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Form **990-PF**

For calendar year 2014 or tax year beginning

, and ending

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Nar	ne of fou	ndation			A Emplo	yer identification number	
7	וגשס	NSAS ANIMAL RESCUE FOUNDATION	NT		20.	-5795124	
		street (or P O box number if mail is not delivered to street address)		oom/suite		none number (see instructions)	
		SMOKE TREE ROAD				9-331-2642	
		state or province, country, and ZIP or foreign postal code			C If exen	nption application is pending, c	heck here
	OVE				┥		▶ □
GC	heck a		rn of a former public o	narity	İ	reign organizations, check here	_
						reign organizations meeting the % test, check here and attach of	
			. <u> </u>		1		
_		ype of organization X Section 501(c)(3) exempt private			1	ite foundation status was termii n 507(b)(1)(A), check here	nated under
		n 4947(a)(1) nonexempt charitable trust Other taxable trust Uther taxable trust J Accounting method	le private foundation X Cash Acc	crual	1	oundation is in a 60-month terr	nination
		ear (from Part II, col (c), Other (specify)	Casii Acc	Juai		section 507(b)(1)(B), check he	
	e 16) j		be on cash basis.)				
	ırt i	Analysis of Revenue and Expenses (The total of	(a) Revenue and	0.1.11.4		(2) Advantad = 4	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net into		(c) Adjusted net income	for charitable purposes
	T .		10,797,680				(cash basis only)
	1 2	Contributions, gifts, grants, etc., received (attach schedule) Check if the foundation is not required to attach Sch B	10,191,080				
	3	Interest on savings and temporary cash investments	58,921		7,049	58,921	
	4	Dividends and interest from securities	156,156		56,156	156,156	
	5a	Gross rents			,		
ø	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	144,965				
Š	b	Gross sales price for all assets on line 6a 144, 965					
æ	7	Capital gain net income (from Part IV, line 2)			0		
ശ	8	Net short-term capital gain		ļ		0	
2018	9	Income modifications					
8	10a	Gross sales less returns and allowances	<u> </u>	 			
8	b	Less Cost of goods sold	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule) STMT 2	892			892	
FEB	12	Total. Add lines 1 through 11	11,158,614		.63,205	215,969	
	13	Compensation of officers, directors, trustees, etc	(······································
Expenses	14	Other employee salaries and wages	98,412				98,412
ens	35	Pension plans, employee benefits RECEIVE	9,989		_		9,989
ď	16a	Legal fees (attach schedule)					
	ැබි b	Accounting fees (attach schedule) STMT 3	(0) 14,731				14,731
Ę	C	Other professional fees (attach schedule)					
tra	17	Interest	41	-	1 501		41
nis	18	Taxes (attach schedule) (see instructions)	1,549		1,501		48
Operating and Administrative	19 20	Depreciation (attach schedule) and depletion STMT 5	24,744	' 			
Ad	21	Occupancy Travel, conferences, and meetings		 		<u> </u>	
ng u	22	Printing and publications					
e D	23	Other expenses (att sch.) STMT 6	268,904				268,904
ţi	24	Total operating and administrative expenses.					
Fa		Add lines 13 through 23	418,370		1,501	0	392,125
ğ	25	Contributions, gifts, grants paid SEE STATEMENT 7	200,000	1			200,000
	26	Total expenses and disbursements. Add lines 24 and 25	618,370)	1,501	0	592,125
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	10,540,244		61 50		
	b	Net investment income (if negative, enter -0-)		1	61,704	215,969	
	<u> </u>	Adjusted net income (if negative, enter -0-)	<u> </u>	1		· ^-7	Form 990-PF (2014)
DAA	apen	work Reduction Act Notice, see instructions.				5 GT3	(2014)
J-V-						AI	VIENUE

Pai	* Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	
	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	12,728	28,319	28,319
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
1	Less allowance for doubtful accounts ▶	1,039,750		
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
ı	disqualified persons (attach schedule) (see			
	instructions)			
7				
	Less allowance for doubtful accounts ▶ 0			······································
হ হ	Inventories for sale or use			
Assets 6 8	Prepaid expenses and deferred charges			
4 10	· · · · · · · · · · · · · · · · · · ·			
	b Investments – corporate stock (attach schedule) SEE STMT 8	1,332,318	9,659,113	12,102,179
- -	c Investments – corporate bonds (attach schedule)			
11	Investments – land, buildings, and equipment basis			
ŀ	Less accumulated depreciation (attach sch.) ▶			
12	Investments – mortgage loans			
13	,			
14	,		1	
- 1	Less accumulated depreciation (attach sch) ► STMT 9 24 , 891	1,354	3,239,241	3,264,132
15	Other assets (describe >			
16	Total assets (to be completed by all filers – see the			
_	instructions. Also, see page 1, item I)	2,386,150	12,926,673	15,394,630
17	Accounts payable and accrued expenses	1,645	1,924	
<u></u>	Grants payable			
<u>.</u> 19	Deferred revenue	ļ		
Liabilities 12 13 14 15	Loans from officers, directors, trustees, and other disqualified persons			
<u>.e</u> 21	Mortgages and other notes payable (attach schedule)			
_ 22	Other liabilities (describe ►)			
23	Total liabilities (add lines 17 through 22)	1,645	1,924	
	Foundations that follow SFAS 117, check here			
Ses	and complete lines 24 through 26 and lines 30 and 31.			
일 24	Unrestricted			
Net Assets or Fund Baland	Temporarily restricted			
핑 26	· · · · · · · · · · · · · · · · · · ·			
틧	Foundations that do not follow SFAS 117, check here		1	
띱	and complete lines 27 through 31.			
β 27	Capital stock, trust principal, or current funds			
9 28 S				
S 29	Retained earnings, accumulated income, endowment, or other funds	2,384,505	12,924,749	
항 30	Total net assets or fund balances (see instructions)	2,384,505	12,924,749	
Z 31	Total liabilities and net assets/fund balances (see			
	instructions)	2,386,150	12,926,673	
Par		· · · · · · · · · · · · · · · · · · ·		
	tal net assets or fund balances at beginning of year – Part II, column (a), line 30 (mu	ist agree with		0 004 505
	d-of-year figure reported on prior year's return)		1	2,384,505
	eter amount from Part I, line 27a		2	10,540,244
	her increases not included in line 2 (itemize) ▶		3	10 001 =:=
	ld lines 1, 2, and 3		4	12,924,749
	ecreases not included in line 2 (itemize)		5	10 004 545
<u>6 To</u>	tal net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	12,924,749

Form 990-PF (2014)

Part VI instructions

Form	990-PF (2014) ARKANSAS ANIMAL RESCUE FOUNDATION 20-5795124				Pa	ige 4
_Pa	int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions	<u> </u>				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1_	ļ		3,2	<u> 234</u>
	here ▶ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of					
	Part I, line 12, col (b)					^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	 		3,2	24
3	Add lines 1 and 2	3	 	_	3,2	2.34
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	 		3 7	234
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	-		3,2	.34
6	Credits/Payments					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	┨				
þ	Exempt foreign organizations – tax withheld at source	1				
С	Tax paid with application for extension of time to file (Form 8868) 6c	1				
d	Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d. TAX PAID W/ O.R. 3,267	┨ _	İ		2 1	267
7	rotal ordate and payments ride miles sa times gives	7	+		3,2	33
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8				<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				—
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶	11	<u> </u>			
	rt VII-A Statements Regarding Activities				Yes	No
1a				1a	162	X
	participate or intervene in any political campaign?			ıa ı		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			1b		X
	Instructions for the definition)?			'''		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
_	published or distributed by the foundation in connection with the activities			1c	İ	X
C	Did the foundation file Form 1120-POL for this year?			'		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
_	(1) On the foundation \$ (2) On foundation managers \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
2	on foundation managers \$			2		x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?					
2	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					į
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5		X
J	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					ĺ
-	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					ĺ
	conflict with the state law remain in the governing instrument?			6	X	ĺ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Pa	art XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	AR					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					ĺ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
-	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			1		
	complete Part XIV			9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses			10		x
			F	orm 99	0-PF	(2014)

Form 990-PF (2014)

om	1990-PF (2014) ARKANSAS ANIMAL RESCUE FOUNDAT		795124			Page 6
Pa	art VII-B. Statements Regarding Activities for Which Form	<u>4720 May Be R</u>	lequired (cont	inued)		
5a	During the year did the foundation pay or incur any amount to			_ _		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	\ \\	es X No		
	(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,				
	directly or indirectly, any voter registration drive?		_	'es X No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		\ \ \ \	es X No		
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in		==		
	section 4945(d)(4)(A)? (see instructions)		\ \	es X No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, of	r educational				
	purposes, or for the prevention of cruelty to children or animals?			es X No		
þ	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify und			37 /3		
	Regulations section 53 4945 or in a current notice regarding disaster assistance	e (see instructions)?	•	N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check his					-
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax	/- 🗆	.		
	because it maintained expenditure responsibility for the grant?		N/A 📗 Y	′es		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)					
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums				
	on a personal benefit contract?			es 🗓 No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	rsonal benefit conti	ract?		6b	X
	If "Yes" to 6b, file Form 8870		С,	, T		
	At any time during the tax year, was the foundation a party to a prohibited tax sl			es X No		- 1
	If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Pa	Information About Officers, Directors, Trustees, Fo	oundation wan	agers, migniy	Paid Employ	ees,	
4 1	and Contractors List all officers, directors, trustees, foundation managers and their compens	eation (see instruc	tions)			
	ist all officers, directors, trustees, roundation managers and their compens	Tation (see mande		(d) Contributions to	T	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense account,
	(a) Haine and addiess	devoted to position	enter -0-)	plans and deferred compensation	other	allowances
SE.	E STATEMENT 10			<u>-</u> <u>-</u>		
Ų.	D STATEMENT TO	İ			İ	
						
			į			
2	Compensation of five highest-paid employees (other than those included	on line 1 - see ins	tructions). If non	e, enter		
	"NONE."					
		(b) Title, and average		(d) Contributions to	4.3 500	
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense account, allowances
		devoted to position		compensation		
NO	NE					
					1	
		<u> </u>				
					ļ	
			<u> </u>			
			L	L	<u> </u>	
ota	I number of other employees paid over \$50,000					1 C

Form **990-PF** (2014)

Total. Add lines 1 through 3

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

	1 990-PF (2014) ARCANSAS ANIMAL RESCUE FOUNDATION 20 5795124		Page o
P	 Art X , Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.) 	n four	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	Г	
•	purposes		
а	Average monthly fair market value of securities	1a	11,711,886
b	Average of monthly cash balances	1b	15,791
c	Fair market value of all other assets (see instructions)	1c	20,752
d	Total (add lines 1a, b, and c)	1d	11,727,677
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	2	0
3	Subtract line 2 from line 1d	3	11,727,677
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see	-	
7	instructions)	4	175,915
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	11,551,762
6	Minimum investment return. Enter 5% of line 5	6	577,588
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
• •	and certain foreign organizations check here ► X and do not complete this part)	·ouria	4110110
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI)	1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
		<u> </u>	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	592,125
b	Program-related investments – total from Part IX-B	1b	··········
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	592,125
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	592,125
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	

Form **990-PF** (2014)

20-5795124

Page 9

Forn	n 990-PF (2014) ARKANSAS ANI	MAL RESCUE	FOUNDATION	20-57951	24	Page 10
	art XIV Private Operating Fou			t VII-A, question 9)		
1a	If the foundation has received a ruling or					
	foundation, and the ruling is effective for			▶		N/A
b	Check box to indicate whether the foundation		•	ped in section 49	42(j)(3) or X 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for					
	each year listed N/A				İ	
b	85% of line 2a N/A					
c	Qualifying distributions from Part XII,					
·	line 4 for each year listed	592,125	317,492	105,890	86,106	1,101,613
d	Amounts included in line 2c not used directly					
ŭ	for active conduct of exempt activities					
е	Qualifying distributions made directly					
-	for active conduct of exempt activities					
	Subtract line 2d from line 2c	592,125	317,492	105,890	86,106	1,101,613
2		392,123	317,432	103,030	00,200	
3	Complete 3a, b, or c for the				Ì	
_	alternative test relied upon					
а	"Assets" alternative test – enter (1) Value of all assets N/A					
	•					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i) N/A					
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in		00 070	00 400	20.400	476 036
	Part X, line 6 for each year listed	385,059	33,979	28,499	28,499	476,036
С	"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) N/A					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii) N/A					
	(3) Largest amount of support from					
	an exempt organization N/A					
	(4) Gross investment income N/A					
Pi	art XV Supplementary Inform	nation (Complete	this part only if	the foundation ha	ad \$5,000 or more	in assets at
	any time during the ye					
1	Information Regarding Foundation Ma		•			
a	List any managers of the foundation who	-	e than 2% of the total	contributions received	by the foundation	
_	before the close of any tax year (but only					
	N/A	ii iiioj iiavo oomiiisei		(,	
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	on (or an equally large	portion of the	
	ownership of a partnership or other entity				p = 1.1.0.	
	N/A	, or which the louridat	ion has a 10% of grea	ter interest		
2	Information Regarding Contribution, C	Grant Gift Loan Sal	volerchin etc. Progr	ame:	-	
2	Check here X if the foundation only				oes not accept	
	unsolicited requests for funds If the foun		ants, etc. (see instruct	ions) to individuals of t	nganizations under	
	other conditions, complete items 2a, b, c					
а	The name, address, and telephone numb	per or e-mail address (of the person to whom	applications should be	addressed	
	N/A					
						 .
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include		
	N/A					
С	Any submission deadlines					
	N/A	 				
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fi	elds, kınds of ınstitutioi	ns, or other	
	factors					
	N/A					***
DAA					<u> </u>	Form 990-PF (2014

Total		<u> </u>	> 3b	
			<u> </u>	
N/A				
b Approved for future payment				
Total			▶ 3a	200,000
]	
LITTLE ROCK AR 72217		FOUNDAT	ION GRANT	200,000
P. O. BOX 7604	NONE	PAID	<u> </u>	
CARE FOR ANIMALS				
Name and address (home or business) a Paid during the year	or substantial contributor	 	 	
	any foundation manager	status of recipient	contribution	Amount
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Account
3 Grants and Contributions Paid During t	ne Year or Approved for	Future Payment		
Paπ AV Supplementary information (continued)			

Enter gross am	ounts unless otherwise indicated	Unrelate	d business income	Excluded b	by section 512, 513, or 514	(e)
1 Program se	ervice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a DONA						892
			·			
d						
f						
g Fees an	nd contracts from government agencies					
2 Membership	p dues and assessments					
3 Interest on	savings and temporary cash investments		- ·	14	58,921	
4 Dividends a	ind interest from securities			14	156,156	····
5 Net rental in	ncome or (loss) from real estate					
a Debt-fir	nanced property					
b Not deb	ot-financed property					-
6 Net rental in	ncome or (loss) from personal property					
7 Other inves				 -		
8 Gain or (los	s) from sales of assets other than inventory			<u> </u>		144,965
	or (loss) from special events					
	or (loss) from sales of inventory					
11 Other reven	ue a	-				_
d		-		-		
e					045 055	145 055
	dd columns (b), (d), and (e)	<u> </u>		0	215,077	
	line 12, columns (b), (d), and (e)				13	360,934
Part XVI-B	In line 13 instructions to verify calculations)	\ aaamaliahm	ont of Evennt I			
Line No.	<u> </u>					
Line No.	Explain below how each activity for which incom accomplishment of the foundation's exempt pur					ine)
N/A	accomplianment of the realisation oxempt pur	poses (outer utal)	by providing rands i	or Such purp	pooco) (occ manuon	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		-				
						
			·			
						
						
						-
						
· · · · · · · · · · · · · · · · · · ·					<u> </u>	
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						000 DE

Par	, IIVX T	Information Reg Exempt Organize	_	ransters To an	d Transactio	ons and Relations	nips wit	in Nonchai	ritable		
1	Did the ora			ge in any of the fol	llowing with any	other organization desc	ribed			Yes	No
	_			•	=	ection 527, relating to pe					
	organizatioi		.,	(-)(-)ga	,	,					
		om the reporting found	lation to a n	oncharitable exemi	ot organization o	f					É
	(1) Cash				pg				1a(1)		X
	(2) Other a	ssets							1a(2)		X
	Other trans										
		f assets to a noncharit	able exemp	t organization					1b(1)	[[x
		ses of assets from a no		•	on				1b(2)		X
		of facilities, equipment		, ,	•				1b(3)		X
_		rsement arrangements							1b(4)		X
	•	or loan guarantees	•						1b(5)		X
	-	nance of services or me	embership c	or fundraising solici	tations				1b(6)		X
	•	acilities, equipment, m	•	-					1c		Х
	•					mn (b) should always s	how the fa	ur market	ــــــــا	L	
		•			•	the foundation received					
						the goods, other asset					
	Line no	(b) Amount involved		ne of noncharitable exem				insactions and sh	aring arrangeme	ents	
N/A		(,	(17,11			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
		 									
											
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	_										
											
	-										
2a is	s the found	ation directly or indirec	tly affiliated	with or related to	one or more tay	-exempt organizations					
		section 501(c) of the	-						Y	es X	No
		nplete the following sci		111211 30001011 301(0	c)(c)) or in scotte	11 027					,
		Name of organization	ledule	(b) Type of o	rganization		(c) Descript	tion of relationship			
N	/A	<u>, , , , , , , , , , , , , , , , , , , </u>		(1),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1-7				
											
											
											
	· · · · · · · · · · · · · · · · · · ·										
	Under per	natties of periury. I declare th	at I have exam	Ined this return, including	g accompanying sch	ledules and statements, and to	the best of r	ny knowledge an	d belief, it is true		
						which preparer has any know		·	RS discuss this re		\neg
ign	ľ								oreparer shown b		_
lere		1 .	J 0			, 1 .		(see instr	ructions)?	Yes	No
1010	\ /	LAAN	5 Ko	OAA PD	£3, 1/2	14/2816	CHAI	DMAN		-	
	\$ \frac{1}{2} \tag{2}	ature of officer or trustee	<u> </u>	112	Date	/ 3/ 1	Title	RUM			
	' ¬				Date		1106				
	Print/Ty	pe preparer's name			Preparer's signatur	·e			Date	Check	n
aid	D 3		•			<i>-</i>	Z .	_	1/11/1	self-em	ployed
repare	er	CK C. BALLARI		COMPANY	L MD CD3				DOOF	2 E A	<u> </u>
se On		010 5			LTD. CPA	<u> </u>		PTIN	P00546		
	Firm's a	ddress ► 210 E		ST STE 2	72652		-		<u>71-063</u> 870-42		
		MOOMI	AIN HO	OME, AR	72653			Phone no	8 / U - 4 Z Form 99		
									ronn ara	, u - i i	(2014)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

2014

ARKANSAS AN	IMAL RESCUE FOUNDATION	20-5795124
Organization type (check	cone)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private fou	indation
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule	e and a Special Rule See
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, con y or property) from any one contributor. Complete Parts I and II. See inst contributions	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form and that received from any one contributor, during the year, total contributor of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	n 990 or 990-EZ), Part II, line itions of the greater of (1)
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ to g the year, total contributions of more than \$1,000 exclusively for religiou ional purposes, or for the prevention of cruelty to children or animals. Co	is, charitable, scientific,
contributor, during contributions tota during the year fo	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ to gethe year, contributions exclusively for religious, charitable, etc., purpose led more than \$1,000. If this box is checked, enter here the total contributor an exclusively religious, charitable, etc., purpose. Do not complete any plies to this organization because it received nonexclusively religious, charitable, etc., purpose.	es, but no such utions that were received v of the parts unless the
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does not must answer "No" on Part IV, line 2, of its Form 990, or check the box of the certify that it does not meet the filing requirements of Schedule B (F	on line H of its Form 990-EZ or on its

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

ARKANSAS ANIMAL RESCUE FOUNDATION

Employer identification number 20-5795124

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KATHERINE REESE ESTATE KATHERINE REESE ESTATE 907 SMOKE TREE ROAD 907 SMOKE TREE ROAD DOVER AR 72837	s 10,797,680	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.	raine, address, and Em - 1	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Tallity, Marieson, Mile Bit . T	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	radiloj davirosoj dilo Eli - 7	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

ARKANSAS ANIMAL RESCUE FOUNDATION

Employer identification number 20-5795124

Part II	Noncash Property (see instructions) Use duplicate	e copies of Part II if additional	I space is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	REAL ESTATE		
		\$ 3,253,699	03/15/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Federal Statements	Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets	Description Received Received Sale	- A	\$ 144,965 \$ 0 \$ 0 \$ 0 \$ 144,	Statement 2 - Form 990-PF, Part I, Line 11 - Other Income	Revenue per Net Investment Adjusted Net Description Books Income Income		Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees	Net Adjusted Charitable Description Total Investment Net Purpose	ACCOUNTING FEES \$ 14,731 \$ \$ 14,731 \$ 14,731	Statement 4 - Form 990-PF, Part I, Line 18 - Taxes	Net Adjusted Charitable Description Total Investment Net Purpose	\$ 48 \$ \$ 5 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4.1
20-5795124		Whom	STMENT	TOTAL			DONATIONS		Description	INDIRECT ACCOUNTING TOTAL		Description	LICENSES AND PERMITS TAXON INVESTMENT INCOME TOTAL	NDEI

		nent Ad	Income	v.																							Ŋ
	Line 19 - Depreciation	Current Year	Depreciation	\$ 301				1,231	1,159		881	•	820				2,772	243	124	810	316		2,021	2,608	264	974	
Statements	Part I, Line 19 - I			D.			0	39	39	0	39		20	0			39	20	20	20	20	C	70	39	20	39	
Federal S	- Form 990-PF,		Method	$\mathrm{S/L}$				S/L	S/L		S/L	1	ISODB				$\mathrm{S/\Gamma}$	150DB	150DB	150DB	150DB	, (ISODB	S/L	150DB	S/L	
	Statement 5	on Prior Year	Depreciation	\$ 150			~				0			,	Ħ.												
		Description	Basis	1,504	HOLLOW ROAD	ROAI	18,000 PINE HILL ROAD	60, 09		итьь в 16,	PINE HILL ROAD 43,408	PINE HILL ROAD	L4 Z1,8/U RANCH TIMBER	υ,	SMOKE TREE RANCH	MAIN HOUSE	136,533	210	KENTUCKY BAKN 14 3,300	CAT HOUSE 21,600	BARN	L	53,900	128,462	7,031	47,970	
20-5795124		Date	Acquired	Ulemen' 7/23/13 s	64 ACRES ROCK F 3/06/14	1653 PINE HILL	3/06/14 HOUSE AT 1653 P	3/06/14 PINE HILL	3/06/14	41 2455 F 3/06/14		SHOP AT 2455 PI	3/U6/14 SMOKE TREE RANC	3/06/1	101/.4 ACRES SN 3/06/14	SMOKE TREE MAIN	3/06/1	1REE 3/06/2	SMOKE TREE KENT 3/06/14	SMOKE TREE DOG 3/06/14	SMOKE TREE HAY 3/06/14	SMOKE TREE SHOP	3/06/14 HOTEL-HOUSE	3/06/14	3/06/ 3/06/	3/06/14	Œ

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20-5795124

Federal Statements

Statement 5 - Form 990-PF, Part I, Line 19 - Depreciation (continued)

Description

Date Acquired	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income
GOLD BARN HAY BARN	ARN						
3/06/14 \$ TINSLEY	5,280	₩.	150DB	20 \$	198	<i>«</i>	⟨S-
3/06/14	14,560		150DB	20	546		
WILLIES PLACE JAMIES HOUSE 3/06/14 213,735 WILLIES DIACE RARN	JAMIES HOUSE 213,735 RARN		S/L	39	4,339		
3/06/14	3,712	!	150DB	20	139		
W1LL1ES PLACE A 3/06/14	A FRAME CAT HOUSE 11,466	JOSE	150DB	20	430		
BARONESS HOUSE 3/06/14	137,000		$\mathrm{S/L}$	39	2,781		
DRIER 1/28/14	444		200DB	S	68		
5/28/14 5/28/14	4,750		200DB	S	950		
FRESSORE WASHER 6/03/14	489		200DB	5	86		
2 WEEUEA1EKS 6/03/14 pdfssiidf mank	743		200DB	5	149		
7/08/14	2,503		200DB	5	501		
TOTAL \$	3,264,132	\$ 150		.	24,744	\$	O S

3 - Other Expenses	
•	١
990-PF, Part I, Line 23	
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Description	Total	Net Investment	Adjusted Net	Charitable Purpose
A	%	\$	\$	‹ኍ
L EXPENSES				
ADVERTISING	7,482			7,482
ANIMAL SUPPLIES	2,691			2,691
AUTO EXPENSE	858			828
BANK CHARGES	549			549
COMMISSIONS	1,010			1,010

(continued)
penses
Other Ex
•
le 23
Line 23 -
Part
990-PF,
- Form
9
Statement

Charitable Purpose	\$ 9,149 491 130	38,82 20,40 20,72 20,72 11,95 11,23 20,70 20,70 20,70 20,70 20,70 20,70	\$ 268,904
Adjusted Net	vs-		w
Net Investment	ᡐ		o
Total	\$ 9,149 491 130	38, 82 9,022 20,720 22,28 11,03 11,233 11,225 90,70 90,70 90,70	\$ 268,904
Description	CONTRACT SERVICES DUES AND SUBSCRIPTIONS EQUPMENT RENT		TOTAL

Grants
Gifts,
Contributions
5 - Noncash (
Line 2
Part I, L
- Form 990-PF, P
Statement 7

Book Value Explanation	
Book Value Amount	
FMV Explanation	
Noncash Description	

Date 12/17/14

Amount 200, 000

20-5795124	Federal Statements	tements		
Statement 8 - Form 990-PF,		Part II, Line 10b - Corporate Stock Investments	(Investments	
Description	Beginning of Year \$ 1,332,318 \$ 1,332,318	End of Year \$ 9,659,113	Basis of Valuation COST	Fair Market Value \$ 12,102,179 \$ 12,102,179
Statement 9 - Form 990-PF	n 990-PF, Part II, Line 14	14 - Land, Building, and Equipment	nd Equipment	
Description	Begini Net B	Ö	nd Accu Deprec	FMV
TOTAL	\$ 1,354	\$ 2,271,257 \$ 3,264,132	\$ 24,891	\$ 2,271,257 \$ 3,264,132
Statement 10 - Form 990-PF,	90-PF, Part VIII, Line 1	1 - List of Officers, Directors, Trustees,	ectors, Trustees,	
Name and Address	A	Average Hours Compensation	ion Benefits	Expenses
LISA LANDIS 101 SLIPPERY ELM DR STEPHENS CITY VA 22655	BOARDMEMBER		0	0
WILLIAM REESE 409 TEMPLE STREET NEW HAVEN CT 06511	PRESIDENT	1.00	0	0
RUFUS WOLFF 900 S SHACKLEFORD STE 401 LITTLE ROCK AR 72211	DIRECTOR	1.00	0	0 0
GAIL ARNOLD 4917 E. CRESTWOOD RD LITTLE ROCK AR 72207	BOARDMEMBER	1.00	0	0 0
GAIL THOMSON 18129 HWY 50 EAST	BOARDMEMBER	1.00	0	0 0
DE				. 8-10
D				

20-5795124	Federal Statements	tatement	S		
Statement 10 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, <u>Etc. (continued)</u>	90-PF, Part VIII, Lir <u>Etc. (co</u>	t VIII, Line 1 - List of Etc. (continued)	Officers, Directors	s, Trustees,	
Name and Address HETH AR 72346	Title	Average Hours	Compensation	Benefits	Expenses
DR. RUTH WILBURN 10368 GOODMAN RD OLIVE BRANCH MS 38654	BOARDMEMBER	1.00	0	0	0
CARRIE WILEY 352 OLD WIRE ROAD WEST LONDON AR 72847	BOARDMEMBER	1.00	0	0	0