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### Ferm **990-PF**

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

2013

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

SCANNED DEC 1 7 2014

BAA For Paperwork Reduction Act Notice, see instructions.

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

		ul 1 ,2013	, and ending ປູນ				
	foundation	n.c.		A	Employer identification nur 27-0508346	nber	
Number a	ott Charitable Foundation, I and street (or PO box number if mail is not delivered to street a	Room/suite	В	B Telephone number (see the instructions)			
	Box 1039		(501) 315-7539				
	wn, state or province, country, and ZIP or foreign postal code		·		(		
Bent	on	AR	72018	С	If exemption application is	pending, check here . 🏲 📋	
G Ch	eck all that apply Initial return	Initial Return of a form	er public charity	<b>D</b>	1 Foreign organizations, che	ok hara	
	Final return	Amended return		ט	i Foreign organizations, the	CK Hele	
	Address change	Name change			2 Foreign organizations mee	ting the 85% test, check	
H C		(c)(3) exempt private fou	ındatıon		here and attach computation	on	
[	Section 4947(a)(1) nonexempt chantable trus		nvate foundation	Ε	If private foundation status	was terminated	
I F	1 1 1 1	ounting method X C			under section 507(b)(1)(A)		
(f	Dod # bos (a) bos (4)	Other (specify)		F	If the foundation is in a 60-	month termination	
<b>►</b> \$		column (d) must be on c	ash basis )	•	under section 507(b)(1)(B)	, check here >	
Part		(a) Revenue and	(b) Net investment	,	1	<del> </del>	
	Expenses (The total of amounts in	expenses per books	income		(c) Adjusted net income	(d) Disbursements for charitable	
	columns (b), (c), and (d) may not neces- sanly equal the amounts in column (a)	, ,				purposes	
	(see instructions) )					(cash basis only)	
	1 Contributions, gifts, grants, etc, received (att sch)	82,041.				1. A	
	2 Ck If the foundn is not req to att Sch B	* * * * * * * * * * * * * * * * * * *		,	2 3		
	3 Interest on savings and temporary						
	cash investments	86.	. 8	6.		'	
	4 Dividends and interest from securities						
	5 a Gross rents	· · · · · · · · · · · · · · · · · · ·				4.20 May 100 M	
	or (loss)	> 400 N N N N N N N N N N N N N N N N N N		, "	The state of the s		
R E	6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all		~ .* 4 - > ' *	12.	* * * * * * * * * * * * * * * * * * *	AF SO SE	
V	assets on line 6a · · ·	* *	· ** * ', * *				
Ε	7 Capital gain net income (from Part IV, line 2)		Δ.			and after the a	
N U	8 Net short-term capital gain		<del>                                     </del>	30,00			
Ĕ	9 Income modifications	, , , , , , , , , , , , , , , , , , ,	* * * *	`	- > 0.00.00.00	****	
	10 a Gross sales less returns and allowances	. ^ &	22 A . A . 4	, , , . , , , .	Sun (sun )		
	h Less Cost of			*	a service and the		
	goods sold · · ·	4 · * * * · · · * *	\$ W N	. 4	2 1 12 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	* ·** · * · * · * · * · · · · · · · · ·	
	c Gross profit/(loss) (att sch)		* \ 0				
	Tr Other moonie (attach scriedule)					·	
	12 Total. Add lines 1 through 11	82,127.		6.			
	13 Compensation of officers, directors, trustees, etc.	02,127.		0.		,	
	14 Other employee salaries and wages						
	15 Pension plans, employee benefits				· ·	<del></del>	
_	16 a Legal fees (attach schedule)						
Ĝ	<b>b</b> Accounting fees (attach sch)					<del></del>	
M I	c Other prof fees (attach sch)						
O I P S	17 Interest				<del></del>		
PS	18 Taxes (attach schedule)(see instrs). XA, Se Z. IT Investment	ocote 1.				1.	
R R A A	19 Depreciation (attach						
ÎÎ	sch) and depletion					<b>3</b>	
Ν̈́ν	20 Occupancy						
G E	21 Travelo conferences, and meetings of						
A E N X D P	22 Printing and publications						
N X D P	23 Other expenses (attach schedule)						
N							
S E	24 Total operating and administrative expenses. Add lines 13 through 23	1.				1	
S	25 Contributions, gifts, grants pald	78,135.	<u> </u>			78,135.	
	26 Total expenses and disbursements.	70,133.			<u> </u>	10,133.	
	Add lines 24 and 25	78,136.				78,136.	
	27 Subtract line 26 from line 12:						
	a Excess of revenue over expenses		*				
	and disbursements	3,991.	v	_	^ ** · , * ** <sub>0</sub>	~ *** *** *** *** *** *** *** *** *** *	
	<b>b</b> Net investment income (if negative, enter -0-)		8	6.	. , *		
	C Adjusted net income (if negative, enter -0-)		. >		1	1	

Form 990-PF (2013)

TEEA0301 10/18/13

	PF (2013) Elliott Charitable Foundation, In	Beginning of year	27-050	08346 Page fvear
t II	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Valu
1	Cash — non-interest-bearing	(a) book value	(B) Book Valde	(c) i all walket valu
'2	Savings and temporary cash investments	32,790.	36,781.	26 701
3	Accounts receivable	32,190.		36,781
	Less: allowance for doubtful accounts	4-1-4		
4	Pledges receivable		The Committee of the Co	
•	Less. allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)		· -	
7	Other notes and loans receivable (attach sch)			
'	Less allowance for doubtful accounts			
8	Inventories for sale or use		<del></del>	
9	Prepaid expenses and deferred charges			
1 -	a Investments – U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule)			
1	c Investments — corporate bonds (attach schedule)		<del></del>	
1	Investments – land, buildings, and equipment: basis · · · · · · · · · ·		,	ž.
	Less accumulated depreciation (attach schedule)			
12				
13	Investments — other (attach schedule)	-		
	Land, buildings, and equipment: basis	( 4 4 , 4	÷ · * * *	. 7
	Less accumulated depreciation (attach schedule)	<u> </u>		
15	· · · · · · · · · · · · · · · · · · ·			
16	Total assets (to be completed by all filers -			
ļ.,	see the instructions. Also, see page 1, item I)	32,790.	36,781.	36,78
17				\$ * <b>*</b>
18	Grants payable			* *. 4
19	Deferred revenue		-	· * "
20	Loans from officers, directors, trustees, & other disqualified persons			* *, *
21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe			· / ***,
23	Total liabilities (add lines 17 through 22)			1 % %
	Foundations that follow SFAS 117, check here b and complete lines 24 through 26 and lines 30 and 31.			* ***
24	Unrestricted			i , ŝ
25	Temporanily restricted		<del></del>	# " · · · · · · · · · · · · · · · · · ·
26	· · · · ·			<b>∮</b>
	Foundations that do not follow SFAS 117, check here X and complete lines 27 through 31.		<del></del> , ,	* · · · · · · · · · · · · · · · · · · ·
27	Capital stock, trust principal, or current funds			ĺ * · · · · · · · · · · · · · · · · · ·
27	Paid-in or capital surplus, or land, building, and equipment fund			<b>*</b> * *
28	Retained earnings, accumulated income, endowment, or other funds	20.700	26.701	
30	Total net assets or fund balances (see instructions)	32,790.	36,781.	·
31	Total liabilities and net assets/fund balances (see instructions)	32,790. 32,790.	36,781. 36,781.	<i>*</i>
t III	Analysis of Changes in Net Assets or Fund Balance		30,701.	L
	I net assets or fund balances at beginning of year — Part II, column (a of-year figure reported on prior year's return)		th	
Tota	or-year rigure reported on prior year's return)			32,79
Ente	er amount from Part I, line 27a		<b> </b>	3,99
Ente Other		<b>-</b>	3	3,99

Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 . . . . . . . . .

36,781.

2-story brick warehouse: or common stock 200 shares MI C Company)				red (C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a					
b					
c					
d					
e					
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain or (e) plus (f) mi	
а					
b					
С					
d				-	
		f 1			
	wing gain in column (h) and owned by the			(1) Gains (Col gain minus column (k	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column ( over column (j), if any	"	than -0-) or Losses (fr	
a					
b			ļ.		
<u> </u>					
d		· <del>-</del> ·			-
<u>e</u>					
If gain, also enter in Part I, lin	(loss) as defined in sections 1222(5) and e 8, column (c) (see instructions). If (loss)	), enter -0-		2	
	der Section 4940(e) for Reduce			3	
If 'Yes,' the foundation does not qua	action 4942 tax on the distributable amour alify under section 4940(e) Do not comple in each column for each year, see the ins	ete this part		· · · · · · · Yes	No
(a)  Base period years  Calendar year (or tax year  beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse		(d) Distribution column (b) divided b	
	81,315.	<u> </u>	0.	_	0.00000
2012	699.		0.		0.000000
2010	707.	<del></del>		· · ·	0.000000
2009	707.				
2008		<del></del>			
2 Total of line 1, column (d)				2	0.000000
	the 5-year base period — divide the total on has been in existence if less than 5 year			3	0.000000
4 Enter the net value of noncha	ritable-use assets for 2013 from Part X, li	ne 5		4	0.
5 Multiply line 4 by line 3				5	0.
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6	1.
			_	7	1.
8 Enter qualifying distributions f	from Part XII, line 4			8	78,136.
	than line 7, check the box in Part VI, line		_		,0,150.
- art vi matructiona	<del> </del>	<del></del>			

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction	 is)		-3				
1 a	Exempt operating foundations described in section 4940(d)(2), check here   and enter 'N/A' on line 1	•						
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)							
Ł	b Domestic foundations that meet the section 4940(e) requirements in Part V,							
	check here . ► X and enter 1% of Part I, line 27b	20	1.2	-				
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		Mestioner:2	Asi\				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.				
3	Add lines 1 and 2			1.				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			1.				
6	Credits/Payments.							
a	2013 estimated tax pmts and 2012 overpayment credited to 2013							
t	Exempt foreign organizations – tax withheld at source	٠,						
	Tax paid with application for extension of time to file (Form 8868) 6 c 1.	1						
c	Backup withholding erroneously withheld		<i></i>	·				
7	Total credits and payments Add lines 6a through 6d			1.				
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached							
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0.				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.				
_11	Enter the amount of line 10 to be Credited to 2014 estimated tax							
Par	t VII-A   Statements Regarding Activities							
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No				
	participate or intervene in any political campaign?	1 a		Х				
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		x				
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		,					
	Did the foundation file Form 1120-POL for this year?	1 c		Х				
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			2				
_	(1) On the foundation * \$ (2) On foundation managers * \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		,					
•	foundation managers * \$	<b>*</b> "	******					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X				
	If 'Yes,' attach a detailed description of the activities							
•		"		İ				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X				
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		Х				
Ł	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х				
	If 'Yes,' attach the statement required by General Instruction T	7	20					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	*	bs.					
	By language in the governing instrument, or	1 " "	`					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	· ·	*	` *				
	with the state law remain in the governing instrument?	6	Х					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	Х					
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)							
	AR - Arkansas	* *						
k	olf the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b	X	<u> </u>				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)		ļ					
	for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		Х				
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names							
BAA	and addresses	10 rm 99	0-PF /	X (2013)				

	t VII-A   Statements Regarding Activities (continued)	27-0	150834	6	P	age 5
Fai	t VII-A Statements Regarding Activities (continued)		<del></del> _			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If Yes', attach schedule (see instructions)			11		_ x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified peadvisory privileges? If 'Yes,' attach statement (see instructions)	erson had		12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption appli	cation? .		13	Х	
14	Website address		/F01\	 21 E		
	Located at P.O. Box 1039 Benton AR ZIP + 4	7201	75017	777	_/_>	2
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year		· · · · · ·		. •	
	and their the amount of the exempt interest reserved of boarded during the year.	г	13		Yes	No
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authorit bank, securities, or other financial account in a foreign country?			16	100	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If Yes,' enter the name of foreign country.	the		•		
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			,	,	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo		*	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo	2 🐴	* *	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	2	* *	. ]
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No		5	3 ×
			MINO	20		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo	 	***	, r vaj. e
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the				77	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	Yes	XNo	- 44	ay d	(
		Lies	Mo	. %	'₩ Y.	
t	olf any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			1 b	<u>~</u> _	ـــــا
	Organizations relying on a current notice regarding disaster assistance check here				ž ž	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?			1 c	* *	× ^
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			* *	* `	* } ~
	a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d			\$ A.	A	i
•	and 6e, Part XIII) for tax year(s) beginning before 2013?	Yes	X No	\$ «\$»	* ,	1
	If 'Yes,' list the years 20, 20, 20			*		
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) t all years listed, answer 'No' and attach statement — see instructions)	o 		<u>₹</u> 2 b		_ ]
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.					
	► 20 _ , 20 _ , 20 _ , 20			•	•	Ì
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No	* *		*
	o If 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation	ш	٠- ت	*	*	
K	or disqualified persons after May 26, 1969. (2) the lapse of the 5-year period (or longer period approved			,		
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to				1	
	determine if the foundation had excess business holdings in 2013)		• • • • •	3 b		
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		Х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could					
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?			4 b		
BAA				<u> </u>	0-PF (:	

TEEA0305 12/07/12

Form 990-PF (2013) Elliott Charitable	Foundation, I	nc.	27-050	)8346 Page					
Part VII-B   Statements Regarding Activit		n 4720 May Be Req	uired (continued)						
5 a During the year did the foundation pay or incur a	-		О. П	. '					
(1) Carry on propaganda, or otherwise attempt to	o influence legislation (se	ection 4945(e))?	Yes X	No C					
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?									
(3) Provide a grant to an individual for travel, stu	dy, or other similar purpo	oses?	Yes X	No 👙 💢					
(4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 49	a chantable, etc, organi: 40(d)(2)? (see instruction	zation descnbed ns)	Yes X	No .					
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes X No									
b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?									
Organizations relying on a current notice regardi	ng disaster assistance ch	neck here	▶ []	* /					
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	tion from the	Yes	No					
If 'Yes,' attach the statement required by Regulat	tions section 53.4945-5(d	<del>1</del> )							
6 a Did the foundation, during the year, receive any to on a personal benefit contract?	funds, directly or indirectl	y, to pay premiums	Yes X	No					
<b>b</b> Did the foundation, during the year, pay premium	is, directly or indirectly, o	n a personal benefit con	tract?	6b X					
If 'Yes' to 6b, file Form 8870									
7 a At any time during the tax year, was the foundation									
<b>b</b> If 'Yes,' did the foundation receive any proceeds									
Part VIII. Information About Officers, Dand Contractors	irectors, i rustees,	Foundation Manag	gers, Hignly Paid i	:mpioyees,					
1 List all officers, directors, trustees, foundatio	n managers and their c	ompensation (see inst	ructions)						
Total an emocre, and etc., tradeco, realisation	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense account,					
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances					
Lloyd Elliott	•								
3209 Duncan Road	President								
Benton AR 72019	2.00	0.	0.	0					
Cheryl Elliott 3209 Duncan Road	Vice Pres.								
Benton AR 72019	0.50	0.	0.	0					
Donna Fralick									
6719 Courtney	Secretary	_	_						
Bryant AR 72019	0.50	0.	0.	0					
See Information about Officers, Directors, Trustees, Etc									
		0.	0.	o					
2 Compensation of five highest-paid employee	s (other than those inc								
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances					
NONE			<u> </u>						
				<del></del>					
Tabel must be of all and all all and all all and all and all all all all all all all and all all all all all all all all all al									
Total number of other employees paid over \$50,000 .  BAA	TEEA0306 07			None Form <b>990-PF</b> (2013					

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mpioyees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
,	
Total number of others receiving over \$50,000 for professional services	None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	
	<del></del> -
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All at a second at	
All other program-related investments. See instructions	
<sup>3</sup>	
Total. Add lines 1 through 3	
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Page 8

	see instructions.)		
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities	1 a	
t	Average of monthly cash balances	1 b	
c	Fair market value of all other assets (see instructions)	1 c	
C	Total (add lines 1a, b, and c)	1 d	
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets		
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	found	dations
	and certain foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6		0.
2 a	Tax on investment income for 2013 from Part VI, line 5	7.	
k	Income tax for 2013 (This does not include the tax from Part VI ) 2 b		
c	Add lines 2a and 2b	2 c	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		0.
6	Deduction from distributable amount (see instructions)	6	-
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Pai	Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish chantable, etc, purposes. Expenses, contributions, gifts, etc — total from Part I, column (d), line 26		78,136.
Ł	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	78,136.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	1.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	78,135.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years	undatio	on
BAA			Form 990-PF (2013)

#### Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2012	<b>(c)</b> 2012	( <b>d)</b> 2013
	istributable amount for 2013 from Part XI,				0.
	ndistributed income, if any, as of the end of 2013	7			
	nter amount for 2012 only			0.	
	otal for prior years 20 , 20 , 20	··· · · · · · · · · · · · · · · · · ·			
	ccess distributions carryover, if any, to 2013		,	4	
	rom 2008				ł
<b>b</b> Fi	rom 2009 42,026.				
c F	rom 2010				
d F	rom 2011	,			
e F	rom 2012 · · · · · 81,316.	*			*
f T	otal of lines 3a through e	124,749.			
4 Q	ualifying distributions for 2013 from Part				
Х	II, line 4: ► \$ 78,136.	5	*	* *	* .
a A	pplied to 2012, but not more than line 2a	,		*	
	pplied to undistributed income of prior years lection required — see instructions)	* * * *		*,,,*	
	reated as distributions out of corpus Election required — see instructions)		<i>2</i> /	*	
,	pplied to 2013 distributable amount	* * * * * *	<b>\</b>	* <	
	emaining amount distributed out of corpus	78,136.	* * *	. ** * * * * *	
5 Ex	ccess distributions carryover applied to 2013		* *		
(1	f an amount appears in column (d), the	., %			* * * *
Si	ame amount must be shown in column (a) )	, , ,		* *	
6 -			· · · · · · · · · · · · · · · · · · ·	* * * * * *	4 % "
	nter the net total of each column as idicated below:	*	* ^ ^	* * * * * * * *	
a C	orpus Add lines 3f, 4c, and 4e Subtract line 5	202,885.		. , , , , , , , , , , , , , , , , , , ,	
b P	nor years' undistributed income. Subtract	1	0.	· * * * * * * * * * * * * * * * * * * *	
	nter the amount of prior years' undistribut-	, , , , , ,			
e h	d income for which a notice of deficiency as been issued, or on which the section 942(a) tax has been previously assessed	* * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	
	, ,	* * *			
	ubtract line 6c from line 6b Taxable mount — see instructions	·> * · · · · · · · · · · · · · · · · · ·	0.		
	ndistributed income for 2012 Subtract line 4a from se 2a Taxable amount — see instructions		* * * *	0.	* * :
		. , , , ,			
4	ndistributed income for 2013. Subtract lines d and 5 from line 1. This amount must be istributed in 2014	* * * * *		, , , , , , , , , , , , , , , , , , ,	0.
7 A	mounts treated as distributions out of		* .		
b	orpus to satisfy requirements imposed y section 170(b)(1)(F) or 4942(g)(3) see instructions)				, , ,
•	xcess distributions carryover from 2008 not pplied on line 5 or line 7 (see instructions)	0.	<del></del>		, ,
9 E	xcess distributions carryover to 2014. ubtract lines 7 and 8 from line 6a				
_	nalysis of line 9	202,885.			
	1				
	xcess from 2009				
				•	
	xcess from 2012				
e⊨	xcess from 2013 78,136.	L	l	<u> </u>	l

Form 990-PF (2013) Elliott Charitabl				27-0508346	Page 10
Part XIV Private Operating Foundat	<del></del>	N/A			
1 a If the foundation has received a ruling or dete is effective for 2013, enter the date of the ruli	ng			· · <u>· ·</u> · · · · · • • [	
b Check box to indicate whether the foundation		ing foundation descr		4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	<del>  </del>	Pnor 3 years		
investment return from Part X for each year listed	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	•				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the			foundation had	d \$5,000 or more	in
1 Information Regarding Foundation Manag		istractions.)		<del></del>	<del></del>
a List any managers of the foundation who have close of any tax year (but only if they have compared to the compared to t	e contributed more	than 2% of the total n \$5,000). (See secti	contributions receive ion 507(d)(2) )	ed by the foundation be	efore the
Lloyd Elliott					
Cheryl Ellıott		· · · · · · · · · · · · · · · · · · ·			
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the fou	n 10% or more of the ndation has a 10%	e stock of a corporat or greater interest.	tion (or an equally lai	ge portion of the owne	ership of
None					
2 Information Regarding Contribution, Gran Check here    X if the foundation only ma requests for funds If the foundation makes g complete items 2a, b, c, and d.	kes contributions to ifts, grants, etc (see	preselected charita instructions) to indi	ble organizations and viduals or organization	ons under other conditi	olicited ons,
a The name, address, and telephone number of	or e-mail of the pers	on to whom applicat	ions should be addre	essed	
<b>b</b> The form in which applications should be sub	mitted and informat	tion and materials th	ey should include:		
c Any submission deadlines					
d Any restrictions or limitations on awards, suc	h as by geographic	al areas, charitable fi	ields, kinds of institut	ions, or other factors	
,	, ggp-	,	,	_,	

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient		If recipient is an individual, show any relationship to any foundation manager or		Purpose of grant or contribution	Amount
Name and address (home or busing	ness)	substantial contributor	recipient		
a Paid during the year					
Arkansas Rice Depot				<b>'</b>	
3801 W 65th Street				İ	
	R 72209		Unknown	Feed the hungry	2,000.
Jacksonville Fraternal Order of	Police #16				
1400 Marshall Rd				Support for	
	R 72076		Unknown	[-	500.
Christian Community Care	Clinic			Provide medical	
220 W South Street				& dental care	
	R 72015	l	Unknown	to uninsured	9,000.
Little Rock Compassion C	enter				
PO Box 4249				Provide basic	
	R 72214		Unknown	needs to the needy	1,500.
Salıne County Safe Haven	Inc			Provide help to	
PO Box 1100			,	victims of domestic	
	R 72018		Unknown	violence	4,000.
Samarıtan Ministries of Hot Sp	orings Inc	•			
131 Sanford Street				Provide shelter	
1	R 71903		Unknown	to the homeless	2,500.
Youth Home Inc					
20400 Colonel Glenn				Help emotionally	
	R 72210		Unknown	troubled adolescents	2,000.
Boys & Girls Club of Sal	ine Co.		ŀ	Provide support	
105 Cox Street				for boys & girls	
	R 72015		Unknown	of Saline Co.	3,500.
Benton Sr Citizen Ctr				, ,	
201 Jefferson St	5 70015		ļ., ,	Provide meals	2 544
	R 72015		Unknown	on wheels	3,500.
See Line 3a statement				ļ į	
					40 625
					49,635.
Total					78,135.
b Approved for future payment					
				}	
		•			
		i .		ı	

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)	
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)	
•	am service revenue			code			
a				-			
b							
d	· · · · · · · · · · · · · · · · · · ·			-			
e	_			_			
·							
7 <u></u>	and contracts from government agencies		<u> </u>	-			
_	bership dues and assessments			<u> </u>	·		
	st on savings and temporary cash investments			<del> </del>		86.	
	ends and interest from securities						
	ental income or (loss) from real estate	* * . *	To a find the second		Control of the Contro	A 12. 12. 14.	
	financed property		7, (4, 7, 5, 4, 4), 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	<u> </u>			
	ebt-financed property	-					
	ntal income or (loss) from personal property			<u> </u>		<del></del>	
	investment income						
8 Gain o	r (loss) from sales of assets other than inventory		-				
	ncome or (loss) from special events						
	s profit or (loss) from sales of inventory			<del></del>			
11 Other	revenue.	***	-24.52.24.25	****	12.5/12.72.95.468.		
а							
b							
С				<u> </u>			
d							
e				. "35" # 40			
	otal. Add columns (b), (d), and (e)			ShorBerr	l	86.	
	. Add line 12, columns (b), (d), and (e)		• • • • • • • • • • •		13	86.	
(See works	heet in line 13 instructions to verify calculations	; )			<del> </del>		
Part XVI	-B Relationship of Activities to the	Accomp	lishment of Exemp	ot Pur	ooses		
Line No.	Explain below how each activity for which inco	ome is report	ed in column (e) of Part	XVI-A ca	ontributed importantly to	the	
▼	accomplishment of the foundation's exempt po	urposes (oth	er than by providing fund	s for su	ch purposes) (See instri	uctions)	
3	The interest income is accum	nulated	in the bank ac	count	of the		
	organization and distributed						
	Foundation.						
						_	
			· <del>-</del> -				
		<u> </u>				<del></del>	
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			<u> </u>				
			<del> </del>				

# Form 990-PF (2013) Elliott Charitable Foundation, Inc. 27-0508346 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Di	d the o	rganization directly	or indirectly eng	age in any of the	following with an	y other o	rganization	,		Yes	No
de	scribed	d in section 501(c) o o political organizati	of the Code (other	er than section 50	01(c)(3) organizat	ions) or I	n section 527,				İ
	•	s from the reporting		nonchantable exe	empt organization	of			Market	mandibo.	.
(1	) Cash	1							1 a (1)		X
(2	) Othe	r assets							1 a (2)		X
<b>b</b> O1	her tra	nsactions									
(1)	) Sale:	s of assets to a non	icharitable exem	pt organization.			. <b></b> .		1 b (1)		X
•	•			. •							Х
											Χ_
•	•	•							<u> </u>		X
	•								<u> </u>		X
•	•		•	•							X
c Sh	naring o	of facilities, equipme	ent, mailing lists,	other assets, or	paid employees.	• • • •			1 c		X
the	e good:	s, other assets, or s	services given by	the reporting fol	undation. If the for	undation	received less tha	now the fair market vanue	alue of		
	<u> </u>	saction or sharing a	<del></del>		<del>-</del>						
(a) Line	no	(b) Amount involved	(c) Name	of noncharitable exer	mpt organization	(d)	Description of trans	sfers, transactions, and	haring arran	gements	<u> </u>
						ļ				<u> </u>	
	-	· · · · · · · · · · · · · · · · · · ·									
	+					<del></del>					
<u> </u>	$\dashv$		<del>-</del>			<u> </u>					
	+		<del>-</del>			<u> </u>					
	+										
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				_							
				· · · ·		Ì			···		
									·		
						<u> </u>					
de	scribe		of the Code (other	d with, or related er than section 50	to, one or more t )1(c)(3)) or in sec	ax-exemption 5277	ot organizations		. Yes	X	No
b If	•	omplete the following					<del></del>				
	(a)	Name of organizati	ion	( <b>b</b> ) Type	e of organization		(с	Description of relat	ionship		
		<u>-</u> .								-	
<del></del>		<del> </del>									—
								<del></del>	<del></del>		<del></del>
	Under po	enalties of penjury, I declar	re that I have examine	d this return, including	accompanying schedu	les and stat	ements, and to the be	st of my knowledge and be	elief, it is true,		
	correct, a	and complete Declaration	of preparer (other that	ın taxpayer) is based o	on all information of whi	ch preparer	has any knowledge		<u> </u>	-	
Sign		131 A	510	. 1	12/1/201	. /	Dosain	!	May the I this return preparer	with the	: I
Here	Signal	ture of officer or trustee	PILL	<del>~</del> }	Date 7201	<b>*</b>	PRESIDE	EN7	(see instr	uctions)?	ᅩ,
	Z'g''al	Print/Type preparer's na	ame	/ Preparer's:	signature	- "	Date	Charle	X	Yes	No
Dai-				Med	ar Woolde	44		Checkif	i	E 2 0	
Paid			JORDAN C.	WOOLERIGHT	r, CPA, P.A	<u>v</u>	11/17/14	self-employed	<u>P00646</u> 142929	530	
Prepa		-		OSS STREET	I, CEM, F.F	7.		7U-3	142329		
Use O	illy	-	BENTON	JOS SIREEI	7	AR 72	015-3825	Phone no (501	) 315-	6812	
BAA		·	22111011	<del></del>		12	010 0020	(301	Form 990		2013)
_· ·· ·									1 01111 331	- " " (2	.010)

#### Schedule B

(Form 990; 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization		Employer Identification number						
Elliott Charitable Fo	27-0508346							
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)( ) (enter number) organization	ition						
	4947(a)(1) nonexempt charitable trust no	4947(a)(1) nonexempt chantable trust <b>not</b> treated as a private foundation						
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt chantable trust tre	4947(a)(1) nonexempt chantable trust treated as a private foundation						
	501(c)(3) taxable private foundation							
Check if your organization is covered	d by the General Rule or a Special Rule							
Note Only a section 501(c)(7) (8)	or (10) organization can check boxes for both the General R	Pule and a Special Pule. See instructions						
	y (10) organization can check boxes for both the General IV	tule and a opecial Nule Gee Instructions						
General Rule	990, 990-EZ, or 990-PF that received, during the year, \$5,00	)() or more (in money or property) from any one						
contributor (Complete Parts I ar	iso, sso-Ez, or sso-Fr that received, during the year, \$5,00 id II )	of more (in money or property) from any one						
Special Rules								
For a section 501(c)(3) organiza	tion filing Form 990 or 990-EZ that met the 33-1/3% support	t test of the regulations under sections						
509(a)(1) and 170(b)(1)(A)(vi) ar	nd received from any one contributor, during the year, a con n 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete	tribution of the greater of (1) \$5,000 or						
total contributions of more than \$	<ul><li>10) organization filing Form 990 or 990-EZ that received from \$1,000 for use exclusively for religious, charitable, scientific,</li></ul>							
_ '	ren or animals Complete Parts I, II, and III							
For a section 501(c)(7), (8), or (1	<ol> <li>organization filing Form 990 or 990-EZ that received fron for religious, charitable, etc, purposes, but these contributio</li> </ol>	n any one contributor, during the year,						
If this box is checked, enter here	the total contributions that were received during the year fo	or an exclusively religious, chantable, etc,						
	f the parts unless the <b>General Rule</b> applies to this organizat utions of \$5,000 or more during the year							
religious, chantable, etc, contribi	nions of \$5,000 of more during the year	· · · · · · · · · · · · · · · · · · ·						
Caution: An organization that is not	covered by the General Rule and/or the Special Rules does	s not file Schedule B (Form 990, 990-EZ, or						
Part I, line 2, to certify that it does no	Part IV, line 2, of its Form 990; or check the box on line H of of meet the filing requirements of Schedule B (Form 990, 990	its form 990-EZ or on its form 990-PF, 0-EZ, or 990-PF).						
BAA For Paperwork Reduction A	ct Notice, see the Instructions for Form 990, 990EZ,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2013)						
or 990-PF.	,	2334 2 (. 3 333, 330 22, 37 330 17 ) (2013)						

1 of **Part 1** 

Elliott Charitable Foundation, Inc.

Page 1 of Employer Identification number 27-0508346

Partil	Contributors	(see instructions)	Use duplicate copies of	f Part I if additional:	space is needed
--------	--------------	--------------------	-------------------------	-------------------------	-----------------

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Lloyd & Cheryl Elliott  3209 Duncan Road  Benton AR 72019	\$ <u>30,411.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Elliott Electrical, Inc.  P.O. Box 1039  Benton AR 72018	\$48,401.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions Part II for noncash contributions
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

'Form 990-PF, Page 6, Part VIII, Line 1
Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions- to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person . X Business . Cody Fow				
3995 Pleasant Run	Director			
Benton AR 72019 Person. X Business . Christopher R Coffman	0.25	0.	0.	0.
10285 Gunter Loop	Director			
Benton AR 72019 Person . X Business .	0.25	0.	0.	0.

0.	0.	0.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
Special Olympics Arkansas			Provide support	Person or
POB 56589-0			for people with	Business X
Little Rock AR 72215		Unknown	dısabilities	1,000.
Grape Chapel Church			Support	Person or
7100 Hwy 298	.		church mission	Business X
Benton AR 72019		Unknown	for children	1,000.
St Jude Research Hospital				Person or
262 Danny Thomas Place				Business X
Memphis TN 38105		Unknown	Medical research	2,000.
Brandon Burlsworth Foundation			Support for	Person or
119 W Central Ave			childrens	Business X
Harrison AR 72601		Unknown	needs	4,000.
Gaines House			Meeting needs	Person or
1702 Gaines St			of homeless	Business X
Little Rock AR 72206		Unknown	women	1,500.

'Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
Union Rescue Mission			Support	Person or
POB 164057			homeless men_	Business X
Little Rock AR 72216		Unknown	& women shelters	1,000.
Ark Municipal Police Assn			Support	Person or
8500 W Markham St Ste 215			municipal	Business X
Little Rock AR 72205		Unknown	police	1,000.
<u>Ark Childrens Hospital Foundation</u>			Budget support	Person or
1_Childrens Way Slot 661_			for	Business X
Little Rock AR 72202		Unknown	ACH	7,000.
Regener8 Outreach Ministry			Budget	Person or
2048 N Jackson			support for	Business X
Magnolia AR 71753		Unknown	mınistry	500.
Civitan Center			Support for	Person or
121 S_Cox_St			helping Civitan	Business X
Benton AR 72015		Unknown	clients	3,000.
Arkansas Food Bank Network		<b> </b> -		Person or
8121 Distribution Dr.		-,-,	Food for the	Business X
Little Rock AR 72209		Unkown	hungry	500.
Cystic Fibrosis Foundation				Person or
PO Box 52074			Cystic Fibrosis	Business X
Pheonix AZ 85072-2074		Unknown	support	200.
Easter Seals			Provide support	Person or
PO Box 707		Introven	for people with disabilities	Business X
Little Rock AR 72203 Eternal Life Recovery		Unknown	·	Person or
15523 Interstate 30			Provide support for addiction	Business X
		IInknown	<b></b>	100.
Benton AR /2015 Ouachita Bapitst University		Unknown	recovery	Person or
410 Ouachita St.			Support educational	Business X
Arkadelphia AR 71998		Unknown	institution	17,000.
Paralyzed Veterans of America		OHAHOWH	Institution	Person or
PO Box 758532	,		Assist in veteran	Business X
Topeka KS 66675		Unknown	support	500.
Wounded Warrior		0	- Support	Person or
PO Box 758540			Assist in support	Business X
Topeka KS 66675		Unknown	of wounded veterans	1,500.
Minor and Cynthia George			Loss of home to	Person or X
416 East Hillside Dr.			fire in December	Business
Benton AR 72015	No relationship	Unknown	2013	1,000.
Sunni Ackley			-	Person or X
2410 N Lakeview				Business
Benton AR 72015	No relationship	Unknown	Medical expenses	5,000.
Shane Lambert		-		Person or X
210 Faith Trail				Business
Hot Springs AR 71901	No relationship	I =	Medical expenses	1,000.

'Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year  Magic Springs  1701 E. Grand St  Hot Springs AR 71901		Unknown	Season_passes for needy children	Person or Business X

Total

49,635.