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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue ServiceDo not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2015 or tax year beginning

, and ending

Name of foundation Arnold Foundation			A Employer identification number 74-2295878	
Number and street (or P.O. box number if mail is not delivered to street address) 406 Sterzing St		Room/suite	B Telephone number (see instructions) (512) 472-8000	
City or town Austin	State TX	ZIP code 78704		
Foreign country name		Foreign province/state/county	Foreign postal code	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change			C If exemption application is pending, check here ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation			D 1 Foreign organizations, check here ☐ 2 Foreign organizations meeting the 85% test, check here and attach computation ☐	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ☐ \$ 3,819,401		J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)		
			E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
			F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	125,000			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	64	64		
	4 Dividends and interest from securities	53,665	53,665		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	24,822			
	b Gross sales price for all assets on line 6a 351,720				
	7 Capital gain net income (from Part IV, line 2)		24,822		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	1,871	1,871			
12 Total. Add lines 1 through 11	205,422	80,422	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,383			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	724			
	24 Total operating and administrative expenses. Add lines 13 through 23	2,107	0	0	0
	25 Contributions, gifts, grants paid	119,700			119,700
26 Total expenses and disbursements. Add lines 24 and 25	121,807	0	0	119,700	
27 Subtract line 26 from line 12	83,615				
a Excess of revenue over expenses and disbursements		80,422			
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	244,163	346,981	346,981
	2 Savings and temporary cash investments			
	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 ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	2,390,978	2,383,747	3,472,420
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶			
Liabilities	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)	2,635,141	2,730,728	3,819,401
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ☒			
	24 Unrestricted	2,635,141	2,730,728	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ☐			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	2,635,141	2,730,728	
	31 Total liabilities and net assets/fund balances (see instructions)	2,635,141	2,730,728	

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,635,141
2 Enter amount from Part I, line 27a	2	83,615
3 Other increases not included in line 2 (itemize) ▶ Other increases	3	13,272
4 Add lines 1, 2, and 3	4	2,732,028
5 Decreases not included in line 2 (itemize) ▶ ES tax payments	5	1,300
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	2,730,728

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a Capital World Bond Fund Class A	P	12/19/2014	1/12/2015
b Permanent Portfolio Fund	P	12/11/2014	3/31/2015
c Capital World Bond Fund Class A	P	12/20/2013	1/12/2015
d Permanent Portfolio Fund	P	12/31/2013	3/31/2015
e Capital Gains Distributions			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 5,620		5,699	-79
b 7,213		7,213	0
c 192,322		204,474	-12,152
d 90,991		109,512	-18,521
e			55,574

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			-79
b			0
c			-12,152
d			-18,521
e			55,574

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	24,822
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }	3	-79

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	107,150	0	0.000000
2013	102,677	0	0.000000
2012	103,250	0	0.000000
2011	105,267	0	0.000000
2010	102,768	0	0.000000

2 Total of line 1, column (d)	2	0.000000
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.000000
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	3,840,036
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	804
7 Add lines 5 and 6	7	804
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions	8	119,700

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	804
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	0
3	Add lines 1 and 2	3	804
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	804
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1,679
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	6d	
7	Total credits and payments. Add lines 6a through 6d	7	1,679
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	875
11	Enter the amount of line 10 to be Credited to 2016 estimated tax Refunded	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>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</i>		X
c Did the foundation file Form 1120-POL for this year?		X
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 \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>		X
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>	X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) TX		
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 <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	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)? <i>If "Yes," complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	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 within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified 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 application? Website address ▶ N/A	13	X	
14	The books are in care of ▶ Jim Arnold Telephone no ▶ 512-472-8000 Located at ▶ 406 Sterzing Street Austin TX ZIP+4 ▶ 78704			
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 authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	16	Yes	No
				X

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)	Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ No		
(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 ☒ No		
b	If any answer is "Yes" to 1a(1)–(6), did any 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)? Organizations relying on a current notice regarding disaster assistance check here ▶ ☐	1b	N/A
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach statement—see instructions)	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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 2015?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes ☒ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b	N/A
	Organizations relying on a current notice regarding disaster assistance check here	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Jim Arnold, Jr 406 Sterzing Street Austin, TX 78704	President/Director 1 00	0		
Patrice J Arnold 406 Sterzing Street Austin, TX 78704	VP/Sec/Tr/Director 1 00	0		
Julie Arnold 406 Sterzing Street Austin, TX 78704	Director 1 00	0		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000



Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	▶ 0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	3,561,818
b	Average of monthly cash balances	1b	336,696
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,898,514
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,898,514
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	58,478
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,840,036
6	Minimum investment return. Enter 5% of line 5	6	192,002

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6		1	192,002
2a	Tax on investment income for 2015 from Part VI, line 5	2a	804	
b	Income tax for 2015 (This does not include the tax from Part VI)	2b		
c	Add lines 2a and 2b	2c	804	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	191,198	
4	Recoveries of amounts treated as qualifying distributions	4		
5	Add lines 3 and 4	5	191,198	
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	191,198	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	119,700
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		
a	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	119,700
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	804
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	118,896

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				191,198
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 119,700				
a 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				119,700
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
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				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				71,498
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)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
				0
b 85% of line 2a				0
c Qualifying distributions from Part XII, line 4 for each year listed				0
d Amounts included in line 2c not used directly for active conduct of exempt activities				0
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				0
3 Complete 3a, b, or c for the alternative test relied upon				
a "Assets" alternative test—enter				
(1) Value of all assets				0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				0
b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				0
c "Support" alternative test—enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				0
(3) Largest amount of support from an exempt organization				0
(4) Gross investment income				0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

Jim Arnold, Jr

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
AMERICAN CANCER SOC 2433 Ridgepoint Drive B Austin, TX 78754		PC	Medical Research	1,000
AMERICAN DIABETES ASSOC P O Box 1833 Merrifield, VA 22116-8033		PC	Medical Research	1,000
AMERICAN HEART ASSOC P O Box 15186 Austin, TX 78714-3089		PC	Medical Research	1,500
AMERICAN KIDNEY FUND 6110 Executive Boulevard, Suite 1010 Rockville, MD 20852		PC	Medical Research	1,000
AMERICAN LUNG ASSOC 8207 Callaghan Rd, Ste 140 San Antonio, TX 78230		PC	Medical Research	1,500
AMERICAN RED CROSS (Nat'l) P O Box 37243 Washington, DC 20013-7243		PC	Disaster aid	750
AMERICAN RED CROSS (Tex) 2218 Pershing Drive Austin, TX 78723-5842		PC	Disaster aid	1,000
ANDERSON, M D HOSPITAL P O Box 4464 Houston, TX 77210-4464		PC	Medical Research	1,500
ANY BABY CAN 1121 E 7th Street Austin, TX 78702		PC	Support for children	3,000
ASSISTANCE LEAGUE OF AUSTIN		PC	Support for community volunteers	250
AUSTIN CHILDREN'S SHELTER P O Box 684213 Austin, TX 78768-4213		PC	Support for children	2,500
Total See Attached Statement			3a	119,700
b Approved for future payment				
Total			3b	0

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

AUSTIN PETS ALIVE

Street

City	State	Zip Code	Foreign Country
Relationship		Foundation Status	
		PC	
Purpose of grant/contribution			Amount
Animal support			250

Name

AUSTIN SMILES

Street

P O Box 26694

City	State	Zip Code	Foreign Country
Austin	TX	78755-0694	
Relationship		Foundation Status	
		PC	
Purpose of grant/contribution			Amount
Dental support			2,000

Name

BOOKSPRING (fka RIF)

Street

P O Box 15989

City	State	Zip Code	Foreign Country
Austin	TX	78761	
Relationship		Foundation Status	
		PC	
Purpose of grant/contribution			Amount
Reading support			7,500

Name

BOYS AND GIRLS CLUB

Street

303 West Johanna

City	State	Zip Code	Foreign Country
Austin	TX	78704	
Relationship		Foundation Status	
		PC	
Purpose of grant/contribution			Amount
Support for children			3,000

Name

BRIGHTER DAYS

Street

682 Krause Road

City	State	Zip Code	Foreign Country
Pipe Creek	TX	78063	
Relationship		Foundation Status	
		PC	
Purpose of grant/contribution			Amount
Support for children			1,500

Name

CAL FARLEY'S BOYS RANCH

Street

P O Box 1890

City	State	Zip Code	Foreign Country
Amarillo	TX	79174	
Relationship		Foundation Status	
		PC	
Purpose of grant/contribution			Amount
Support for children			1,500

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

CAPITAL AREA FOOD BANK

Street

8201 S Congress Avenue

City

Austin

State

TX

Zip Code

78745-7305

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Hunger Aid

Amount

10,000

Name

CAPITOL SCHOOL OF AUSTIN

Street

2011 W Koenig Lane

City

Austin

State

TX

Zip Code

78756

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Schooling for children

Amount

500

Name

CARE

Street

151 Ellis Street NE

City

Atlanta

State

GA

Zip Code

30303-2440

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Care for children, elderly and pets

Amount

2,500

Name

CARITAS

Street

P O Box 1947

City

Austin

State

TX

Zip Code

78767-1947

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for the poor

Amount

3,000

Name

CHILDREN'S MEDICAL CENTER FOUND

Street

4900 Mueller Blvd

City

Austin

State

TX

Zip Code

78723

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for children

Amount

2,500

Name

CHRISTOPHER HOUSE

Street

4107 Spicewood Springs Rd Ste 100

City

Austin

State

TX

Zip Code

78759

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Hospice services

Amount

1,500

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

COMMUNITIES IN SCHOOL

Street

3000 S IH-35, Suite 200

City

Austin

State

TX

Zip Code

78704

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for schools

Amount

1,500

Name

CYSTIC FIBROSIS RESEARCH

Street

1731 Embarcadero Road, Suite 210

City

Palo Alto

State

CA

Zip Code

94303

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical Research

Amount

1,500

Name

DISABLED AMERICAN VETS

Street

P O Box 14301

City

Cincinnati

State

OH

Zip Code

45250-0301

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Veterans support

Amount

1,500

Name

DOCTORS WITHOUT BORDERS

Street

333 Seventh Avenue, 2nd Floor

City

New York

State

NY

Zip Code

10001-5004

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical support

Amount

1,500

Name

DOWN HOME RANCH

Street

20250 FM 619

City

Elgin

State

TX

Zip Code

78621

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Downs Syndrome Aid

Amount

1,500

Name

EASTER SEALS-AUSTIN

Street

1611 Headway Circle - Building 2

City

Austin

State

TX

Zip Code

78754

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for disabled

Amount

750

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

FAMILY ELDERCARE

Street

1700 Rutherford Ln

City

Austin

State

TX

Zip Code

78754

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for the elderly

Amount

3,500

Name

FOR THE LOVE OF CHRISTI

Street

2306 Hancock Drive

City

Austin

State

TX

Zip Code

78756

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Grief support

Amount

500

Name

FOUNDATION COMMUNITIES

Street

3036 South 1st Street, Suite 200

City

Austin

State

TX

Zip Code

78704

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Homeless support

Amount

3,000

Name

GOODWILL INDUSTRIES

Street

1015 Norwood Park Blvd

City

Austin

State

TX

Zip Code

78753

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Work for disabled

Amount

2,000

Name

HABITAT FOR HUMANITY(NATL)

Street

121 Habitat Street

City

Americus

State

GA

Zip Code

31709-3498

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Housing for the poor

Amount

1,500

Name

HABITAT FOR HUMANITY(AUS)

Street

310 Comal Street, #100

City

Austin

State

TX

Zip Code

78702

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Housing for the poor

Amount

1,500

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

HOSPICE AUSTIN

Street

4107 Spicewood Springs Rd Ste 100

City

Austin

State

TX

Zip Code

78759-8645

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Hospice services

Amount

1,500

Name

HUMANE SOCIETY (AUSTIN)

Street

124 W Anderson Lane

City

Austin

State

TX

Zip Code

78752-1123

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Animal shelter

Amount

300

Name

IMPACT AUSTIN

Street

P O Box 28148

City

Austin

State

TX

Zip Code

78755

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Women's philanthropy

Amount

1,250

Name

KLRU TV

Street

P O Box 7158

City

Austin

State

TX

Zip Code

78713

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Public TV

Amount

150

Name

LIFEWORKS

Street

3700 South 1st Street

City

Austin

State

TX

Zip Code

78704

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Youth support

Amount

1,500

Name

MACULAR DEGENERATION

Street

22512 Gateway Center Drive

City

Clarksburg

State

MD

Zip Code

20871

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical research

Amount

1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

MARCH OF DIMES

Street

1275 Mamaroneck Avenue

City

White Plains

State

NY

Zip Code

10605-5298

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical research

Amount

500

Name

MEALS ON WHEELS

Street

P O Box 6248

City

Austin

State

TX

Zip Code

78762-9989

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Feeding disabled

Amount

3,000

Name

MICHAEL J. FOX FOUNDATION

Street**City****State****Zip Code****Foreign Country****Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical research

Amount

1,000

Name

MOBILE LOAVES AND FISHES

Street

903 S Capital of Texas Hwy

City

Austin

State

TX

Zip Code

78746

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Feeding the homeless

Amount

500

Name

MULT SCLEROSIS-LONE STAR

Street

733 Third Avenue

City

New York

State

NY

Zip Code

10017

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical research

Amount

200

Name

MUSCULAR DYSTROPHY

Street

P O Box 78960

City

Phoenix

State

AZ

Zip Code

85062-8960

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical research

Amount

250

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

NATIONAL STROKE ASSN

Street

9707 East Easter Lane

City

Englewood

State

CO

Zip Code

80112-3747

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical research

Amount

250

Name

NATURE CONSERVANCY

Street

200 E Grayson St

City

San Antonio

State

TX

Zip Code

78215-1270

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Environmental protection

Amount

750

Name

PEOPLE'S COMMUNITY CLINIC

Street

2909 N I H 35

City

Austin

State

TX

Zip Code

78722

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical services for poor

Amount

1,000

Name

PLAN OF CENTRAL TEXAS

Street

2800 South I H 35, Suite 140

City

Austin

State

TX

Zip Code

78704

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Assist with mental health issues

Amount

500

Name

PROJECT HOPE

Street

255 Carter Hall Lane

City

Millwood

State

VA

Zip Code

22646-0255

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Assist with mental health issues

Amount

3,500

Name

SAFEPLACE

Street

P O Box 19454

City

Austin

State

TX

Zip Code

78760

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Battered women's shelter

Amount

4,500

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

SALVATION ARMY

Street

P O Box 1000

City

Austin

State

TX

Zip Code

78767-1000

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for the homeless

Amount

3,500

Name

SEASON FOR CARING (AAS)

Street

PO Box 50066

City

Austin

State

TX

Zip Code

78763-0066

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for poor families

Amount

500

Name

SETTLEMENT HOME

Street

1600 Payton Gin Road

City

Austin

State

TX

Zip Code

78758

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Housing for homeless children

Amount

1,100

Name

ST JUDES HOSPITAL

Street

501 St Jude Place

City

Memphis

State

TN

Zip Code

38105

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Children's health care

Amount

3,000

Name

SUSTAINABLE FOOD CENTER

Street

1106 Clayton Lane, Suite 480W

City

Austin

State

TX

Zip Code

78723

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for local food chain

Amount

1,000

Name

TEXAS CHILDRENS HOSPITAL

Street

6621 Fannin Street

City

Houston

State

TX

Zip Code

77030

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Children's health care

Amount

3,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

THERAPY PET PALS OF TEXAS

Street

3930 Bee Cave Road, Suite 6C

City

Austin

State

TX

Zip Code

78746

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Animal care

Amount

2,000

Name

TRAVIS ASSOC FOR BLIND

Street

P O Box 3297

City

Austin

State

TX

Zip Code

78764-3297

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Assistance to the blind

Amount

600

Name

UMCOR

Street**City****State****Zip Code****Foreign Country****Relationship****Foundation Status**

PC

Purpose of grant/contribution

Alleviate human suffering

Amount

2,500

Name

UNICEF

Street

125 Maiden Lane

City

New York

State

NY

Zip Code

10038

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Alleviate human suffering

Amount

1,000

Name

USO-OPER'N USO CARE PKG

Street**City****State****Zip Code****Foreign Country****Relationship****Foundation Status**

PC

Purpose of grant/contribution

Support for military

Amount

750

Name

VOL HEALTHCARE CLINIC

Street

4215 Medical Parkway

City

Austin

State

TX

Zip Code

78756

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

Medical services

Amount

8,500

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

WATER PROJECT

Street

PO Box 3353

City

Concord

State

NH

Zip Code

03301

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

Provide clean water

Amount

500

Name

YMCA YOUTH FUND

Street

1100 W Cesar Chavez St

City

Austin

State

TX

Zip Code

78703-4603

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

YMCA

Amount

1,500

Name

ANY BABY CAN

Street

1121 E 7th Street

City

Austin

State

TX

Zip Code

78702

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

Support for infants

Amount

250

Name

LESS PRIOR YEAR'S VOIDED CHECKS

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

PF

Purpose of grant/contribution

Voided checks

Amount

-2,650

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization

Arnold Foundation

Employer identification number

74-2295878

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (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

- ☒ 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 totaling \$5,000 or more during the year. ▶ \$ _____

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).

Name of organization Arnold Foundation	Employer identification number 74-2295878
--	---

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Jim Arnold, Jr 406 Sterzing Street Austin TX 78704 Foreign State or Province _____ Foreign Country _____	\$ 125,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization

Arnold Foundation

Employer identification number

74-2295878

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(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
-----	----- ----- ----- -----	\$ -----	-----
(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
-----	----- ----- ----- -----	\$ -----	-----

Name of organization
Arnold Foundation

Employer identification number
74-2295878

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.) ▶ \$ 0
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- ----- For Prov Country		----- ----- -----
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- ----- For Prov Country		----- ----- -----
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- ----- For Prov Country		----- ----- -----
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- ----- For Prov Country		----- ----- -----

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

		Amount		Capital Gains/Losses										Depreciation and Adjustments		or Loss	
Long Term CG Distributions		55,574		Other sales										351,720		326,898	- 24,822
Short Term CG Distributions		0												0		0	0
Description		CUSIP #	Check "X" to include in Part IV	Purchaser	Check "X" if Purchaser is a Business	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Valuation Method	Expense of Sale and Cost of Improvements	Depreciation	Adjustments	Net Gain or Loss		
1	Capital World Bond Fund Class	140541103	X			P	12/19/2014	11/2/2015	5,620	5,699					-79		
2	Permanent Portfolio Fund	714199106	X			P	12/11/2014	3/31/2015	7,213	7,213					0		
3	Capital World Bond Fund Class	140541103	X			P	12/20/2013	11/2/2015	192,322	204,474					-12,152		
4	Permanent Portfolio Fund	714199106	X			P	12/31/2013	3/31/2015	90,991	109,512					-18,521		
5															0		

Part I, Line 11 (990-PF) - Other Income

		1,871	1,871	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	Refund of Raymond James fees	1,871	1,871	

Part I, Line 16b (990-PF) - Accounting Fees

		1,383	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Accounting fees	1,383			0

Part I, Line 23 (990-PF) - Other Expenses

		724	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Bank charges	78	0		
2	Publications	100	0		
3	Foreign taxes - Raymond James	124	0		
4	Foreign taxes - Wells Fargo	422	0		

Part II, Line 10b (990-PF) - Investments - Corporate Stock

		2,390,978	2,383,747	3,673,042	3,472,420
		Book Value	Book Value	FMV	FMV
		Beg of Year	End of Year	Beg of Year	End of Year
Description		Num Shares/ Face Value			
1	Raymond James Capital Access Account	756,226	771,348	1,276,052	1,214,119
2	Vanguard Account	472,568	489,773	747,786	741,216
3	Wells Fargo Account	1,158,280	1,122,626	1,645,300	1,517,085
4	Prior year adjustment	3,904		3,904	

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

		Amount												
Long Term CG Distributions		55,574												
Short Term CG Distributions		0												
	Description of Property Sold	CUSIP #	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed	Adjustments	Cost or Other Basis Plus Expense of Sale	Gain or Loss	FMV as of 12/31/69	Adjusted Basis as of 12/31/69	Excess of FMV Over Adjusted Basis	Gains Minus Excess FMV Over Adj Basis or Losses
1	Capital World Bond Fund Class	140541103	P	12/19/2014	1/12/2015	5,620			5,699	-79	0	0	0	-79
2	Permanent Portfolio Fund	714199106	P	12/11/2014	3/31/2015	7,213			7,213	0	0	0	0	0
3	Capital World Bond Fund Class	140541103	P	12/20/2013	1/12/2015	192,322			204,474	-12,152	0	0	0	-12,152
4	Permanent Portfolio Fund	714199106	P	12/31/2013	3/31/2015	90,991			109,512	-18,521	0	0	0	-18,521

Part VII-A, Line 10 (990-PF) - Substantial Contributors

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country
1	Jim Arnold, Jr		406 Sterzing Street	Austin	TX	78704	

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Name		Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
1	Jim Arnold, Jr		406 Sterzing Street	Austin	TX	78704		President/Director	1 00	0	0	0
2	Patrice J Arnold		406 Sterzing Street	Austin	TX	78704		VPSec/TriDirector	1 00	0	0	0
3	Julie Arnold		406 Sterzing Street	Austin	TX	78704		Director	1 00	0	0	0

Part VI, Line 6a (990-PF) - Estimated Tax Payments

	Date		Amount
1 Credit from prior year return	5/15/2015	1	379
2 First quarter estimated tax payment	5/7/2015	2	325
3 Second quarter estimated tax payment	6/10/2015	3	325
4 Third quarter estimated tax payment	9/1/2015	4	325
5 Fourth quarter estimated tax payment	12/1/2015	5	325
6 Other payments		6	
7 Total		7	1,679