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Return of Private Foundation

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

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OMB No 1545 0052

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf 05/19 , **2015**, and ending 12/31, 2015 For calendar year 2015 or tax year beginning A Employer identification number Name of foundation 47-4259772 THE ROB AND MELANI WALTON FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) BOX 1860 (479) 464-1570 P.O City or town state or province country and ZIP or foreign postal code If exemption application is pending check here BENTONVILLE, AR 72712 G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations check here Final return Amended return 2 Foreign organizations meeting the 85% test check here and attach Address change Name change computation X Section 501(c)(3) exempt private foundation H Check type of organization E if private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A) check here J Accounting method | X Cash Fair market value of all assets at If the foundation is in a 60 month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B) check here 101,958,348 (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b) (c), and (d) expenses per purposes income may not necessarily equal the amounts in иссеще books (cash basis only) column (a) (see instructions)) 92,072,500 Contributions gifts grants etc received (attach schedule) if the foundation is not required to 2 attach Sch. B. Interest on savings and temporary cash investments Dividends and interest from securities 4 5a Gross rents Net rental income or (loss) Revenue Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a O Capital gain net income [from Par Weine 2) 7 Net short-term capital gain Income modifications 10 a Gross sales less equins and allowances b Less Cost of goods sold_ Gross profit or (loss) ((attach schedule) 11 Other income tattach schedule 92,072,500 0 12 Total Add lines 1 through 11 Ω 13 Compensation of officers directors trustees etc Expenses 14 Other employee salaries and wages 15 Pension plans employee benefits 5,000 15,72016a Legal fees (attach schedule) ATCH 1 411 411 b Accounting fees (attach schedule)ATCH 2 and Administrative c Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences and meetings 21 Printing and publications 521 521. Other expenses (attach schedule) ATCH 3 Total operating and administrative expenses 16,652 5,932 Add lines 13 through 23 25 Contributions gifts grants paid 0. 0 5,932 16,652 Total expenses and disbursements. Add lines 24 and 25 CANNED 27 Subtract line 26 from line 12 92,055,848 Excess of revenue over expenses and disbursements 0 b Net investment income (if negative enter 0-)

| Part | Ralance Sheets | Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | | of year | |
|---|---|--|---|----------------|---------------------------------------|--|
| | | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value | |
| 1 | Cash →non-interest-bea | ring | | 10,008,348. | 10,008,348 | |
| 2 | | cash investments | i | | | |
| 3 | Accounts receivable | | | | | |
| } | Less allowance for do | ubtful accounts ▶ | } | | | |
| 4 | Pledges receivable | li . | | | | |
| } | _ | ubtful accounts ▶ | | | * * ******** | |
| 5 | | | | | | |
| 6 | | officers, directors, trustees, and other | | | · · · · · · · · · · · · · · · · · · · | |
| | | ttach schedule) (see instructions) | | | | |
| 7 | | receivable (attach schedule) | | | | |
| ' | Less allowance for do | ubtful accounts ▶ | | | | |
| हा ह | | se | 1 | | | |
| ssets 6 8 | | deferred charges | | | | |
| Ø 10a | | ate government obligations (attach schedule). | | | | |
| 100 | Investments - 0.5 and se | e stock (attach schedule) ATCH 4 | | 92,047,500. | 91,950,000 | |
| b | | | | | 32,300,000 | |
| 11 | Investments - corporat | e bonds (attach schedule) | | | | |
| - 1 | and equipment basis Less accumulated deprec | untion > | } | | | |
| į | (attach schedule) | · | | | | |
| 12 | | eloans | | | | |
| 13 | Investments - other (at | tach schedule) | | | | |
| 1.4 | equipment basis Less accumulated deprec | pration b | | | | |
| | (attach schedule) | · | | | | |
| 15 | Other assets (describe | | | | | |
| 16 | | completed by all filers - see the | | 100 055 040 | 101 050 015 | |
| | instructions Also, see | page 1, item I) | | 102,055,848. | 101,958,348 | |
| 17 | Accounts payable and | accrued expenses | | | | |
| 18 | Grants payable | | | | | |
| % 19 | Deferred revenue | | | | | |
| Liabilities 20 21 22 | Loans from officers, direct | ors, trustees, and other disqualified persons L | | 10,000,000. | ATCH 5 | |
| 유 21 | Mortgages and other n | otes payable (attach schedule) 上 | | | , | |
| ⊐ ₂₂ | Other habilities (describ | be ▶) | | | | |
| Ì | | 1 | | | } | |
| 23 | Total liabilities (add lin | es 17 through 22) | 0. | 10,000,000. | | |
| | Foundations that fo | llow SFAS 117, check here . ▶ | | | | |
| ces | and complete lines | 24 through 26 and lines 30 and 31. | | | į | |
| | Unrestricted | <u>.</u> | | 1 | | |
| R 25 | | | | | 1 | |
| <u>m</u> 26 | | | | | 1 | |
| 틱 | - | not follow SFAS 117, | | | | |
| 屲 | | pplete lines 27 through 31. | | | • | |
| ර් ₂₇ | | ncipal, or current funds | | | t | |
| \$ 28 | | or land, bldg, and equipment fund, | | | | |
| Net Assets or Fund Balan 25 25 25 25 25 25 25 25 25 25 25 25 25 | • • • | ulated income, endowment, or other funds | | 92,055,848. | Ť | |
| ₹ 30 | • | d balances (see instructions) | 0. | 92,055,848. | 1 | |
| 31 | | net assets/fund balances (see | | | | |
| _ | | | 0. | 102,055,848. | | |
| Part | | inges in Net Assets or Fund Balar | nces | | | |
| | | balances at beginning of year - Part I | | ust agree with | | |
| | | ed on prior year's return) | | - | | |
| | | I, line 27a | | | 92,055,848 | |
| | | ded in line 2 (itemize) ► | | | 32,033,040 | |
| | | | | | 92,055,848 | |
| | | n line 2 (temper) | • | , | 72,033,040 | |
| | creases not included i | | lino E\ Dart II california (III | 5 | 92,055,848 | |
| 6 10 | tai net assets or fund i | palances at end of year (line 4 minus | ine 5) - Part II, column (b |), line 30 6 | Form 990-PF (2015) | |

| P | art IV Capital Gains | and Losses for Tax on Inv | vestment Income | | | |
|--------------|--|---|--|------------------------------|---|-----------------|
| | | d describe the kind(s) of property sold | | (b) How acquired | (c) Date acquired | (d) Date sold |
| | 2-story b | rick warehouse, or common stock, 200 | Oshs MLC Co) | P - Purchase D - Donation | (mo , day, yr) | (mo , day, yr) |
| <u>1a</u> | | | | L | | |
| b | | | | | | |
| _ <u>c</u> | | | | <u> </u> | | |
| <u>d</u> | | | | | | |
| _e | | | | | | |
| _ | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo (e) plus (f) minu | |
| <u>a</u> | | | | | | |
| _b | | | | | | |
| _ <u>c</u> | | | | | | |
| <u>d</u> | | | | | | |
| e | Complete only for coasts | phering son in column (b) and our | ad by the foundation on 12/21/60 | | | |
| | Complete only for assets | showing gain in column (h) and own | | | Gains (Coi (h) ga | |
| | (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col (j), if any | COI | (k), but not less to Losses (from co | |
| _a_ | | | | ļ | | |
| <u>b</u> | | | | | | |
| _ <u>c</u> | | | | | | |
| _ <u>d</u> | | | | | | |
| _ <u>e</u> _ | | | | - | | |
| 2 | Capital gain net income of | ir ingt canital inggl | f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7 | 2 | | |
| 3 | Net short-term capital ga | in or (loss) as defined in sections | , · · · · · · · · · · · · · · · · · · · | | | |
| - | | | structions) If (loss), enter -0- in) | } } | | |
| | _ | ······································ | | 3 | | |
| P: | | | educed Tax on Net Investment I | | | |
| Wa | | ioaro ano pare biarne | T AVAILABLE FOR INITIAL butable amount of any year in the b | | | Yes No |
| 1 | | | ar, see the instructions before makir | ng any entr | ies | |
| | (a) | (b) | (c) | 3 | (d) | |
| Ca | Base penod years itendar year (or tax year beginning in) | Adjusted qualifying distributions | Net value of nonchantable-use assets | 1 , | Distribution rai col (b) divided by | |
| | 2014 | | | | (2) (1) | 55. (5)/ |
| | 2013 | | | | | |
| | 2012 | | | | | |
| | 2011 | | | | | |
| | 2010 | | | | | |
| | | | | | | |
| 2 | Total of line 1, column (d |) | | 2 | | |
| 3 | | | de the total on line 2 by 5, or by the | | | |
| | - | • • | ss than 5 years | 3 | | |
| | • | | • | | | |
| 4 | Enter the net value of nor | ncharitable-use assets for 2015 f | rom Part X, line 5 | 4 | | |
| 5 | 5 Multiply line 4 by line 3 | | | | | |
| 6 | Enter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | |
| 7 | Add lines 5 and 6 | | | 7 | | |
| 8 | Enter qualifying distribution | ons from Part XII line 4 | | 8 | | - |
| | If line 8 is equal to or gr Part VI instructions | eater than line 7, check the box | in Part VI, line 1b, and complete | that part u | ısıng a 1% tax | rate See the |

| Form | 990-PF (2015) THE ROB AND MELANI WALTON FOUNDATION 47-425 | 9772 | 2 | Page 4 |
|------------|--|--------|----------|--|
| Pai | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | instru | ıctior | 15) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here | | | |
| | 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 | | | 0. |
| | here ▶ and 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-) 2 | | | |
| 3 | Add lines 1 and 2 | | | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 | | | <u> </u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | | 0. |
| 6 | Credits/Payments | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015, 6a | | | |
| b | Exempt foreign organizations - tax withheld at source | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c | | | |
| d | Backup withholding erroneously withheld | | | 0 |
| 7 | Total credits and payments Add lines 6a through 6d | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | | 0. |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ Refunded ▶ 11 t VII-A Statements Regarding Activities | | | |
| _ | | TT | | T |
| 7 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | 1a | Yes | No X |
| . | participate or intervene in any political campaign? | " | | + |
| U | Instructions for the definition)? | 16 | | x |
| | 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. | } } | | 1 |
| _ | Did the foundation file Form 1120-POL for this year? | 1c | | x |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| u | (1) On the foundation \$ \$ | { } | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on | | | 1 |
| • | foundation managers > \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X |
| - | If "Yes," attach a detailed description of the activities. | | | T |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | } | | 1 |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T | } { | | ļ |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | 1 1 | | |
| | By language in the governing instrument, or | \ \ | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | } } | i i | 1 |
| | conflict with the state law remain in the governing instrument? | 6 | <u>X</u> | L |
| 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 | X | ļ |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | 1 |
| | DE, | [] | | |
| þ | 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 | 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," | }] | | |
| | complete Part XIV | 9 | | <u> </u> |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | v | 1 |
| | names and addresses . ATCH . 6 | 10 | X | |

| Part VII-A Statements Regarding Activities (continued) | | | | |
|--|-----------------|----------|-----|----|
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity v | vithin the | 1 | Yes | No |
| meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | <i>.</i> | 11 | | X |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a contract of the foundation of the foundat | | | | |
| person had advisory privileges? If "Yes," attach statement (see instructions) | | 12 | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption a | | 13 | X | |
| Website address ► N/A | | | | |
| 14 the books are in care of P | 479-464 | -157 | 0 | |
| Located at ▶ P.O. BOX 2030 BENTONVILLE, AR ZIP+4 ▶ | 72712 | | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . | | | 🕨 | |
| and enter the amount of tax-exempt interest received or accrued during the year | ▶ 15 | | | |
| 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other | er authority | | Yes | No |
| over a bank, securities, or other financial account in a foreign country? | | 16 | | Х |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the | name of | 1 | 1 | |
| the foreign country ▶ | | <u> </u> | l | |
| Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | Yes | No |
| 1a During the year did the foundation (either directly or indirectly): | | | - 1 | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes | X No | | l | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | l | |
| disqualified person? | No | | | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes | X No | | - 1 | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes | X No | | 1 | |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for | [- | | | |
| the benefit or use of a disqualified person)?Yes | X No | | | { |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | ļ | Ì |
| foundation agreed to make a grant to or to employ the official for a period after | ਦਿ ਹ | | 1 | |
| termination of government service, if terminating within 90 days) | X No | | | } |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in R | egulations | | | |
| section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | • | 1b | | X |
| Organizations relying on a current notice regarding disaster assistance check here | | | | |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted | | | | J |
| were not corrected before the first day of the tax year beginning in 2015? | | 1c | | |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was | a private | 1 | - } | } |
| operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | 1 | |
| a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and | X No | | j | |
| 6e, Part XIII) for tax year(s) beginning before 2015? | I NO | | - } | 1 |
| If "Yes," list the years | 10.43/5\/3\ | 1 | - } | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4 | i | Ì | į | } |
| (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 494) | 3 | 2b | | |
| all years listed, answer "No" and attach statement - see instructions) | | 20 | -+ | |
| | | 1 | 1 | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | 1 | į | - 1 | ļ |
| at any time during the year? | X No | | - | |
| b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the found | | 1 | | 1 |
| disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve | 1 | | } | } |
| Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the | - | 1 | | 1 |
| the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determin | 1 | } | | |
| foundation had excess business holdings in 2015) | | 3b | | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable | | 4a | | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeop | Г | | | |
| charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning | ſ | 4b | | Х |

| Pai | t VII-B Statements Regarding Activities | for Which Form | 4720 May Be Red | uired (continued) | | |
|----------|--|--|-----------------------------|--|------------------------|-------------|
| 5a | During the year did the foundation pay or incur any amo | ount to | | | | |
| | (1) Carry on propaganda, or otherwise attempt to influe | ence legislation (section | on 4945(e))? | . Yes X No | o | |
| | (2) Influence the outcome of any specific public ele | ection (see section 4 | 4955), or to carry or | 1, | | |
| | directly or indirectly, any voter registration drive? | | | Yes X N | ا ا | |
| | (3) Provide a grant to an individual for travel, study, or o | | | F-1 F-3 | ااد | |
| | (4) Provide a grant to an organization other than a | charitable, etc., org | janization described i | n | | } |
| | section 4945(d)(4)(A)? (see instructions) | | <i></i> | Yes X No | 5 | |
| | (5) Provide for any purpose other than religious, ch | | | | | |
| | purposes, or for the prevention of cruelty to children | or animals? | | . Yes X No | o | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | | | | n | |
| | Regulations section 53.4945 or in a current notice regar | ding disaster assistar | nce (see instructions)? | | . 5b | } |
| | Organizations relying on a current notice regarding disas | ster assistance check | here | | | |
| С | If the answer is "Yes" to question 5a(4), does the | | | | | 1 |
| - | because it maintained expenditure responsibility for the | | • | | . | 1 |
| | If "Yes," attach the statement required by Regulations se- | | | | [] | } |
| 6a | Did the foundation, during the year, receive any fur | • • | ectly, to pay premiur | ns | } | ļ |
| | on a personal benefit contract? | • | | Yes X No | , | |
| ь | Did the foundation, during the year, pay premiums, dire | | | • | . 6ь | X |
| _ | If "Yes" to 6b. file Form 8870 | , , , , , , , , , , , , , , , , , , | | | ' | |
| 7a | At any time during the tax year, was the foundation a p | arty to a prohibited ta | x shelter transaction? | Yes X No | , | ĺ |
| b | | | | | | |
| _ | Information About Officers, Directo | | | | | |
| 1 | and Contractors | nagagars and their | - componentian (coo | (moturations) | | |
| <u>'</u> | List all officers, directors, trustees, foundation n | (b) Title, and average | (c) Compensation | (d) Contributions to | (a) Evenes | |
| | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | (e) Expense other allo | |
| | | | | | | |
| ATC | н 7 | | 0. | 0. | | 0. |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | <u> </u> | | | | |
| 2 | Compensation of five highest-paid employees | (other than thos | e included on line | 1 - see instruction | ons). If no | ne, enter |
| | "NONE." | | | (d) Contributions to | | |
| (a) | Name and address of each employee paid more than \$50,000 | (b) Title, and average (hours per week | (c) Compensation | employee benefit | (e) Expense | |
| | | devoted to position | | plans and deferred compensation | other allo | wances |
| | | [| | | | |
| | NONE | | | | | |
| | | | | | | |
| | | | | | | |
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| | | [| ļ | ĺ | | |
| | | | | | | |
| | | | } | ł | | |
| otal | number of other employees paid over \$50,000. | | <u> </u> | | | |
| | - · · - · · · · · · · · · · · · | | | | | |

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Form 990-PF (2015) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE All other program-related investments. See instructions 3 NONE

Form 990-PF (2015)

Total. Add lines 1 through 3

Page 8

| Part | Minimum Investment Return (All domestic foundations must complete this part. Foreisee instructions) | ign founda | tions, |
|------|---|--------------|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | } | |
| а | Average monthly fair market value of securities | | 3,831,250. |
| b | Average of monthly cash balances | | 5,429,304. |
| C | Fair market value of all other assets (see instructions) | | |
| d | Total (add lines 1a, b, and c) | 1d | 9,260,554. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | 1 1 | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 9,260,554. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see | 1 1 | |
| | instructions) | 4 | 138,908. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 9,121,646. |
| _6_ | Minimum investment return. Enter 5% of line 5 | | 456,082. |
| Par | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part) | ndations | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 456,082. |
| | Tax on investment income for 2015 from Part VI, line 5 | | |
| - b | Income tax for 2015 (This does not include the tax from Part VI). | 1 | |
| | Add lines 2a and 2b | 2c | |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 456,082. |
| 4 | Recoveries of amounts treated as qualifying distributions | 1 | |
| 5 | Add lines 3 and 4 | 5 | 456,082. |
| 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 | 456,082. |
| Par | XII Qualifying Distributions (see instructions) | | |
| | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | 1 . | 5 000 |
| | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | 5,932. |
| 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 | 5,932. |
| 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 | | 5,932. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years | alculating w | hether the foundation |

Form 990-PF (2015)

Form 990-PF (2015)

Page **9**

| Pa | rt XIII Undistributed Income (see instru | uctions) | | | |
|----|---|---------------|----------------------------|-------------|---------------------------------------|
| 1 | Distributable amount for 2015 from Part XI. | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
| Ī | line 7 | | | | 456,082. |
| 2 | Undistributed income, if any, as of the end of 2015 | | | | |
| | Enter amount for 2014 only. | | ļ | | |
| | Total for prior years 20 13 20 12 20 11 | | | | |
| | Excess distributions carryover, if any, to 2015 | | | | |
| | 1 | | | | |
| | From 2010 | | | | |
| | | | | | |
| | From 2012 | | | ı | |
| | From 2014 | | | | |
| | Total of lines 3a through e | | | | |
| | Qualifying distributions for 2015 from Part XII, | | | | |
| | line 4 ▶ \$5,932. | | | | |
| а | Applied to 2014, but not more than line 2a | | | | |
| b | 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 2015 distributable amount | | | | 5,932. |
| е | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2015 . | | | | |
| | (If an amount appears in column (d), the same | | 1 | į | |
| 6 | amount must be shown in column (a)) Enter the net total of each column as | | | } | |
| • | indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | | | |
| С | Enter the amount of prior years' undistributed | | 1 | } | |
| | been issued, or on which the section 4942(a) | | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| | amount - see instructions | | | | |
| е | Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount - see | | | | |
| | instructions | · | | | |
| f | Undistributed income for 2015 Subtract lines | | | | |
| • | 4d and 5 from line 1 This amount must be | | | | |
| | distributed in 2016 | | | | 450,150. |
| 7 | Amounts 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 2010 not | | | | |
| | applied on line 5 or line 7 (see instructions) | | ļ | | |
| 9 | Excess distributions carryover to 2016. | 0 | | | |
| | Subtract lines 7 and 8 from line 6a | 0. | | | |
| | Analysis of line 9 | | 1 | | |
| | Excess from 2011 | | | | |
| | Excess from 2012 | | | | |
| | Excess from 2013 | | | | |
| | Excess from 2014 | | | | |
| e | Excess from 2015 | | <u> </u> | | 000 55 |

| Page | 10 | ı |
|------|----|---|
|------|----|---|

| Pa | ri XIV Private Op | erating Foundations | s (see instructions a | ing Part VII-A, ques | stion 9) | NOT APPLICABL |
|-----|--|---|---|---|--|--|
| 1 a | If the foundation has | received a ruling or o | letermination letter tha | at it is a private ope | erating | |
| | foundation, and the rulin | | | | | |
| b | Check box to indicate v | whether the foundation Tax year | is a private operating | foundation described Prior 3 years | in section 4942 | (J)(3) or 4942(J)(5) |
| 2 a | Enter the lesser of the ad- | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| | i or the minimum investment return from Part X for each | | (5) 23 14 | (0) 2013 | (0) 20 12 | |
| | year listed | }i | | | | |
| þ | 85% of line 2a | <u> </u> | | | | |
| c | Qualifying distributions from Part | } | | | | |
| | XII, line 4 for each year listed | <u> </u> | | | | |
| a | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 3d. | | | | | |
| 3 | 2d from line 2c 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 | <u> </u> | | | | |
| | 4942(j)(3)(B)(i) | | | | | |
| • | "Endowment" alternative test- enter 2/3 of minimum invest- | } | 1 | | | |
| | ment return shown in Part X, | | Į | | | |
| | line 6 for each year listed | | | | - | |
| С | "Support" alternative test - enter | | | | | |
| | Total support other than gross investment income (interest, dividends, rents, | | † | | | |
| | payments on secunties loans (section 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public and 5 or more | 1 | | | | |
| | exempt organizations as provided in section 4942 (j)(3)(B)(III) | | | | | |
| | (3) Largest amount of support from an exempt organization. | | | | | |
| | (4) Gross investment income | | Ţ | | | T |
| Pa | | ntary Information (| Complete this part | only if the found | ation had \$5.000 c | or more in assets at |
| | any time d | uring the year - see | instructions.) | | | |
| 1 | Information Regardin | - | | ra than 20/ of the to | tal aantrihutiana raaa | |
| а | List any managers of before the close of any | y tax year (but only if the | nave contributed inconey have contributed | more than \$5,000) (| See section 507(d)(2) |) |
| | S. ROBSON V | | | | | - |
| b | List any managers of ownership of a partner | | | | | ly large portion of the |
| | N/A | | | | | |
| 2 | Information Regardin | ~ · · · · · · · · · · · · · · · · · · · | | - · · · | | |
| | unsolicited requests for | or funds. If the found | lation makes gifts, gr | to preselected cha ants, etc (see instru | ritable organizations ctions) to individuals | and does not accept or organizations under |
| | other conditions, comp The name, address, a | | | the person to whom a | pplications should be ad | ddressed |
| | | | | | | |
| b | The form in which app | lications should be su | bmitted and informati | on and materials they | y should include | |
| C | Any submission dead | ines | | | | |
| | | | | | | |
| d | Any restrictions or li | imitations on awards | s, such as by geog | raphical areas, chari | table fields, kınds of | institutions, or other |

Form 990-PF (2015)

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| Part XV Supplementary Information | (continued) | | | rage I |
|---|---|-------------|----------------------------------|----------------|
| 3 Grants and Contributions Paid Dur | ing the Year or App | roved for I | Future Payment | |
| 3 Grants and Contributions Paid Dur Recipient Name and address (home or business) | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | Amount |
| a Paid during the year | | | | |
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| Total | | | ▶ 3a | - |
| b Approved for future payment | | | | |
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| Total | | • • • • • • | ▶ 3b | - 200 75 |

| Part XVI-A Analysis of Income-Prod | | | | | |
|--|---------------|--------------------------|----------------|---------------------------------------|---------------------------------------|
| Enter gross amounts unless otherwise indicated | (a) | ated business income (b) | (c) | y section 512, 513, or 514 (d) | (e) Related or exempt function income |
| 1 Program service revenue | Business code | Amount | Exclusion code | Amount | (See instructions) |
| a b | | | _ | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | · |
| 3 Interest on savings and temporary cash investments - | | | | | |
| 4 Dividends and interest from securities | | - | | | |
| 5 Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property. | | - | - | | |
| 7 Other investment income | II. | | - | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 Net income or (loss) from special events - · · | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue a | | | | | · |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | <u> </u> | <u></u> | 13 | |
| (See worksheet in line 13 instructions to verify calc | culations) | | | | |
| Part XVI-B Relationship of Activities | | ccomplishment of | Exempt Pur | noses | |
| Line No. Explain below how each active | - | · · | - | | • |
| accomplishment of the foundati | | —————————— | | | |
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

| 1 | | | • | ngage in any of the followir ection 501(c)(3) organizatio | • | | | Yes | No |
|-------|---------|----------------------------------|--|---|--|-------------------------------|----------|---------------|----------------|
| | - | zations? | | | | | | | <u> </u> |
| а | | | | noncharitable exempt orga | | | | | |
| | | | | | | | 1a(1) | <u> </u> | X |
| _ | | ner assets | • • • • • • • • • | | | • • • • • • • • • • • | 1a(2) | | ^ |
| D | | | ncharitable evem | pt organization | | | 16/11 | | Х |
| | | | | le exempt organization | | | | - | X |
| | | | | ssets | | | | | X |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | Х |
| | | | | <i>.</i> | | | | | X |
| | (6) Pe | rformance of service | s or membership | or fundraising solicitations | | | 1b(6) | | X |
| C | | | | s, other assets, or paid emplo | | | | | X |
| d | If the | answer to any of th | ne above is "Yes | " complete the following s | chedule Column (b) | should always show | the | air m | ıarke |
| | | - | | es given by the reporting for | | | | | |
| | value | | | ement, show in column (d) | | | | | |
| (a) L | ine no | (b) Amount involved | (c) Name of no | ncharitable exempt organization | | sfers, transactions, and shar | ing arra | ngeme | nts |
| | | N/A | | | N/A | | | | |
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| | describ | | of the Code (oth | ated with, or related to, or er than section 501(c)(3)) or | | | Ye | s X |] No |
| | | (a) Name of organization | <u> </u> | (b) Type of organization | | (c) Description of relations | nip | | |
| | · | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |
| Sig: | correc | at, and epimplete Declaration of | | d this return, including accompanying payer) is based on all information of which | | May the IRS with the pre | discuss | this | return |
| | Sign | afture of officer or trustee | | Date | <u> </u> | (see instructions | <u> </u> | Yes | No |
| Paid | • | Print/Type preparer's na | | Preparer's signature | Date | | TIN | | |
| | | KENT C CROUCH | | / | - 1//// | / | | 1075 | 0 |
| | parer | | LTON ENTERP | | <u>'</u> | Firm's EIN > 62-16 | 6543 | 34 | |
| Use | Only | 1 ' | O. BOX 1860 | | 70710 | | | | |
| | | JBE | ENTONVILLE, | AR | 72712 | Phone no 479-46 | | | |
| | | | | | | For | n 990 | -PF (| 2015) |

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. Internal Revenue Service

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Name of the organization Employer identification number THE ROB AND MELANI WALTON FOUNDATION 47-4259772 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule |X| For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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) (2015)

Employer identification number 47-4259772

| Part I | Contributors (see instructions) Use duplicate con | oles of Part I if additional space is n | eeded |
|------------|--|---|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | S. ROBSON WALTON P.O. BOX 1860 BENTONVILLE, AR 72712 | \$\$ 92,072,500. | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |

Employer identification number

47-4259772

| Dart II | Noncash Property | (see instructions) | Use duplicate copies | of Part II if additional | l snace is needed |
|-------------|-------------------|--------------------|----------------------|--------------------------|-------------------|
| T all L III | Moneagn i Toperty | (See manachema). | ose auplicate copies | or rait in additiona | space is needed |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| _1 | 1,500,000 SHARES OF WALMART STOCK | | |
| | | \$92,047,500. | 12/29/2015 |
| (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 |
| | | \$ | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization THE ROB AND MELANI WALTON FOUNDATION

Employer identification number 47-4259772

| Part III | Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or | | | | | | |
|-----------------|---|---|--|--|--|--|--|
| | (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc. | | | | | | |
| | | | | | | | |
| | contributions of \$1,000 or less for the year (Enter this information once. See instructions) ▶\$ | | | | | | |
| | Use duplicate copies of Part III if additi | | · · · · · · · · · · · · · · · · · · · | | | | |
| (a) No. | | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | |
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| | | | | | | | |
| | | | | | | | |
| | (a) Transfer of sife | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | Transferee's name, address, an | Delationship of transferor to transferor | | | | | |
| | Transferee 5 maine, address, an | 10 21 1 4 | Relationship of transferor to transferee | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| (a) No | | | | | | | |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | |
| Part I | | | | | | | |
| | | ~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | | |
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| | | | | | | | |
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| | | (e) Transfer of gift | | | | | |
| | | | | | | | |
| | Transferee's name, address, an | Relationship of transferor to transferee | | | | | |
| | | | | | | | |
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| | | | | | | | |
| (a) No. from | | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | |
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| | ļ | (e) Transfer of gift | | | | | |
| | (e) Transfer of gπt | | | | | | |
| | Transferee's name, address, an | id 71P + 4 | Relationship of transferor to transferee | | | | |
| | Transfered S marie, address, an | | relationship of transferor to transferee | | | | |
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| | | | | | | | |
| (a) No. | | | | | | | |
| from | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | |
| Part I | · | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | | | | | | | |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of transferor to transferee | | | | |
| | | | | | | | |
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| DESCRIPTION | LEGAL FEES |
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| NET INVESTMENT | TNCOME |
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15,720.

ATTACHMENT 1 PAGE 18

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ATTACHMENT 2

| NG FEES | |
|------------|--|
| - ACCOUNTI | |
| E, PART I | |
| FORM 990 | |

| CHARITABLE PURPOSES | 411 |
|---|--------|
| ADJUSTED NET INCOME | |
| NET INVESTMENT INCOME | |
| REVENUE AND EXPENSES PER BOOKS | 411. |
| DESCRIPTION ACCOUNTING & TAX SERVICES | TOTALS |

FORM 990PF, PART I - OTHER EXPENSES

ATTACHMENT

DESCRIPTION CORPORATE FILING FEES

REVENUE AND EXPENSES PER BOOKS

521.

TOTALS

CHARITABLE PURPOSES 521.

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ATTACHMENT 3 PAGE 20

ATTACHMENT 4

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

1,500,000 SHARES OF WMT STOCK

TOTALS

ENDING BOOK VALUE

ENDING FMV

92,047,500.

92,047,500.

91,950,000. 91,950,000.

THE ROB AND MELANI WALTON FOUNDATION

ATTACHMENT 5

FORM 990PF, PART II - LOANS FROM OFFICERS, DIRECTORS, ETC.

LENDER: S. ROBSON WALTON

ORIGINAL AMOUNT: 10,000,000.

INTEREST RATE:

0.8

DATE OF NOTE:

06/30/2015

MATURITY DATE:

03/30/2016

PURPOSE OF LOAN:

START-UP FUNDS

ENDING BALANCE DUE 10,000,000.

TOTAL ENDING LOANS FROM OFFICERS, DIRECTORS, ETC.

10,000,000.

THE ROB AND MELANI WALTON FOUNDATION

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 6

47-4259772

NAME AND ADDRESS

S. ROBSON WALTON P.O. BOX 1860 BENTONVILLE, AR 72712 4639KO 8418 11/2/2016 11:11:22 AM V 15-7F

THE ROB AND MELANI WALTON FOUNDATION

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

> BENTONVILLE, AR 72712 S. ROBSON WALTON P.O. BOX 1860

PRESIDENT; DIRECTOR 5.00

> P.O. BOX 1860 BENTONVILLE, AR 72712 MELANI WALTON

VICE PRESIDENT; DIRECTOR 5.00

> P.O. BOX 1860 BENTONVILLE, AR 72712 BUDDY PHILPOT

SECRETARY; TREASURER 1.00

> BENTONVILLE, AR 72712 RICHARD CHAPMAN P.O. BOX 1860

ASS'T SECRETARY

ATTACHMENT 7 PAGE 24