** (2012)

Part VII Section A. Unicers	, Directors, Tru	stee	s, n	ey =	mpi	Oyet	:S, a	nd Highest Compensated	Employeescontinued)				
(A) Name and title	(B) Average hours per week (list any	bo	x, uni	Pos check ess pe	erson	than one of the state of the st	าลก	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	c	(F) Estima amoun othe compens from t	ted t of r sation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(44-2) (695-4416-6)		organiza and rela organiza	ation ated	
(12) KEVIN JACKSON													
DIRECTOR	5.00	x						o	o				(
(13) LAYNE RAGSDALE	0.00												
	5.00	v						0	0				,
VICE PRESIDENT (14) JERRY PINSON	0.00	X	-	┢		╁		0	0				
(14) 0 22 2 1 1 2 2 1 2 2 2 2 2 2 2 2 2 2 2	5.00					ļ							
DIRECTOR	0.00	X		<u> </u>		<u> </u>	_	0	0				(
(15)LARRY PHILLIPS	5.00			ļ									
SECRETARY	0.00	x		<u> </u>	<u> </u>			_0	0	_			(
(16)												-	
(17)											<u> </u>		
/40\		┾-	-	┢		-	<u> </u>			 			
(18)													
(19)												_	
1b Sub-total	<u> </u>		<u> </u>	ـــــ	-	l							
c Total from continuation she	ets to Part VII,	Secti	ion .	A			>			 			
d Total (add lines 1b and 1c) 2 Total number of individuals (increportable compensation from			to th	nose	liste	d abo	ove)	who received more than \$1	00,000 in				
3 Did the organization list any fo	rmer officer, dire	ctor,	or tr	uste	e, ke	y em	ploy	ee, or highest compensated	I	f		Yes	No
employee on line 1a? If "Yes," 4 For any individual listed on line								and other compensation from	m the		3		X
organization and related organ									ii die				
individual 5 Did any person listed on line 1.	a receive or accr	ue co	amo	ensa	tion 1	rom	anv i	unrelated organization or inc	dividua!		4	,	X
for services rendered to the or	ganızation? If "Ye										5		X
Section B. Independent Contractor 1 Complete this table for your five		nsate	n he	dene	nde	nt co	ntrac	ctors that received more tha	n \$100,000 of				
compensation from the organiz	zation. Report co	mper	nsatı	on fo	r the	cale	nda	r year ending with or within t	the organization's tax year	 7			
Name and	(A) d business address						┼	Descrip	(B) tuon of services		<u>Co</u>	(C) mpensat	tion
						_					L		
							_						
							_						
2 Total number of independent of received more than \$100,000								listed above) who					***************************************

Form 990 (2012) NAC FOUNDATION, INC.

Pa	rt VI	II Staten	ient of Reve	nue	ains a r	esponse to	any question in th	us Part VIII.		
		·	ii concadio c	9 00111			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
रे र	1a	Federated carr	ipaigns	1a						
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership d	· -	1b						
S,E	С	Fundraising ev		1c						
ar its	d	Related organi		1d						
s, G	е	Government grants (1e						
roi	f	All other contribution	s, gifts, grants,			- "				
the t		and similar amounts	not included above	1f		286,536				
ati doiri	g	Noncash contribution	is included in lines 1a-	1f :	\$					
<u> </u>	h	Total. Add line	s 1a-1f			▶	286,536			
Program Service Revenue						Busn. Code				
ven	2a									
Re	b									
vice	С									
Ser	d							· · · · · · · · · · · · · · · · · · ·		
äm	е									
rogi	f	All other progra	am service rever	nue						
<u>ا</u>	9	Total. Add line				<u> </u>				
	3		ome (including o	lividend	ls, interes	it,			,	
		and other simil				•	27,942			27,942
	4		vestment of tax-	exemp	t bond pro	oceeds 🕨				
	5	Royalties		1		>				
	_		(ı) Real		(11)	Personal				
	6a	Gross rents								
	Ь	Less rental exps								
	C	Rental inc. or (loss)								
	d 7a	Net rental inco Gross amount from				>				
		sales of assets	(i) Securities	•	(11) Other				
		other than inventory			-					
	b	Less cost or other								
		basis & sales exps			 					
	d	Gain or (loss) Net gain or (loss)			L	—	İ		:	
		• ,	om fundraising eve	nte						
Other Revenue	Ua	(not including \$	on randialising ever	110						
Ķ			eported on line 1c)							,
8		See Part IV, line		а						
þer	ь	Less. direct ex		ь						
ŏ			(loss) from fund	- (events	•			•	
			om gaming activitie	- 1	0.000					
		See Part IV, line		a						
	ь	Less: direct ex		ь						
			(loss) from gam	ing acti	vities	•				
			inventory, less	ا						
		returns and all		а						
	ь	Less cost of g	oods sold	ь						
		-	(loss) from sales	s of inve	entory	•				
			cellaneous Revenue			Busn. Code				
	11a	UNREALIZE	D GAINS ON I	NVEST	ME		284,895			284,895
	b	MISCELLAN	EOUS INCOME				279			279
	С									
i	d	All other reven	ue							
	е	Total. Add line	es 11a11d			•	285,174			
	12	Total revenue	. See instruction	ıs		>	599,652	0	0	313,116

Form 990 (2012) NAC FOUNDATION, INC.

		INC.	11-046	30920	Page 10									
	rt IX Statement of Functional Exp				<u>.</u>									
Section	on 501(c)(3) and 501(c)(4) organizations must co	mplete all columns All other	organizations must comple	te column (A)										
	Check if Schedule O contains a response to any question in this Part IX Do not include amounts reported on lines 6b, (A) Total expenses Program service (B) (C) Management and Fundraising													
			Program service											
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	0AP011303									
1	Grants and other assistance to governments and													
•	organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in													
2	the U.S. See Part IV, line 22			1										
3	Grants and other assistance to governments,				······································									
•	organizations, and individuals outside the													
	U S See Part IV, lines 15 and 16			1										
4	Benefits paid to or for members													
5	Compensation of current officers, directors,													
_	trustees, and key employees													
6	Compensation not included above, to disqualified													
	persons (as defined under section 4958(f)(1)) and													
	persons described in section 4958(c)(3)(B)													
7	Other salaries and wages													
8	Pension plan accruals and contributions (include													
	section 401(k) and 403(b) employer contributions)													
9	Other employee benefits				· ··· ···									
10	Payroll taxes			_										
11	Fees for services (non-employees):	05 000		05 000										
a	Management	25,000		25,000										
b	Legal	5,000		5,000										
C C	Accounting	3,000		3,000										
d e	Lobbying Professional fundraising services. See Part IV, line 17													
f	Investment management fees													
g	Other (If line 11g amount exceeds 10% of line 25, column		= .	·										
9	(A) amount, list line 11g expenses on Schedule O)													
12	Advertising and promotion	21,038			21,038									
13	Office expenses	29,208	1,830	27,378										
14	Information technology	500		500										
15	Royalties				· ·-·									
16	Occupancy													
17	Travel													
18	Payments of travel or entertainment expenses			, , , , ,										
	for any federal, state, or local public officials	4,433		4,433										
19	Conferences, conventions, and meetings													
20	Interest													
21	Payments to affiliates													
22 23	Depreciation, depletion, and amortization Insurance	2,540	2,540		· · · · · · · · · · · · · · · · · · ·									
24	Other expenses. Itemize expenses not covered	2,340	2/340											
	above (List miscellaneous expenses in line 24e If			I										
	line 24e amount exceeds 10% of line 25, column			1										
	(A) amount, list line 24e expenses on Schedule O.)													
а		93,011	93,011											
b	FUNDRAISING EVENT EXPENSE	21,038	21,038											
С														
d														
е	,													
25	Total functional expenses. Add lines 1 through 24e	201,768	118,419	62,311	21,038									
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)													

Form 990 (2012) NAC FOUNDATION, INC.
Part X Balance Sheet

P	ert 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	24,094		17,384
	2	Savings and temporary cash investments	685,751	2	737,885
	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	on E		
	`	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers	;		
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
S		organizations (see instructions) Complete Part II of Schedule L	İ	6	:
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	9,617		31,048
	· ·	Land, buildings, and equipment: cost or			
		· · · · · · · · · · · · · · · · · · ·	, 375		
	ь	Less accumulated depreciation 10b	424,375	10c	424 375
	11	Investments—publicly traded securities	3,185,159		424,375 3,516,536
	12	Investments—other securities See Part IV. line 11	3/233/233	12	<u> </u>
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,328,996		4,727,228
	17	Accounts payable and accrued expenses	977		1,325
	18	Grants payable		18	1,323
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
'n	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and	į.		
Ē		disqualified persons. Complete Part II of Schedule L	İ	22	ĺ
Ë	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		1	
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	977		1,325
		Organizations that follow SFAS 117 (ASC 958), check here▶ X and			
es	ļ	complete lines 27 through 29, and lines 33 and 34.			ĺ
JIC.	27	Unrestricted net assets	956,571	27	941,626
3ak	28	Temporanly restricted net assets	536,743		634,611
ğ	29	Permanently restricted net assets	2,834,705		3,149,666
Net Assets or Fund Balances			and 2,032,703	23	3,243,000
6		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	ĺ
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
let /	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	4,328,019		4,725,903
	34	Total liabilities and net assets/fund balances	4,328,996		4,727,228
		The second secon	4,320,330	<u> </u>	<u>*, 121,228</u>

Form	990 (2012) NAC FOUNDATION, INC.	71-0486926		_	Pag	<u>je 12</u>
Pai	Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in thi	s Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		1		99,6	
2	Total expenses (must equal Part IX, column (A), line 25)		2)1,	
3	Revenue less expenses Subtract line 2 from line 1		3		97,8	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column	(A))	4	4,32	<u>28,0</u>	<u>)19</u>
5	Net unrealized gains (losses) on investments		5			
6	Donated services and use of facilities		6			
7	Investment expenses		7			
8	Pnor period adjustments		8	 		
9	Other changes in net assets or fund balances (explain in Schedule O)		9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal	Part X, line				
	33, column (B))		10	4,72	25,9	<u>903</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in the	s Part XII				
				<u> </u>	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 "C	Other," explain in			1	
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independe	nt accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year	were compiled or				
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and se	parate 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			1	
	separate basis, consolidated basis, or both				1	
	Separate basis Consolidated basis Both consolidated and se	parate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes resp	onsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an inc	lependent accountant?		2c		
	If the organization changed either its oversight process or selection process during	the tax year, explain in				
	Schedule O.				1	
3a	As a result of a federal award, was the organization required to undergo an audit or	audits as set forth in				
	the Single Audit Act and OMB Circular A-133?			3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization	n did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to	undergo such audits		3b		

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

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

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NAC FOUNDATION, INC.

Employer identification number 71-0486926

			TITLE	FOUNDAL	<u> </u>	110.						0 3 0	<u> </u>		
P	art I	Reas	on for Pu	blic Charity	Status (All organization	ns must co	mplete t	his par	t.) See	instru	ictions	3 .		
The	orgar	nization is not a	a private fou	indation because	eitis (Fori	ines 1 through 11,	check only o	ne box)							
1	Ň					churches described			A)(i).						
2		A school desc	cribed in sec	ction 170(b)(1)	(A)(ii).(Atta	ch Schedule E.)									
3	Н					tion described in se	ection 170(b)(1)(A)(iii	١.						
4	H					tion with a hospital				γΑγιίίι	Enter ti	ne hosn	ital's name		
7	لـــا	city, and state	•	mzation operate.	a iir conjunc	aton war a noophar	acourbça III	00000		,,,,,,,,,,,		ic noop	itaro marrio,		
5	X	•		for the honofit o	of a college	or unworathy owner	d or operator	l by a gove	aramont	al wort de	combod	lin			
9		=			_	or university owner	u or operated	i by a gove	5)1111101110	ai uint de	SCHEE				
	17			.(Complete Part				/L.\/4\/.A.\/.							
6			-			il unit described in			•						
7						part of its support f	rom a goverr	nmental ur	nit or fron	n the ge	neral pu	iplic			
)(b)(1)(A)(vi).(C	=	•									
8		A community trust described in section 170(b)(1)(A)(vi).(Complete Part II)													
9	نا	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross													
		receipts from	activities re	lated to its exem	npt functions	ssubject to certai	n exceptions	, and (2) r	o more t	than 33	1/3% of	ıts			
		support from	gross invest	tment income ar	nd unrelated	l business taxable i	income (less	section 5	11 tax) fr	om busi	nesses				
		acquired by the	ne organizat	ion after June 3	0, 1975 Se	e section 509(a)(2	2). (Complete	Part III)							
10		An organization	on organize	d and operated	exclusively	to test for public sa	ifety See se	ction 509((a)(4).						
11		An organization	on organize	d and operated	exclusively	for the benefit of, to	perform the	functions	of, or to	carry or	it the				
		purposes of o	ne or more	publicly support	ed organiza	itions described in s	section 509(a	a)(1) or se	ction 509	9(a)(2). \$	See se c	tion			
		509(a)(3). Ch	eck the box	that describes t	the type of s	supporting organiza	ation and con	plete line:	s 11e thr	ough 11	h				
		a Type	l b	Type II	С	Type III-Functi	ionally integra	ated	d	Typ	e III–No	n-functi	ionally integra	ted	
е				rtify that the org	anızatıon is	not controlled direct			or more				, ,		
Ĭ		-		-		or more publicly su	_								
		or section 509				oo.o paao., aa,	pposton orga					(-/(-/			
f				ad a written dete	rmination fr	om the IRS that it is	s a Tune I T	vne II or 1	Tuna III s	upportin	a				
•		organization,					3 a 1 ypc 1, 1	ypc 11, 01	ype iii s	арроги	9				
_		_			tion accente	ed any gift or contril	hution from a	ny of the							Ш
g		_		as the organiza	uon accepie	ed any gift of Contin		iny or the							
		following per				! !!								<u></u>	Г
				•		er alone or together	r with person	s describe	ea in (ii) i	ano				Yes	No
			•	ning body of the	• •	-							11g(l)	1	-
		• •		a person descrit									11g(ii)	_	<u> </u>
				-		ı (ı) or (iı) above?							11g(iii	}	<u>L</u>
<u>h</u>		Provide the f	ollowing info	ormation about t	he supporte	ed organization(s)			г		r				
		e of supported		(ii) EIN	1	Type of organization	1 ' '	organization		ou notify		ls the	(vii) Amount		tary
	org	ganization				escribed on lines 1–9 pove or IRC section		sted in your document?		nization in of your	organizat	zed in the	sup	port	
						see instructions)	governing	document		port?		S?			
							Yes	No	Yes	No	Yes	No			
(A)															
											L	1			
(B)															
			\mathbb{I}_{-}					1							
(C)								1		<u> </u>	1				
• •															
(D)									<u> </u>	·	-		-		
,											1				
(E)				-	†			 	-						
,								1							
		-			 		· ··· 🛊 · · · · · · ·	-					· - · · ·		
Tota	al		1				1					f 1			
<u> 1 U</u> U	21		L		.		Ŧ	1	}	ł	Ł	1 1	I		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	ion A. Public Support								
Calen	dar year (or fiscal year beginning in)▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	350,050	668,281	313,283	359,529	286,536	1,977,679		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3	350,050	668,281	313,283	359,529	286,536	1,977,679		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount								
_	shown on line 11, column (f)						212,229		
6	Public support. Subtract line 5 from line 4.	<u> </u>	<u></u>	<u> </u>			1,765,450		
	tion B. Total Support dar year (or fiscal year beginning in)▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	• () • • • • •		668,281	313,283	359,529	286,536	1,977,679		
7 8	Amounts from line 4 Gross income from interest, dividends,	350,050	668,281	313,283	359,529	286,336	1,977,679		
	payments received on securities loans, rents, royalties and income from similar sources	87,762	63,689	61,819	47,880	27,942	289,092		
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)		98,436	150,352	59,682	284,895	593,365		
11	Total support. Add lines 7 through 10		30,430	250/352	337002	201/033	2,860,136		
12	Gross receipts from related activities, etc. (see instructions)	<u></u>		······································	12	2/000/230		
13	First five years. If the Form 990 is for the	•	econd. third. fourth	or fifth tax year as	a section 501(c)(3				
	organization, check this box and stop here	•		, or martax your ac		,	▶ [
Sec	tion C. Computation of Public Su		ie .						
14	Public support percentage for 2012 (line 6,))	· · · · · · · · · · · · · · · · · · ·	14	61.73%		
15	Public support percentage from 2011 Sche					15	66.33%		
16a	33 1/3% support test-2012. If the organi	zation did not check	the box on line 13,	and line 14 is 33 1	/3% or more, check	this			
	box and stop here . The organization qualifies as a publicly supported organization								
b	33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,								
	check this box and stop here. The organization qualifies as a publicly supported organization								
17a	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is								
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in								
	Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported								
	organization								
b	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line								
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly								
		ets the Tacts-and-cir	cumstances" test.	i ne organization qu	uaimes as a publich	1	_		
10	supported organization	not shook a haw	line 12 16- 465 4	17a as 47b -b	then have a		•		
18	Private foundation. If the organization did instructions	not check a box on	ше із, тоа, тов, т	i/a, or i/b, check t	mis box and see				
	#150 GCUOTES								

Schedule A (Form 990 or 990-EZ) 2012

Pari 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						

	(Complete only if you chec If the organization fails to o	ked the box on qualify under th	line 9 of Part I e tests listed be	or if the organi elow, please co	zation failed to mplete Part II.)	qualify under Pa	rt II.
Sect	ion A. Public Support	1			·		
	dar year (or fiscal year beginning in)▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization'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						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
-	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
	dar year (or fiscal year beginning in)▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						· · · · <u>-</u>
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the		second, third, four	th, or fifth tax year a	as a section 501(c)	(3)	. [
Sec	organization, check this box and stop here tion C. Computation of Public Su	····	200		 -		
<u> </u>	Public support percentage for 2012 (line 8,			(A)		45	
16	Public support percentage from 2011 Sche	* *	•	(i))		15	%
	tion D. Computation of Investmen					101	%
17	Investment income percentage for 2012 (liii			column (f))		17	%
18	Investment income percentage from 2011		•			18	
19a	33 1/3% support tests—2012. If the organ			14, and line 15 is m	ore than 33 1/3%.		
	17 is not more than 33 1/3%, check this bo						▶ [

b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20

Schedule A (Form 990 or 990-EZ) 2012 NAC FOUNDATION, INC.

71-0486926

Page 4

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER INCOME

\$

308,470

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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

	A COUNTRACTON TWO		710	486926
	AC FOUNDATION, INC. rt i Organizations Maintaining Donor Advised Funds	or Other Similar Funda or Ac		
- 3	rt I Organizations Maintaining Donor Advised Funds organization answered "Yes" to Form 990, Part IV, In		counts.	Complete if the
_	Organization answered Tes to Femineses, Futrity, in	(a) Donor advised funds	- 0) Funds and other accounts
	Total number at and of year	(a) Boiler davious island		
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
!	Aggregate value at end of year	and hald in done a divined		
5	Did the organization inform all donors and donor advisors in writing that the a			□ v ₂₂ □ v
	funds are the organization's property, subject to the organization's exclusive			Yes !
3	Did the organization inform all grantees, donors, and donor advisors in writing			
	only for chantable purposes and not for the benefit of the donor or donor adv	isor, or for any other purpose		☐ Yes ☐ I
ج	conferring impermissible private benefit? rt II Conservation Easements. Complete if the organiza	ation answered "Yes" to Form 9	90 Part	
٠ <u></u>	Purpose(s) of conservation easements held by the organization (check all the		50, r art	1V, IIIIC 1.
,	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically imp	ortant land	l area
	Protection of natural habitat	Preservation of a certified historic		aica
	Preservation of open space	Treservation of a certified historic	Siruciure	
2	Complete lines 2a through 2d if the organization held a qualified conservation	contribution in the form of a conservat	ion	
•	easement on the last day of the tax year	Contribution in the form of a conservat	11011	
	casement on the last day of the tax your			Held at the End of the Tax Y
2	Total number of conservation easements		2a	Ticia at ale Ella of ale Tax
	Total acreage restricted by conservation easements		2b	
b	Number of conservation easements on a certified historic structure included	n (a)	2c	
		` '	20	-
a	Number of conservation easements included in (c) acquired after 8/17/06, an	id not on a	اما	
	historic structure listed in the National Register	about on towns atout by the accounting	2d	
;	Number of conservation easements modified, transferred, released, extinguis	sned, or terminated by the organization	auring the	,
	tax year >	u k .		
	Number of states where property subject to conservation easement is located			
5	Does the organization have a written policy regarding the periodic monitoring	, inspection, nandling of		
	violations, and enforcement of the conservation easements it holds?			∐ Yes ∐ I
•	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing co	onservation easements during the year		
,	Amount of expanses incurred in manifering inspecting and enforcing consec	avotion agramanta during the year		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conseil \$\rightarrow\$\$\$\$\$\$\$\$\$\$	valion easements during the year		
,	·			
•	Does each conservation easement reported on line 2(d) above satisfy the re-	quirements of section 170(n)(4)(B)		
	(i) and section 170(h)(4)(B)(ii)?			∐ Yes ∐ I
9	In Part XIII, describe how the organization reports conservation easements in	•		
	balance sheet, and include, if applicable, the text of the footnote to the organ organization's accounting for conservation easements.	ization's financial statements that descr	ndes the	
<u>_</u>	et III Organizations Maintaining Collections of Art, His	torical Transuras or Other Si	milar Ar	no et a
	Complete if the organization answered "Yes" to Form		IIIIIai As	ssets.
l a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to r		nee sheet	
· ·	works of art, historical treasures, or other similar assets held for public exhibit			
	public service, provide, in Part XIII, the text of the footnote to its financial state		.~ 01	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to repo		sheet	
_	works of art, historical treasures, or other similar assets held for public exhibit			
	public service, provide the following amounts relating to these items:	01		
	(i) Revenues included in Form 990, Part VIII, line 1	_	¢	
	(ii) Assets included in Form 990, Part X			Ψ e
	·	cimilar accete for financial acce	• th-	•
:	If the organization received or held works of art, historical treasures, or other following amounts required to be reported under SEAS 116 (ASC 058) relative		е гле	
_	following amounts required to be reported under SFAS 116 (ASC 958) relating	ig to triese items:		.
	Revenues included in Form 990, Part VIII, line 1		P	\$
<u>u</u>	Assets included in Form 990, Part X		<u></u>	<u> </u>

Schedule D (Form 990) 2012

d Equipmente Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

14030 05/14/2014 2 55 PM 71-0486926 NAC FOUNDATION, INC. Page 3 Schedule D (Form 990) 2012 Investments—Other Securities. See Form 990, Part X, line 12. Part VII (c) Method of valuation (a) Description of security or category Cost or end-of-year market value (including name of security) (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) (1) Total, (Column (b) must equal Form 990, Part X, col (B) line 12) Investments-Program Related. See Form 990, Part X, line 13 (a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value (1) (2) (3)(4) (5) (6) (7) (8) (9) (10)Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value (1)(2) (3) (4) (5) (6) (7) (8) (9)(10)Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value Federal income taxes (1) (2) (3) (4) (5) (6)(7)

(8) (9) (10)(11)Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 NAC FOUNDATION, INC.	·	71-048692	6	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return					
1	Total revenue, gains, and other support per audited financial statements		-	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			- 1	
а	Net unrealized gains on investments	2a		1	
b	Donated services and use of facilities	2b			
С	Recoveries of pnor year grants	2c		1	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e_	<u> </u>
3	Subtract line 2e from line 1	, ,		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			- 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1	
b	Other (Describe in Part XIII)	4b	<u></u>	1	
C	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	nts With	Expenses per 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			
C	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	r 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			
þ	,	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	
Pa	ert XIII Supplemental Information				

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

NAC FOUNDATION, INC.

Employer Identification number 71-0486926

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT SUPPORT SERVICES AND EXPENSES

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
RETURN IS REVIEWED BY EXECUTIVE DIRECTOR AND FINANCIAL OFFICER

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY RELATIONSHIPS REVIEWED ON ANNUAL BASIS

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL N/A

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS N/A

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION AVAILABLE TO PUBLIC UPON REQUEST