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For calendar year 2014, or tax year beginning 04-01-2014

Department of the Treasury

Internal Revenue Service

#### DLN: 93491224002065

, and ending 03-31-2015

OMB No 1545-0052

Open to Public Inspection

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

▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

		undation	DATTON		A Employer id	A Employer identification number						
NA	BHOLZ	CHARITABLE FOUN	DATION			58-1748037						
Num	her and	Istreet (or P.O. ho	y number if mail is	not delivered to street address	S) Room/suite	<b>B</b> Telephone n	umber (see instructio	ns)				
	BOX 20		x Humber II mair is	not delivered to street address	Nooni, suite	(501) 327-778	1					
		n, state or province, R 72033	, country, and ZIP o	or foreign postal code		<b>C</b> If exemption	C If exemption application is pending, check here					
<b>G</b> Ch	neck a	II that apply	Initial return	Initial return of a	former public charit	y <b>D 1.</b> Foreign o	organizations, check h	ere 🕨 🗀				
		[	Fınal return	A mended return		<b>2.</b> Foreign o	organizations meeting	the 85%				
				nge Name change			ck here and attach co	•				
	-	-		n 501(c)(3) exempt priva		under section	oundation status was i on 507(b)(1)(A), chec					
				ble trust Other taxa								
	Fair market value of all assets at end of year (from Part II, col. (c),				▼ Cash		lation is in a 60-mont on 507(b)(1)(B), chec					
	of year (from Part II, col. (c), line 16)►\$ 1,008,413				be on cash basis.)		( )( )( )					
Pai	rt I	Analysis	of Revenue a	and Expenses (The		l		(d) Disbursements				
		total of amoun		c), and (d) may not	(a) Revenue and expenses per books	( <b>b</b> ) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)				
	1	,,	gıfts, grants, et	c , received (attach								
		schedule)			53,955							
	2	Check 🟲 🦵 if	the foundation is	s <b>not</b> required to attach								
		Sch B .										
Reveilue	3	Interest on sa	vings and tempo	orary cash investments	2,729	2,729						
	4	Dividends and	ınterest from se	ecurities	3,501	3,501						
	5a	Gross rents										
	ь	Net rental inco	ome or (loss)									
	6a	Net gain or (lo	ss) from sale of	assets not on line 10								
	b	Gross sales pr	nce for all asset	s on line 6a								
ž	7	Capital gain ne	et income (from	Part IV, line 2)								
	8	Net short-term	n capital gain .									
	9	Income modifi	cations									
	10a	Gross sales le	ss returns and									
		allowances										
	b	Less Cost of	goods sold									
	С	•	` , `	chedule)								
	11			e)								
	12				60,185	6,230						
	13			ctors, trustees, etc								
. 6.	14	O ther employe	ee salaries and v	wages								
Š	15	Pension plans,	, employee bene	fits								
Φ	16a	•	•									
Expenses	l			dule)	_							
		-	-	h schedule)	2,100	2,100						
Administrative	17	Interest			.es							
¥	18	•	schedule) (see	•	78							
	19			and depletion								
늘	20											
	21			ings								
e e	22				<b>∞</b> 5□							
	23			lule)	68							
Operating and	24	_	g and administra	_	F 73.6	2 400						
<u>\$</u>					5,726	2,100		453 950				
0	25			ıd	453,950			453,950				
	26	Total expenses	s and disbursem	ents. Add lines 24 and	459,676	2,100		453,950				
	27	Subtract line 2	6 from line 12		.52,570	2,200						
	a			ses and disbursements	-399,491							
	ь			atıve, enter -0-)		4,130						
	С	Adjusted net i	i <b>ncome</b> (ıf negatı	ve, enter -0-)								
							· ·					

Da	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	f year
-		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 Value
	1	Cash—non-interest-bearing		38,742	38,742
	2	Savings and temporary cash investments	1,224,064	785,831	785,831
	3	Accounts receivable			
		Less allowance for doubtful accounts 🟲			
	4	Pledges receivable 🟲			
		Less allowance for doubtful accounts 🟲			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) 🟲			
		Less allowance for doubtful accounts 🟲			
2	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
Æ	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	331,497	183,840	183,840
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe 🕨)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	1,555,561	1,008,413	1,008,413
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
┙╽	22	Other liabilities (describe 🗠)			
	23	Total liabilities (add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here			
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.			
ŭ	24	Unrestricted			
<u> </u>	25	Temporarily restricted			
핕	26	Permanently restricted			
딆		Foundations that do not follow SFAS 117, check here ▶ ▽			
<u>.</u>		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	1,555,561	1,008,413	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Ą	29	Retained earnings, accumulated income, endowment, or other funds			
Net	30	Total net assets or fund balances (see instructions)	1,555,561	1,008,413	
_	31	Total liabilities and net assets/fund balances (see instructions)	1,555,561	1,008,413	
Pa	rt II				
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	ree	
_			(a), me so (mase a		1,555,561
2		Enter amount from Part I, line 27a			-399,491
3		Other increases not included in line 2 (itemize)			
4		Add lines 1, 2, and 3			1,156,070
5		Decreases not included in line 2 (itemize)	·	· · · · · · · · · · · · · · · · · · ·	147,657
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), l		1,008,413

art IV Capital Gains	and Losses for Tax on Inve	stment Income			Page	
(a) List and describe	the kind(s) of property sold (e g , renouse, or common stock, 200 shs M	al estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a						
(e) Gross sales price	(f) Depreciation allowed	1 12	or other basis	(h) Gain or (loss)		
	(or allowable)	pius exp	ense of sale	(e) plus (f)	minus (g)	
b						
C	<del></del>					
d	<del></del>					
e						
	showing gain in column (h) and owne	od by the foundation o	on 12/31/69	(I) Gains (Col	(h) gain minus	
	(i) Adjusted basis		ss of col (i)	col (k), but not l	ess than -0-) c	
(i) F M V as of 12/31/69	as of 12/31/69		l (j), ıf any	Losses (fro	om col (h))	
a						
b						
С						
d						
е						
	Part I, line 8, column (c) (see instru		er -0-	3		
art V Qualification	Under Section 4940(e) for R	educed Tax on I	Net Investme	nt Income		
r optional use by domestic	private foundations subject to the se	ection 4940(a) tax o	n net investment	income )		
section 4940(d)(2) applies,	leave this part blank					
s the foundation liable for th	ne section 4942 tax on the distributa not qualify under section 4940(e) Do			rıod?	┌ Yes ┌ N	
•	ount in each column for each year, se			ies		
(a)	· · ·			(d)		
(a) Base period years Calendar	(b)	(c) Net value of noncharita		(d) Distribution		
Base period years Calendar ear (or tax year beginning in)	(b) Adjusted qualifying distributions		able-use assets		by col (c))	
Base period years Calendar ear (or tax year beginning in) 2013	(b) Adjusted qualifying distributions 418,700		able-use assets	Distribution	by col (c)) 0 32410	
Base period years Calendar ear (or tax year beginning in)	(b) Adjusted qualifying distributions		able-use assets	Distribution	by col (c)) 0 32410 0 44220	
Base period years Calendar ear (or tax year beginning in) 2013 2012	(b) Adjusted qualifying distributions 418,700 472,528		1,291,864 1,068,576	Distribution	by col (c)) 0 32410 0 44220 0 50068	
Base period years Calendar ear (or tax year beginning in)  2013  2012  2011	(b) Adjusted qualifying distributions  418,700  472,528  429,212		1,291,864 1,068,576 857,257	Distribution	by col (c))  0 32410 0 44220 0 50068 0 30321	
Base period years Calendar ear (or tax year beginning in)  2013  2012  2011  2010  2009  2 Total of line 1, column	(b) Adjusted qualifying distributions  418,700 472,528 429,212 266,552 278,679 an (d)	Net value of noncharita	able-use assets  1,291,864  1,068,576  857,257  879,087  884,139	Distribution	by col (c))  0 32410 0 44220 0 50068 0 30321 0 31519	
Base period years Calendar rear (or tax year beginning in)  2013  2012  2011  2010  2009  2 Total of line 1, colum  3 Average distribution	(b) Adjusted qualifying distributions  418,700 472,528 429,212 266,552 278,679 an (d)	Net value of noncharita	able-use assets  1,291,864  1,068,576  857,257  879,087  884,139  2 by 5, or by	Distribution (col (b) divided	by col (c))  0 32410 0 44220 0 50068 0 30321 0 31519 1 8854	
Base period years Calendar ear (or tax year beginning in)  2013  2012  2011  2010  2009  2 Total of line 1, colum A verage distribution the number of years	(b) Adjusted qualifying distributions  418,700 472,528 429,212 266,552 278,679 an (d)	Net value of noncharita	able-use assets  1,291,864  1,068,576  857,257  879,087  884,139  2 by 5, or by	Distribution (col (b) divided	by col (c))  0 32410  0 44220  0 50068  0 30321  0 31519  1 8854	
Base period years Calendar ear (or tax year beginning in)  2013  2012  2011  2010  2009  2 Total of line 1, colum the number of years 4 Enter the net value of	(b) Adjusted qualifying distributions  418,700  472,528  429,212  266,552  278,679  In (d)	Net value of noncharita	able-use assets  1,291,864  1,068,576  857,257  879,087  884,139   2 by 5, or by	Distribution (col (b) divided	by col (c))  0 32410 0 44220 0 50068 0 30321 0 31519 1 8854 0 3770 1,157,6	
Base period years Calendar rear (or tax year beginning in)  2013  2012  2011  2010  2009  2 Total of line 1, colum the number of years 4 Enter the net value of Multiply line 4 by line	(b) Adjusted qualifying distributions  418,700 472,528 429,212 266,552 278,679 an (d)	Net value of noncharita	able-use assets  1,291,864  1,068,576  857,257  879,087  884,139  2 by 5, or by	Distribution (col (b) divided	by col (c)) 0 32410 0 44220 0 50068 0 30321 0 31519 1 8854 0 3770 1,157,6 436,5	
Base period years Calendar year (or tax year beginning in)  2013  2012  2011  2010  2009  2 Total of line 1, colum  3 Average distribution the number of years  4 Enter the net value of Multiply line 4 by line  6 Enter 1% of net investigation of the second of the secon	(b) Adjusted qualifying distributions  418,700 472,528 429,212 266,552 278,679  In (d)	Net value of noncharitation of the control of the total on line at the stand of the control of t	able-use assets  1,291,864  1,068,576  857,257  879,087  884,139  2 by 5, or by	Distribution (col (b) divided		
Base period years Calendar year (or tax year beginning in)  2013  2012  2011  2010  2009  2 Total of line 1, colum the number of years  4 Enter the net value of Multiply line 4 by line  6 Enter 1% of net inverse Add lines 5 and 6.	(b) Adjusted qualifying distributions  418,700 472,528 429,212 266,552 278,679  In (d)	Net value of noncharita  Vide the total on line e if less than 5 years from Part X, line 5.	able-use assets  1,291,864  1,068,576  857,257  879,087  884,139  2 by 5, or by	Distribution (col (b) divided  2  3  4  5  6	by col (c)) 0 32410 0 44220 0 50068 0 30321 0 31519 1 8854 0 3770 1,157,6 436,5	

Form	990-PF (2014)		Р	age <b>4</b>
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructio	ns)	
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)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			41
	here Fand enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2			41
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others			<u>_</u>
-	enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			41
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 <b>6a</b>			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any <b>penalty</b> 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 9			41
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			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	It participate or intervene in any political campaign?	. <u>1a</u>		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	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.			
С.	Did the foundation file Form 1120-POL for this year?	1c		No
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			
_	on foundation managers 🕨 \$	_		<b>N</b> 1-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. <u> </u>		No
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	_		NI-
4-		. 3		No
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	If "Yes," attach the statement required by General Instruction T.	<del></del>		140
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
0	By language in the governing instrument, or	\		
	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	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
-	and Part XV.	. 7	Yes	
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 (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
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," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	. 10		No

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	$\vdash$	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ▶GREG WILLIAMS Telephone no ▶(501)	327-	7781	
	Located at ►612 GARLAND ST 612 GARLAND ST CONWAY AR ZIP+4 ►72032			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		!	► □
	and enter the amount of tax-exempt interest received or accrued during the year			- ,
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	rt 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.	<u> </u>	Yes	No
<b>1</b> 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes V No			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
_	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2014?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
•	operating foundation defined in section 4942(j)(3) or 4942(j)(5))  At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	► 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation	1		
	or disqualified persons after May 26, 1969, <b>(2)</b> 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 <b>(3)</b>			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	1		
	ıf the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	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 2014?	4b		No

Pa	rt VII-B	Statements Reg	ardii	ng Activities for	W	nich Form 4720	May	Be Required (cont	inue	d)		<u> </u>	
5a	During th	e year dıd the foundatı	on pay	or incurany amoun	t to								
	(1) Carry	on propaganda, or oth	erwise	attempt to influence	e leg	ıslatıon (section 49	45(e	:)) <sup>?</sup>	No				
	<b>(2)</b> Influe	nce the outcome of an	y spec	:ific public election (	see	section 4955), or to	car	ry					
	on, dı	rectly or indirectly, an	/ vote	r registration drive?.				<b>┌</b> Yes <b>┌</b>	No No				
	(3) Provid	de a grant to an individ	ual foi	travel, study, or oth	ners	ımılar purposes?		☐ Yes ☑	No				
	(4) Provid	de a grant to an organı	zatıon	other than a charita	ble,	etc , organization de	scrit	ped					
	ın sec	ction 4945(d)(4)(A)? (	see in	structions)				<b>┌</b> Yes <b>┌</b>	No				
		de for any purpose oth											
educational purposes, or for the pr			evention of cruelty t	to ch	ıldren or anımals?.			, No					
<b>b</b> If any answer is "Yes" to 5a(1)-(5), d		id <b>any</b> of the transac	tion	s fail to qualify unde	r the	exceptions described in							
								instructions)?		. 5b			
					e regarding disaster assistance check here								
С		wer is "Yes" to questi											
								T Yes 「	- No				
		attach the statement req						,					
6a		undation, during the ye					prer	miums on					
		al benefit contract?	•	•					, No				
ь	•							benefit contract?		6b		No	
		o 6b, file Form 8870.	, .	, , ,									
7a		ne during the tax year,	wast	he foundation a party	v to a	a prohibited tax shel	ter t	ransaction?   Yes	- No				
								the transaction?		7b			
								n Managers, Highly			lovee	S.	
Pa	rt VIII	and Contractors			-, .	astees, i saiia				р	.0,00	٠,	
1	List all off	icers, directors, truste	es, fo	undation managers a	nd t	heir compensation (	see i	instructions).					
			(b)	Title, and average		<b>c)</b> Compensation		(d) Contributions to	(e)	Expens	e accou	ınt.	
	( <b>a)</b> Na	me and address	d	hours per week evoted to position	(	If not paid, enter -0-)		mployee benefit plans d deferred compensation	other allowances				
BILL I	HANNAH		_	ECTOR		0	unc	0				0	
	GARLAND	ST	2 00			0		Ŭ				Ū	
	IWAY, AR												
CHAR	RLES NABHOLZ	2	DIR	ECTOR		0		0	)			0	
612	GARLAND	ST	2 0	)									
	IWAY,AR	72032											
GREG	WILLIAMS			ECTOR		0		0				0	
	GARLAND		2 00	)									
	IWAY, AR				<u>.                                    </u>				. "	NONE "			
	Compensa	tion of five nignest-pa	ıa em	loyees (other than )	tnos	e inciuaea on line 1-	-see	instructions). If none, end (d) Contributions to	iter	NONE.			
(a)	) Name and	l address of each empl	oyee	(b) Title, and aver		(-) (		employee benefit	(e)	Expens	e accou	unt,	
		nore than \$50,000	•	hours per week devoted to positi		(c) Compensation	n	plans and deferred			owance		
				devoced to positi				compensation					
NON	1E												
				1									
	Inumbara	father ampleyees nad	over	<u>.</u> + F O OOO									

Form 990-PF (2014)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, H	ighly Paid Employees,
3 Five highest-paid independent contractors for professional services	s (see instructions). If none, enter "NO	NE".
(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	S	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include it		er of Expenses
organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc	<del></del>
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation durin	g the tax year on lines 1 and 2	A mount
<b>1</b> N/A		
2		
All other program-related investments See instructions		
3		
<b>Total.</b> Add lines 1 through 3		▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 193.892 1h 981.430 1c 1d 1.175.322 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 1.175.322 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 17.630 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 1.157.692 5 57,885 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 57.885 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 41 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 2c 41 3 57.844 3 4 4 5 5 57.844 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 57.844 7 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 453.950 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the 3a 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 453,950 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 41 453,909 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

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

	olidistributed fricollie (see liistri	actions)			
		<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2013	<b>(c)</b> 2013	( <b>d)</b> 2014
4	Distributable amount for 2014 from Bart VI June 7	Corpus	rears prior to 2013	2013	57,844
	Distributable amount for 2014 from Part XI, line 7				37,011
	Undistributed income, if any, as of the end of 2014  Enter amount for 2013 only				
	•				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2014 From 2009 234,554				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	Total of lines 3a through e	1,616,869			
	Qualifying distributions for 2014 from Part	· · ·			
	XII, line 4 🕨 \$ 453,950				
а	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions).				
c	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2014 distributable amount				57,844
е	Remaining amount distributed out of corpus	396,106			
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
2	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,012,975			
	Prior years' undistributed income Subtract	2,012,313			
U	line 4b from line 2b				
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
a	Subtract line 6c from line 6b Taxable amount —see instructions				
_	Undistributed income for 2013 Subtract line				
Ī	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1. This amount must				0
_	be distributed in 2015				
,	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2009 not	234,554			
_	applied on line 5 or line 7 (see instructions)	231,331			
9	Excess distributions carryover to 2015.	1,778,421			
10	Subtract lines 7 and 8 from line 6a	_,,.==			
	Excess from 2010 222,640				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014 396,106				

P	art XIV Private Operating Four	idations (see ir	nstructions and Pa	art VII-A, questic	on 9)	
la	If the foundation has received a ruling or d foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organiza	ition is a private o	perating foundation	described in sectio	n <b>「</b> 4942(j)(3) o	r <b>「</b> 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(c) local
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
d	line 4 for each year listed					
_	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					
а	"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					
	<pre>investment income (interest, dividends, rents, payments</pre>					
	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					
Pa	rt XV Supplementary Information			the organization	on had \$5,000 d	or more in
	assets at any time during  Information Regarding Foundation Manage		instructions.)			
a	List any managers of the foundation who habefore the close of any tax year (but only if	ve contributed mo	ore than 2% of the to outed more than \$5,0	otal contributions ro 000) (See section	eceived by the found 507(d)(2))	dation
h	List any managers of the foundation who ov	n 10% or more of	the stock of a corn	oration (or an equal	ly large portion of th	
	ownership of a partnership or other entity)				ry range portion or th	
	Information Regarding Contribution, Grant	Gift Loan Schol	arshin etc Program	ns:		
-	Check here I if the foundation only make				and does not asser	
	unsolicited requests for funds If the found other conditions, complete items 2a, b, c, a	atıon makes gıfts,	grants, etc (see ins	structions) to indivi	duals or organizatio	ns under
	The name address and to the				d la	
а	The name, address, and telephone number	or e-man address	s of the person to wil	ют аррисацопь ѕп	ould be addressed	
	CHARLES NABHOLZ PO BOX 2090					
	CONWAY,AR 72033					
	(501) 327-7781					_
b	The form in which applications should be s N/A	ubmitted and infor	mation and materia	Is they should inclu	de 	
С	Any submission deadlines					
	N/A					
d	Any restrictions or limitations on awards, factors	such as by geogra	phical areas, charita	able fields, kinds of	institutions, or othe	er
	N/A					

Part XV Supplementary Inform	nation (continued)			Page <b>1</b>
3 Grants and Contributions Paid		proved for F	uture Payment	1
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Additional Data Table				
Total		<u> </u>		453,95
			line ou	

Form 990-P	F (2014)  A Analysis of Income-Produci	na Activitio				Page <b>12</b>
	amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
_	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
						,
с						
e						
g Fees a 2 Members	nd contracts from government agencies ship dues and assessments					
ınvestm	investments			14	2,729	
	ds and interest from securities al income or (loss) from real estate			14	3,501	
	nanced property bt-financed property					
	al income or (loss) from personal					
	vestment income (loss) from sales of assets other than					
inventoi	ry . ´					
10 Gross pr	me or (loss) from special events rofit or (loss) from sales of inventory					
	venue <b>a</b>					
с						
е						
<b>13</b> Total. A	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				6,230 L <b>3</b>	6,230
	rksheet in line 13 instructions to verify ca  B Relationship of Activities to		plishment of E			
Line No.	Explain below how each activity for whic the accomplishment of the foundation's instructions )					
-						

Form 99												Pa	ge <b>1</b> 3
Part	XVII	Information Re Noncharitable					sactio	ns and I	Relationships	With			
		ganization directly or i 01(c) of the Code (othe	ndırectly e	engage	ın any of	the following w						Yes	No
orga	nızatı	ons?											
		from the reporting four											
											1a(1)		No
(2)	Othe	rassets									1a(2)		No
		nsactions											
		of assets to a noncha									_		No
		nases of assets from a											No
		al of facilities, equipme											No
		bursement arrangemer									1b(4)		No
		s or loan guarantees.									1b(5)		No
` ,		mance of services or n		•	_						1b(6)		No
		f facilities, equipment,									1c		No
of th ın an	e goo ıy tra	wer to any of the above ds, other assets, or se nsaction or sharing arr	rvices giv angement	en by t , show	he report ın columr	ing foundation ( <b>d)</b> the value	If the fo of the go	undation r ods, other	eceived less tha assets, or servi	n fair marke ces receive	et value ed	<b>:</b>	
(a) Line I	Vo	(b) Amount involved	(c) Name	ne of noncharitable exempt organization (d) Description of transfers, transact					tions, and sha	ring arra	ngemer	ıts	
	_												
	_												
<b>2a</b> Is th	e fou	ndation directly or indi	rectly affil	liated w	/ıth, or rel	ated to, one or	more ta	x-exempt	organizations				
		in section 501(c) of the		other th	ian sectio	on 501(c)(3)) o	rın sect	ion 527?.			.F <sub>Y</sub> e	es F	No
		(a) Name of organization	1		(	<b>b)</b> Type of organi	ation	-	(c) Descri	ption of relati	onship		
Sign	the	er penalties of perjury, best of my knowledge a mation of which prepar	ınd belief,	ıt ıs tru	ue, correc								
Here	\ .	****				2015-07-0	3 <b>b</b>	*****		return	IRS disci		
	<b>y</b> ,	Signature of officer or t	rustee			Date		Title	_	below	tr )? 🔽 1		
		Print/Type preparer's name MATTHEWT BARNHARDT CPA			Preparer's Signature		Date 2015-07-08		Check if self- employed ▶		008185	583	
Paid Prepa Use	rer	Firm's name ► ENGELKES & FELTS L	.TD	1			ı		Firm's EIN ► 7	1-045778	3		
Only		Fırm's address ▶											
		PO BOX 1167 CONV	WAY, AR	72033	1				Phone no (50)	1)329-561	L 3		
									ı				

Form 990PF Part XV Line 3 - Gra	nts and Contributions I	Paid During t	the Year or Approved for Fu	iture Payment
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year	None	D.C.	GUADITA 5.5	
ALZHEIMERS ARKANSAS PROGRAMS & SERV ALZHEIMERS ARKANSAS PROGRAMS & SERVICES 201 MARKHAM CENTER 201 MARKHAM CENTER LITTLE ROCK, AR 72205	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	1,000
AMERICAN HEART ASSOCIATION AMERICAN HEART ASSOCIATION 909 W 2ND ST 909 W 2ND ST LITTLE ROCK, AR 72201	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	5,000
ARKANSAS CHILDRENS HOSPITAL FOUNDAT AR CHILDRENS HOSPITAL FOUNDATION 800 MARSHALL ST 800 MARSHALL ST LITTLE ROCK, AR 72202	NONE	PC	CHARITABLE-FOR PEDIATRIC CARE	97,900
ARKANSAS COMMUNITY FOUNDATION INC ARKANSAS COMMUNITY FOUNDATION INC 1400 W MARKHAM 1400 W MARKHAM LITTLE ROCK, AR 72201	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	1,700
AR COMMUNITY FDNFAULKNER CTY AR COMMUNITY FDN/FAULKNER CTY 1301 N MUSEUM RD 1301 N MUSEUM RD CONWAY,AR 72032	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	1,500
AR EDUCATIONAL TELECOMMUNICATIONS AR EDUCATIONAL TELECOMMUNICATIONS 350 S DONAGHEY 350 S DONAGHEY CONWAY, AR 72034	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	250
ARKANSAS FOODBANK ARKANSAS FOODBANK 4301 W 65TH ST 4301 W 65TH ST LITTLE ROCK,AR 72209	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	200
ARKANSAS FREEDOM FUND ARKANSAS FREEDOM FUND PO BOX 697 PO BOX 697 BRYANT,AR 72022	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	100
ARKANSAS INLAND MARITIME MUSEUM ARKANSAS INLAND MARITIME MUSEUM ASSOCIATION 120 RIVERFRONT PARK 120 RIVERFRONT PARK N LITTLE ROCK, AR 72114	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	10,000
ARKANSAS SHERIFFS YOUTH RANCHES INC ARKANSAS SHERIFFS YOUTH RANCHES INC PO BOX 3964 PO BOX 3964 BATESVILLE, AR 72503	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	3,600
ARKANSAS SPORTS HALL OF FAME INC ARKANSAS SPORTS HALL OF FAME INC 3 VERIZON ARENA WAY 3 VERIZON ARENA WAY N LITTLE ROCK, AR 72114	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	500
BIBLE BAPTIST CHURCH BIBLE BAPTIST CHURCH 3130 DAVE WARD DR 3130 DAVE WARD DR CONWAY,AR 72034	NONE	PC	RELIGIOUS-FOR MINISTRIES	100
BLACKBIRD ACADEMY OF ARTS INC BLACKBIRD ACADEMY OF ARTS INC 1058 FRONT ST STE 102 1058 FRONT ST STE 102 CONWAY,AR 72032	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	200
CARTI FOUNDATION INC CARTI FOUNDATION INC PO BOX 5210 PO BOX 5210 LITTLE ROCK, AR 72215	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	25,000
CATHOLIC ARKANSAS SHARING APPEAL CATHOLIC ARKANSAS SHARING APPEAL (CASA) 2500 N TYLER ST 2500 N TYLER ST LITTLE ROCK, AR 72207	NONE	PC	CHARITABLE-FOR PROGRAM EXPENSES	500
Total				453,950

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CATHOLIC CAMPUS MINISTRY NONE PС RELIGIOUS-FOR MINISTRY 200 CATHOLIC CAMPUS MINISTRY 2204 BRUCE ST 2204 BRUCE ST CONWAY, AR 72034 NONE PС CATHOLIC CHARITIES OF CHARITABLE-FOR PROGRAM 500 **EXPENSES** ARKANSAS CATHOLIC CHARITIES OF ARKANSAS 2500 N TYLER ST 2500 N TYLER ST LITTLE ROCK, AR 72207 CATHOLIC HIGH SCHOOL NONE PCEDUCATIONAL-FOR 11,000 FOUNDATION INC PROGRAM EXPENSES CATHOLIC HIGH SCHOOL FOUNDATION INC 6300 FATHER TRIBOU ST 6300 FATHER TRIBOU ST LITTLE ROCK, AR 72205 CENTER FOR WOMEN IN NONE PCCHARITABLE-FOR PROGRAM 300 TRANSITION **EXPENSES** CENTER FOR WOMEN IN TRANSITION 116 GARLAND ST 116 GARLAND ST LITTLE ROCK, AR 72201 CITY OF HOPE OUTREACH РС CHARITABLE-FOR PROGRAM NONE 1,000 CITY OF HOPE OUTREACH PO BOX **EXPENSES** 11474 PO BOX 11474 CONWAY, AR 72034 CIVITAN CENTER NONE PС CHARITABLE-FOR PROGRAM 5,000 CIVITAN CENTER 121 COX LN **EXPENSES** 121 COX LN BENTON, AR 72015 COMMUNITY SERVICE INC CHARITABLE-FOR PROGRAM NONE PС 350 COMMUNITY SERVICE INC 818 N **EXPENSES** CREEK DR 818 N CREEK DR CONWAY, AR 72032 CONWAY INTERFAITH CLINIC INC PCCHARITABLE-FOR PROGRAM NONE 1,100 CONWAY INTERFAITH CLINIC INC **EXPENSES** 830 N CREEK DR 830 N CREEK DR CONWAY, AR 72032 CONWAY NOON LIONS CLUB NONE РС CHARITABLE-FOR PROGRAM 200 FOUNDATION **EXPENSES** CONWAY NOON LIONS CLUB FOUNDATION INC PO BOX 367 PO BOX 367 CONWAY, AR 72033 CONWAY PUBLIC SCHOOLS NONE PCEDUCATIONAL-FOR 500 PROGRAM EXPENSES FOUNDATION IN CONWAY PUBLIC SCHOOLS FOUNDATION INC PO BOX 62 PO BOX 62 CONWAY, AR 72033 CONWAY REGIONAL HEALTH CHARITABLE-FOR NONE SO 31,500 **FOUNDINC** EXPANSION CONWAY REGIONAL HEALTH FOUND INC 2302 COLLEGE AVE 2302 COLLEGE AVE CONWAY, AR 72034 NONE CONWAY SYMPHONY ORCHESTRA PCCHARITABLE-FOR 200 ORCHESTRA EXPENSES INC CONWAY SYMPHONY ORCHESTRA INC PO BOX 1307 PO BOX 1307 CONWAY, AR 72033 NONE PС DISCALCED CARMELITE NUNS RELIGIOUS-FOR NUN 200 DISCALCED CARMELITE NUNS MINISTRY 7201 W 32ND ST 7201 W 32ND ST LITTLE ROCK, AR 72204 FAULKNER COUNTY COUNCIL ON NONE CHARITABLE-FOR PROGRAM 12,500 AGING IN **EXPENSES** FAULKNER COUNTY COUNCIL ON AGING INC 1620 DONAGHEY AVE 1620 DONAGHEY AVE CONWAY, AR 72032 FELLOWSHIP OF CHRISTIAN NONE PС CHARITABLE-FOR PROGRAM 200 ATHELETES **EXPENSES** FELLOWSHIP OF CHRISTIAN ATHLETES 3223 OLD GREENWOOD RD 3223 OLD GREENWOOD RD FT SMITH, AR 72903 453,950

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Recipient If recipient is an individual. Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HAND IN HAND MINISTRIES INC NONE PC CHARITABLE-FOR MINSTRY 200 HAND IN HAND MINISTRIES INC 2225 STEIER LN 2225 STEIER LN LOUISVILLE, KY 40218 INDEPENDENT LIVING SERVICES NONE PС CHARITABLE-FOR PROGRAM 300 **EXPENSES** INC INDEPENDENT LIVING SERVICES INC 615 E ROBINS ST 615 E ROBINS ST CONWAY, AR 72032 JOHN BROWN UNIVERSITY EDUCATIONAL-FOR NONE PC 17,000 JOHN BROWN UNIVERSITY 2000 W PROGRAM EXPENSES UNIVERSITY ST 2000 WUNIVERSITY ST SILOAM SPRINGS, AR 72761 K-LIFE MINISTRIES NONE PC RELIGIOUS-FOR PROGRAM 200 K-LIFE MINISTRIES 1800 HILLMAN MINISTRIES 1800 HILLMAN ST CONWAY, AR 72034 LIFE CHOICES INC PС CHARITABLE-FOR PROGRAM 1,500 NONE LIFE CHOICES INC PO BOX 1345 **EXPENSES** PO BOX 1345 CONWAY, AR 72033 CHARITABLE-FOR PROGRAM LITTLE ROCK COMPASSION NONE PC 1.000 **EXPENSES** CENTER LITTLE ROCK COMPASSION CENTER PO BOX 4249 PO BOX 4249 LITTLE ROCK, AR 72214 CHARITABLE-FOR PROGRAM PС 500 MAKE A CHILD SMILE OF CENTRAL NONE ARKAN **EXPENSES** MAKE A CHILD SMILE OF CENTRAL ARKANSAS 1309 MAIN ST 1309 MAIN ST CONWAY, AR 72034 MARYKNOLL FATHERS AND PC NONE RELIGIOUS-FOR MINISTRY 250 **BROTHERS** MARYKNOLL FATHERS AND **BROTHERS PO BOX 302** PO BOX 302 MARYKNOLL, NY 10545 MARYKNOLL SISTERS NONE P.C RELIGIOUS-FOR MINISTRY 250 MARYKNOLL SISTERS PO BOX 317 PO BOX 317 MARYKNOLL, NY 10545 MID-AMERICA SCIENCE MUSEUM NONE РС CHARITABLE-FOR PROGRAM 15,000 MID-AMERICA SCIENCE MUSEUM **EXPENSES** 500 MID AMERICA BLVD 500 MID AMERICA BLVD HOT SPRINGS, AR 71913 MOUNT ST MARY'S FOUNDATION RELIGIOUS-FOR CATHOLIC NONE PС 12,000 MOUNT ST MARY'S FOUNDATION HIGH SCHOOL 3224 KAVANAUGH BLVD 3224 KAVANAUGH BLVD LITTLE ROCK, AR 72205 NATIONAL BRAIN TUMOR SOCIETY NONE РС CHARITABLE-FOR PROGRAM 1,000 **EXPENSES** INC NATIONAL BRAIN TUMOR SOCIETY INC 55 CHAPEL ST STE 200 55 CHAPEL ST STE 200 NEWTON, MA 02458 CHARITABLE-FOR PROGRAM OLD STATE HOUSE MUSEUM NONE PС 100 **EXPENSES ASSOCIATES** OLD STATE HOUSE MUSEUM ASSOCIATES 303 W MARKHAM ST 303 W MARKHAM ST LITTLE ROCK, AR 72201 CHARITABLE-FOR PROGRAM NONE PС OUR HOUSE INC 10.000 OUR HOUSE INC PO BOX 34155 **EXPENSES** PO BOX 34155 LITTLE ROCK, AR 72203 PС FDUCATIONAL-FOR PHILANDER SMITH COLLEGE NONE 10,000 PHILANDER SMITH COLLEGE 900W PROGRAM EXPENSES DAISY L GASTON BATES 900 W DAISY L GASTON BATE LITTLE ROCK, AR 72202 453,950 

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or A mount status of show any relationship to contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PCPINE STREET COMMUNITY NONE CHARITABLE-FOR PROGRAM 200 DEVELOPMENT **EXPENSES** PINE STREET COMMUNITY DEVELOPMENT 601 SPRUCE ST 601 SPRUCE ST CONWAY, AR 72032 NONE PCCHARITABLE-FOR BOY QUAPAW AREA COUNCIL BOY 200 SCOUTS OF SCOUTS QUAPAW AREA COUNCIL BOY SCOUTS OF AMERICA 3220 CANTRELL RD 3220 CANTRELL RD LITTLE ROCK, AR 72202 NONE RAZORBACK FOUNDATION INC PCCHARITABLE-FOR PROGRAM 5,000 RAZORBACK FOUNDATION INC **EXPENSES** 1295 S RAZORBACK RD 1295 S RAZORBACK RD FAYETTEVILLE, AR 72701 RONALD MCDONALD HOUSE NONE PС CHARITABLE-FOR PROGRAM 5.000 CHARITIES OF **EXPENSES** RONALD MCDONALD HOUSE CHARITIES OF AR INC 1009 WOLF ST 1009 WOLF ST LITTLE ROCK, AR 72202 ROTARY CLUB 99 FOUNDATION NONE PCCHARITABLE-FOR PROGRAM 5,000 ROTARY CLUB 99 FOUNDATION EXPENSES 1501 N UNIVERSITY AVE ST 1501 N UNIVERSITY AVE ST LITTLE ROCK, AR 72207 SCHOOL SISTERS OF NOTRE DAME NONE PCCHARITABLE-FOR PROGRAM 500 SCHOOL SISTERS OF NOTRE DAME EXPENSES 13105 WATERTOWN PARK RD 3105 WATERTOWN PARK RD ELM GROVE, WI 53122 NONE CHARITABLE-FOR PROGRAM SISTERS OF CHARITY OF PC2,000 **EXPENSES** NAZARETH SISTERS OF CHARITY OF NAZARETH PO BOX 9 PO BOX 9 NAZARETH, KY 40048 SOARINGS WINGS RANCH INC NONE PCCHARITABLE-FOR PROGRAM 800 SOARING WINGS RANCH INC PO EXPENSES BOX 1670 PO BOX 1670 CONWAY, AR 72033 ST BERNARDS DEVELOPMENT NONE PCCHARITABLE-FOR PROGRAM 25,000 FOUNDATION **EXPENSES** ST BERNARDS DEVELOPMENT FOUNDATION 400 EAST ST 400 EAST ST JONESBORO, AR 72401 PС ST JOSEPH CHURCH NONE RELIGIOUS-FOR MINISTRIES 16,900 ST JOSEPH CHURCH 115 COLLEGE AVE115 COLLEGE AVE CONWAY, AR 72032 ST JOSEPHS HELPERS OF PULASKI NONE PCCHARITABLE-FOR PROGRAM 300 CNTY **EXPENSES** ST JOSEPHS HELPERS OF PULASKI CNTY-AR PREGNANCY RE PO BOX 25413 PO BOX 25413 LITTLE ROCK, AR 72221 EDUCATIONAL-FOR ST JOSEPH SCHOOL ALUMNI NONE PC100 ASSOCIATION PROGRAM EXPENSES ST JOSEPH SCHOOL ALUMNI ASSOCIATION 502 FRONT ST 502 FRONT ST CONWAY, AR 72032 2,000 ST JOSEPH SCHOOL ENDOWMENT NONE PCEDUCATIONAL-FOR & CHARIT PROGRAM EXPENSES ST JOSEPH SCHOOL ENDOWMENT & CHARITABLE TRUST 502 FRONT ST 502 FRONT ST CONWAY, AR 72032 24,000 ST VINCENT INFIRMARY DEVELOP NONE SO CHARITABLE-FOR MEDICAL PROGRAM EXP FDN ST VINCENT INFIRMARY DEVELOPMENT FDN TWO ST VINCENT CIR TWO ST VINCENT CIR LITTLE ROCK, AR 72205 STEVE AZAR ST CECILIA NONE PС CHARITABLE-FOR PROGRAM 10,000 **EXPENSES** FOUNDATION STEVE AZAR ST CECILIA FOUNDATION PO BOX 4613 PO BOX 4613 GREENVILLE, MS 38704 453,950 

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor a Paid during the year SUBIACO ABBEY & ACADEMY NONE PC FOR RELIGIOUS & 5,000 SUBIACO ABBEY & ACADEMY 65 N **EDUCATIONAL** SUBIACO AVE 65 N SUBIACO AVE SUBIACO, AR 72865 THE MUSES INC NONE РС CHARITABLE-FOR SUPPORT 700 THE MUSES INC 428 ORANGE ST OF THE ARTS 428 ORANGE ST HOT SPRINGS, AR 71913 TRI COUNTY TECHNOLOGY NONE РС EDUCATIONAL-FOR 2,500 TECHNOLOGY CENTER CENTER TRI COUNTY TECHNOLOGY CENTER 6101 NOWATA RD 6101 NOWATA RD BARTLESVILLE, OK 74006 CHARITABLE-FOR PROGRAM TULSA JEWISH COMMUNITY NONE PС 12,500 **RETIREMENT & EXPENSES** TULSA JEWISH COMMUNITY RETIREMENT & HEALTH CARE CE 2025 E 71ST ST 2025 E 71ST ST TULSA, OK 74136 UNBOUND NONE CHARITABLE-FOR PROGRAM PС 250 UNBOUND 1 ELMWOOD AVE EXPENSES 1 ELMWOOD AVE KANSAS CITY, KS 66103 UAMS FAMILY HOME AND CANCER NONE PC CHARITABLE-FOR PROGRAM 5,000 **EXPENSES** INSTITU UAMS FAMILY HOME & CANCER INSTITUTE 4300 W MARKHAM ST 4301 W MARKHAM ST LITTLE ROCK, AR 72205 UAMS FOUNDATION-REYNOLDS NONE PС CHARITABLE-FOR PROGRAM 500 INSTITUTE **EXPENSES** UAMS FOUNDATION 4301 W MARKHAM ST 4301 W MARKHAM ST LITTLE ROCK, AR 72205 UNIV OF CENTRAL AR NONE PC EDUCATIONAL-FOR 6,500 FOUNDATION INC EDUCATION/ARTS/ATHLE UNIV OF CENTRAL AR FOUNDATION INC 201 DONAGHEY AVE 201 DONAGHEY AVE CONWAY, AR 72035 UNIV OF CENTRAL AR NONE PС CHARITABLE-FOR AR 2,500 FOUNDATION SHAKESPEARE THEATR UNIF OF CENTRAL AR FOUNDATION 201 DONAGHEY AVE 201 DONAGHEY AVE CONWAY, AR 72035 UNITED WAY OF CENTRAL AR INC CHARITABLE-FOR PROGRAM NONE PС 3,500 UNITED WAY OF CENTRAL AR INC **EXPENSES** PO BOX 489 PO BOX 489 CONWAY, AR 72033 UNIV OF AR COMMUNITY РС EDUCATIONAL-FOR 25,300 NONE COLLEGE AT MOR PROGRAM EXPENSES UNIV OF AR COMMUNITY COLLEGE AT MORRILTON 1537 UNIV BLVD 1537 UNIV BLVD MORRILTON, AR 72110 US MARSHALS MUSEUM INC CHARITABLE-FOR PROGRAM 10,000 NONE US MARSHALS MUSEUM INC 100 **EXPENSES** GARRISON AVE 100 GARRISON AVE FORT SMITH, AR 72901 WOMEN & CHILDREN FIRST CHARITABLE-FOR PROGRAM NONE PС 500 CENTER **EXPENSES** WOMEN & CHILDREN FIRST CENTER AGAINST FAMILY VIOLE PO BOX 1954 PO BOX 1954 LITTLE ROCK, AR 72203 YOUNG LIFE NONE PС CHARITABLE-FOR PROGRAM 600 YOUNG LIFE PO BOX 751 **EXPENSES** PO BOX 751 CONWAY, AR 72033 453,950 

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As Filed Data -

DLN: 93491224002065

**Employer identification number** 

OMB No 1545-0047

OND NO 1343-0047

0044

### 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, 990-EZ, or 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2014

NABHOLZ CHARITABLE F		
		58-1748037
Organization type (check of	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	n
	527 political organization	
Form 990-PF	<b>▽</b> 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule See instructions
General Rule		
	iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a c	
Special Rules		
under sections 509(a received from any or	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% sup a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part ne contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or b) Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that
during the year, total	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive contributions of more than \$1,000 exclusively for religious, charitable, scientific cruelty to children or animals. Complete Parts I, II, and III	· · · · · · · · · · · · · · · · · · ·
during the year, cont this box is checked, purpose Do not com	described in section $501(c)(7)$ , $(8)$ , or $(10)$ filing Form 990 or 990-EZ that received tributions exclusively for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an excluplete any of the parts unless the <b>General Rule</b> applies to this organization becaute, contributions totaling \$5,000 or more during the year	butions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
NABHOLZ CHARITABLE FOUNDATION

**Employer identification number** 58-1748037

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	<u> </u>	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NABHOLZ CONSTRUCTION CORPORATION NABHOLZ CONSTRUCTION CORPORATION  PO BO X 2090  CONWAY, AR72033	\$19,200	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHARLES NABHOLZ 612 GARLAND ST CONWAY, AR72032	\$ <u>34,755</u>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization Employer identification number NABHOLZ CHARITABLE FOUNDATION 58-1748037 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is Part II (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

(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
		\$	

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2014)			Page 4
	organization Z CHARITABLE FOUNDATION			Employer identification number
	CHARITABLE FOUNDATION			58-1748037
Part III		rom any one con er the total of <i>excl</i> tructions ) <b>►</b>	ntributor. Complete	eribed in section 501(c)(7), (8), or (10) e columns (a) through (e) and the following line haritable, etc., contributions of \$1,000 or less for \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and		nsfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Us	e of gift	(d) Description of how gift is held
	Transferee's name, address, and		nsfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Us	e of gift	(d) Description of how gift is held
	Transferee's name, address, and	• •	nsfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Us	e of gift	(d) Description of how gift is held
	Transferee's name, address, and		nsfer of gift Relatio	nship of transferor to transferee

# **TY 2014 Accounting Fees Schedule**

Name: NABHOLZ CHARITABLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CPA	3,480			

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# **TY 2014 Investments Corporate Stock Schedule**

Name: NABHOLZ CHARITABLE FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
REGIONS FINANCIAL CORP.	183,840	183,840

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### **TY 2014 Other Decreases Schedule**

Name: NABHOLZ CHARITABLE FOUNDATION

Description	Amount
UNREALIZED LOSS ON INVESTMENTS CARRIED AT MARKET	147,657

# **TY 2014 Other Expenses Schedule**

Name: NABHOLZ CHARITABLE FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
CHECKS	68			

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### **TY 2014 Other Professional Fees Schedule**

Name: NABHOLZ CHARITABLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK TRUST FEES	2,100	2,100		

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### **TY 2014 Taxes Schedule**

Name: NABHOLZ CHARITABLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX ON INVESTMENT INCOME	78			