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Form **990-PF** 

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052

	artment of the Treasury	Do not enter social security nu on about Form 990-PF and its	imbers on this form senarate instruction	n as it may be ma ons is at <i>WWW.lr</i> S	ide public. .gov/form990pf.	Open to Public Inspection
_	calendar year 2015 or tax year beginning	DEC 23, 201			DEC 31, 2015	Open to rubile mapacuan
Nar	ime of foundation		<del></del>		A Employer identification	number
Α	ARNOLD, ROGERS & SMI	TH FAMILY				
F	FOUNDATION				81-0902956	
	mber and street (or P.O. box number if mail is not de	livered to street address)		Room/suite	<b>B</b> Telephone number	
	P.O. BOX 688	<del></del>			501-758-65	65
	ty or town, state or province, country, and ZII				C if exemption application is pe	anding, check here
_	ORTH LITTLE ROCK, A		<del>,-,,</del>			
G	Check all that apply: X Initial return		turn of a former publ	lic charity	D 1. Foreign organizations	, check here
	Final return				Foreign organizations me- check here and attach co-	eting the 85% test.
<u></u>	Address ch Check type of organization: X Section	ange Name ch n 501(c)(3) exempt private foun				
	Section 4947(a)(1) nonexempt charitable	,			E If private foundation stat under section 507(b)(1)	
l Fa	air market value of all assets at end of year	J Accounting method:		Accrual	F If the foundation is in a 6	• •
	from Part II, col (c), line 16)	Other (specify)			under section 507(b)(1)	
•	<b>1</b> ,000,000.	(Part I, column (d) must be	on cash basis)			(-),
Pa	art [ Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), an	d (d) may not		et investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a	(axpelises per		ıncome	income	(cash basis only)
	1 Contributions, gifts, grants, etc., recei	ved 1,000,	000.		N/A	
	2 Check I if the foundation is not required to	attach Sch B			·	
	3 Interest on savings and temporary cash investments	<u> </u>				
	4 Dividends and interest from securities	' <del> </del>				
	5a Gross rents	ļ	<del></del>			
	Net rental income or (loss)					
ue	62 Net gain or (loss) from sais of assets not on Gross sales price for all RECEIV assets on line 6a	FD T				
Revenue	7 Capital gain net income (from Part IV, line 2)	77		0.		
æ	8 Net short-termochoitayon 2 5	2016 0	·			<del></del>
	9 Income modifications					
	10a and allowances					
	b Less Cost o goods saw GUEN,	UI				
	c Gross profit or (loss)					
	11 Other income	1,000,	000	0.		<del></del>
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees		0.1	0.		0.
	14 Other employee salaries and wages	, etc	<del></del>			<del></del>
	15 Pension plans, employee benefits	\ <del></del>				<del></del>
ses	16a Lenal fees	<del> </del>	<del></del>		<del></del>	<del></del>
Expens	b Accounting fees					
Ä	c Other professional fees					
ĕ.	17 Interest					
and Administrative	18 Taxes					
īnis	19 Depreciation and depletion			· · · · · · · · · · · · · · · · · · ·		
Ę	20 Occupancy				<del></del>	<del></del>
ΔĀ	21 Travel, conferences, and meetings	<u> </u>				
an	22 Printing and publications P 23 Other expenses	<del></del>		<del></del>	<del> </del>	<del></del>
Operating	P 23 Other expenses 24 Total operating and administrative		<del></del>			
era	expenses. Add lines 13 through 23		0.	0.		0.
Ö	25 Contributions, gifts, grants paid		0.	<u>`</u>		0.
	26 Total expenses and disbursements.		<del></del>		<del></del>	
_	Add lines 24 and 25	L	0.	0.		0.
	27 Subtract line 26 from line 12:					
	a Excess of revenue over expenses and disbu		000.			L
	b Net Investment Income (if negative, ent			0.		
5025	c Adjusted net income (if negative, enter				N/A	
11-2	501 24-15 LHA For Paperwork Reduction Ac	it Notice, see Instructions.				Form <b>990-PF</b> (2015)

## ARNOLD, ROGERS & SMITH FAMILY

81-0902956 Form 990-PF (2015) FOUNDATION Page 2 Balance Sheets Attached schedules and amounts in the description column should be for end of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1,000,000. 1,000,000. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less; allowance for doubtful accounts 4 Piedges receivable ► Less; allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable 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 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 1,000,000. 1,000,000. instructions. Also, see page 1, item I) 0. 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 22 Other liabilities (describe 0. 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted  $\triangleright X$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 0. 27 Capital stock, trust principal, or current funds Ō. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 1,000,000. Ō. 29 Retained earnings, accumulated income, endowment, or other funds 1,000,000 30 Total net assets or fund balances 0. 0. 1,000,000. 31 Total liabilities and net assets/fund balances 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) 1,000,000. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 3 1,000,000. 4 Add lines 1, 2, and 3

Form 990-PF (2015)

5 Decreases not included in line 2 (itemize)

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

81-0902956

Page 3

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>6</b> ) i	How acquired - Purchase - Donation	(c) Date (mo.,	e acquired day, yr.)	(d) Date sold (mo., day, yr.)	
1a								
b NO	NE	<u>,</u>				ļ		
<u>c</u>				├		<b>}</b> -		
<u>d</u>	<del></del>		· · · · · · · · · · · · · · · · · · ·	├		<del> </del>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		it or other basis xpense of sale	<u></u>	<del></del>		Gain or (loss us (f) minus	
a		<del></del>						<del></del>
b	<del> </del>	_						
C								
d								· · · · · · · · · · · · · · · · · · ·
<u>e</u>	<u> </u>		10/01/00					<del></del>
Complete only for assets show	ng gain in column (h) and owned t						(Col. (h) gain t not less tha	
(I) F.M.V. as of 12/31/69	(i) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any		<del></del>	Losse	s (from col. (	h))
<u>.a</u>	ļ			}				
<u>b</u>	<del> </del>	<del></del>		{	<del></del>			
d	<del></del>		<del></del>	{				
- <del></del>	{ 	<del></del>	<del> </del>					
<del></del>			<del></del>	<del>-</del> -				
2 Capital gain net income or (net c	apital loss) If gain, also en If (loss), enter	nter in Part I, line -0- in Part I, line	7	}	2			
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8		and (6):		J				
If (loss), enter -0- in Part I, line 8			- <del> </del>		3	<del> </del>		
\ <del></del>	Inder Section 4940(e) f					ncome		
(For optional use by domestic privat	e foundations subject to the section	on 4940(a) tax on	net investment i	ncom	e.)			N/A
If section 4940(d)(2) applies, leave	this part blank.							
Was the foundation liable for the sec	ation 4042 tay on the distributable	amount of any w	oar in the base no	rind?				Yes No
If "Yes," the foundation does not qua			•	nou :				[ 165 [ 140
	each column for each year; see th			entries	S.		<del></del>	<del> </del>
(a) Base period years Calendar year (or tax year beginn	(b)		<del></del>	(c)	(c) Distribution ratio (col. (b) divided by col. (c			(d) bution ratio vided by col. (c))
2014	<u> </u>		<del></del>					
2013								
2012								
2011			<u> </u>					
2010								
2 Total of line 1, column (d)						2		
3 Average distribution ratio for the		tal on line 2 by 5,	or by the number	r of ye	ears			
the foundation has been in existe	ence if less than 5 years					3	<del>-}</del>	
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5					4		<del> </del>	
5 Multiply line 4 by line 3								
6 Enter 1% of net investment income (1% of Part I, line 27b)								
7 Add lines 5 and 6						7		
8 Enter qualifying distributions fro	m Part XII, line 4					8		
	n line 7, check the box in Part VI,	line 1b, and comp	plete that part using	ng a 1	% tax rate.			

# ARNOLD, ROGERS & SMITH FAMILY FOUNDATION

Part VII   Excise Tax Based on Investment Income (Section 4940(6), 4940(6), or 4940(6), or 4948 - see instructions)   1a Exempt operating foundations described in section 4940(6)(2, check here   Image: An advantage of the Investment of the Internation letter   (attach cuty of letter if necessary - see instructions)   1a Commission foundations described in section 4940(6)(2, check here   Image: An advantage of the Investment of the Internation (Internation)   1b Commission foundations the Internation of the Internation of In	ARNOLD, ROGERS & SMITH FAMIL	ΥY	01 0000			
14 Exercis operating foundations described in section 4940(ii)2), check here	Form 990-PF (2015) FOUNDATION	0.10/3. 10.10/3. 10.10/3.				
Date of fulling or determination letter: [ (attach copy of letter if inecessary-see lastructions) of Part I, line 27b.  A di Obert domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 1% of Part I, line 12, cb. (b).  2 Aud other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cb. (b).  2 Tax under section 511 (domestic section 4947(a)(1) frusts and laxable foundations only. Others enter -0-)  3 Add lines 1 and 2  3 O.  4 O.  5 Subhite A (increase) tax (domestic section 4947(a)(1) frusts and taxable foundations only. Others enter -0-)  5 I ax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0-  5 Credits Pyremists:  4 2015 estimated tax payments and 2014 oversyment credited to 2015  5 Exempt foreign organizations – tax withheld at source  6 December 1 Total credits and payments. Add lines 5 abrough 66  6 Exempt foreign organizations – tax withheld at source  7 Total credits and payments. Add lines 5 abrough 66  8 Enter any penalty for underpayment of estimated tax. Check here I of Form 2220 is attached  8 Enter any penalty for underpayment of estimated tax. One of the form 220 is attached  9 Total credits and payments. Add lines 5 and 6, enter amount owed  10 Overpayment. If files 7 is more than the total of lines 5 and 6, enter the amount overpald  11 Tester the amount of line 10 to the Credited to 2015 estimated tax. Penalty is the company of the certification of the certification of the activities and copies of any materials published or distributed by the foundation attempt to influence any penalty is the certification of the certification of the activities and copies of any materials published or distributed by the foundation attempt to influence description of the activities and copies of any materials published or distributed by the foundation managers. So O.  9 Enter the reimbursement (if any) paid by the foundation during the year?  10 The the reimbursement (if any) paid by the foundation durin			4948 - see	instru	ctior	1S)
b Domestic foundations that met the section 4940(e) requirements in Part V, check here ▶ and enter 1% of Part I, line 127.  c All other domestic foundations enter 2% of lea 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (comestic section 4947(a)(1) husis and taxable foundations only. Others enter -0-)  3 O.  3 O.  4 Subtrie A (income) tax (domestic section 4947(a)(1) husis and taxable foundations only. Others enter -0-)  4 O.  5 Tax based on Investment Income. Subtract line 4 from line 3. It zero or less, enter -0-  6 CredeSt-Payments:  2 2015 estimated tax payments and 2014 overpayment credited to 2015  5 Exempt foreign organizations - tax withheld at source  6 Tax paid with application for extension of limit to life (Form 888)  6 Beckup withholding erraneously withhold  7 Total credits and jayments. Add lines 6a through 6d  8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is statished  8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is statished  8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is statished  9 O.  10 Overpayment, life if it is more than the total of lines 3 and 6, enter the amount overpaid  11 Enter the amount of line 10 to be: Credited to 2016 estimated tax. ►  12 Durng the tax year, did the foundation attempt to influence any anitional, statis, or local epislation or did it participate or internet in any optical company of the categorical pack of the company of the categorical pack of the company of the categorical pack of the categorical pack of the categorical pack of the company of the categorical pack of the categorical pack of the activates  1 Did the foundation like form 1122-90. Line they was of the activates  2 Did the foundation like form 1122-90. Line they was?  1 If the same in the state of the categorical pack of the activates  2 Did the foundation have our neckated business pross income of \$1,000 or more during the year?  1 If the			1 1			
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a All other domestic foundations enter 2% of the 27b. Exempt foreign organizations enter 4% of Part I, lime 12, cot. (b).  2		► L and enter 1%	1-1-			<u> </u>
2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		. 40% - 4 B 1 1 10 1 (b)	1 1			
3 0.4 Subtile A (income) tax (domestic section 4947(s)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 CondisPayments; 2 2015 estimated tax payments and 2014 overpayment credited to 2015 6 Exempt foreign organizations - tax withheld at source 7 Tax paid with application for reteason of time to the (Form 8868) 6 Exits and payments. Add lines 5a through 6d 6 Exited any penalty for undergayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax dae, if the total of incer 5 and 8 is more than line 7, enter amount ower paid 11 Enter the amount of line 10 to be; Credited to 2016 estimated tax. ► 9 0 0. 10 Overpayment if life 7 is more than the total of lines 5 and 6, enter the amount overpaid 11 Enter the amount of line 10 to be; Credited to 2016 estimated tax. ► 11 19 Part VIII-A 1 15 Total credits and tax payments. Statements Regarding Activities 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or miteriven in any political campalgin? 16 Did is spean dimore than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 17 If the answer is "Yes" to 1a or 1b, attent a defended description of the activities and copies of any materials published or distributed by the foundation on connection with the activities 2 bid the foundation file Form 1120-POL for this year? 18 If the answer is "Yes" to 1a or 1b, attent a defended description of the activities and copies of any materials published or distributed by the foundation on connection with the activities 2 bid the foundation file Form 1120-POL for this year? 2 If yes, Teach a detailed description, dissocition, or substantial contraction during the year? 3 If yes, Teach it is distanced to the substantial contraction during the year? 3 If						Λ
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5 Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0-6 6 Crodis/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations - tax withhold at source 1 Tax paid with application for extension of line to file (Form 856B) 6 Backur withholding arroneously withhold 7 Total credits and payments. Add lines 6 attrough 6d 8 Enter any penalty for undergyment of estimated tax. Check here ☐ If Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount own 10 Overgayment, life in 2 is more than the total of limes 5 and 8, enter the amount own with the 10 bits. For lines 5 and 8, enter the amount own with the 10 bits. Credited to 2016 estimated tax ►    Part VII-A   Statements Regarding Activities   11 Eiter the amount of line 10 bits. Credited to 2016 estimated tax ►   Part VII-A   Statements Regarding Activities   12 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?   12 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?   13 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?   14 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?   14 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?   15 Did it septimates are set (established according to the activities   15 Did the foundation file form 1120-Pol. for this year?   16 Life the amount (if any) of tax on political expenditures (section 4955) imposed during the year?   16 Life the amount (if a		ly Others enter -0-)	<del></del>			
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d Backup withholding erroneously withhold 7 Total credits and payments. Add lines 5a at through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment, if filen 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    Part VII-A   Statements Regarding Activities 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 campalign? 1b Uld it spend more than \$100 during the year (either directly) for political purposes (see instructions for the definition)? 1b Uld it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? 1b Uld it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? 1b Uld it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? 1c Uld it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? 1c Uld the foundation file Form \$112-POL for this year? 1c Uld the foundation in \$100 during the year (either directly) or political expenditure tax imposed on foundation managers. ▶ \$ 0. 2 Has the foundation \(\textit{\textit			1 1			
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due, if the fotal of lines 5 and 6 is more than an line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 11 Enter the amount of line 10 to be; Credited to 2016 estimated tax >	•	<del></del>	1 1			
8 Enter any penalty for underpayment of estimated tax. Check here	·		7 7 1			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    Part VII-A   Statements Regarding Activities   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?   b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?   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   c Did the foundation like Form 1120-P0L for this year?   d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.   (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0.     2 Has the foundation engaged in any activities that have not previously been reported to the IRS?   if "Yes," attach a detailed description of the activities   3 Has the foundation have unrelated business gross income of \$1,000 or more during the year?   3 Has the foundation have unrelated business gross income of \$1,000 or more during the year?   1 "Yes," attach the statement required by General Instruction 7.   4 Was there a liquidation, termination, dissolution, or substantial contraction during the year?   1 "Yes," attach the statement required by General Instruction 7.   4 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:   8 By language in the governing instrument, or   9 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, or   1 Wes, "attach the governing instrument, or   1 Wes, "attach explanation   1 Wes, "attach exp	<del></del>	attached	<del></del>			
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Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  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?  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  Enter the states to which the foundation reports or with which it is registered (see instructions)  AR  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  Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their pames and addresses  STMT 1 10 X	•	year?	NT / A			
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AR  By Identify 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  By 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  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 during the tax year? If "Yes," complete Part XIV  In Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 1  Are the requirements of section 4945 (satisfied either:  By Is the foundation that effectively amends the governing instrument, or  By 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  By It was a state and addresses STMT 1  By It was "attach a schedule listing their names and addresses STMT 1		cai :		-		<del></del> -
<ul> <li>By language in the governing instrument, or</li> <li>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?</li> <li>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</li> <li>Ba Enter the states to which the foundation reports or with which it is registered (see instructions)</li> <li>AR</li> <li>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</li> <li>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</li> <li>Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses</li> <li>STMT 1</li> <li>X</li> </ul>		ed either			1	
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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  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  AR  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  STMT 1  10 X		,		6	х	
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year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses  STMT 1  10 X	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
	- · · · · · · · · · · · · · · · · · · ·		lendar			
			amı - 4		ا۔۔۔۔ا	X
	10 Did any persons become substantial contributors during the tax year? If "Yes " attach a so	chedule listing their names and addresses				(0045)

ARNOLD, ROGERS & SMITH FAMILY FOUNDATION 81-0902956 Form 990-PF (2015) Page 5 Part VII-A | Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of Х section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? X 12 If "Yes," attach statement (see instructions) 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address N/A Telephone no. ▶ 501-758-6565 14 The books are in care of THE FOUNDATION ZIP+4 ▶72115 Located at ▶ P.O. BOX 688, NORTH LITTLE ROCK, AR 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in heu of Form 1041 - Check here **▶**| 15 | N/A and enter the amount of tax-exempt interest received or accrued during the year Yes No 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, 16 X 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 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly); Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception, Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A1b 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 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 X 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 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? If "Yes," list the years 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 N/A 2b statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2015)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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4a

X

	·	1	1 /	1
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none	, enter "NONE."	<del></del>	
(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 deterred compensation	(e) Expense account, othe allowances
NONE				
	7	}	}	
<del></del>		{	[	
		1	ļ .	
	7	ļ.	]	
	7	}	1	ł
Total number of other employees paid over \$50,000				

# ARNOLD, ROGERS & SMITH FAMILY

Form 990-PF (2015) FOUNDATION		0902956 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Ma Paid Employees, and Contractors (continued)	nagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(2)	~ <del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</del>
		<del></del>
<del></del>		<del></del>
······································		
Total number of others receiving over \$50,000 for professional services	<del></del>	<b>•</b> (
Part IX-A   Summary of Direct Charitable Activities	<del></del>	<del></del>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informa number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	tion such as the	Expenses
		<del></del>
IN/A		
, <del></del>		<del> </del>
2		
	<del></del>	<del></del>
3		
	· · · · · · · · · · · · · · · · · · ·	
·	<del></del>	
Part IX-B Summary of Program-Related Investments	<del></del>	<del></del>
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		
		<del></del>
Total. Add lines 1 through 3		0
		Form <b>990-PF</b> (2015

	m 990-PF (2015)	81-0902956	Page 6
LF	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, 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	0.
ŧ	Average of monthly cash balances	16 500	,000.
(	Fair market value of all other assets	1c	
(	Total (add lines 1a, b, and c)	1d 500	,000.
•	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d		,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		,500.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 492	,500.
6	Minimum Investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	607.
E	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
<del>-</del>	foreign organizations check here  and do not complete this part.)	T - T	607
1	Minimum investment return from Part X, line 6	1 1	607.
	Tax on investment income for 2015 from Part VI, line 5	{	
t	<u></u>	1 . 1	٥
	Add lines 2a and 2b	2c	0. 607.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	607.
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	607.
Ľ	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
ŧ	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1 1a	0.
l	Program-related investments - total from Part IX-B	1b	0.
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:		
;	Suitability test (prior IRS approval required)	3a	
Į	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	0.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	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.		

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1 Distributable amount for 2015 from Part XI,				607.
line 7				007.
2 Undistributed Income, if any, as of the end of 2015			0.	
a Enter amount for 2014 only		<u>-</u>	0.	
<b>b</b> Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
<del></del>	0.			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from Part XII, line 4; ►\$ 0.				
· · · · · · · · · · · · · · · · · · ·			0.	
a Applied to 2014, but not more than line 2a			U •	
<b>b</b> Applied to undistributed income of prior		0		
years (Election required - see instructions)	-	0.		
c Treated as distributions out of corpus	^			
(Election required - see instructions)	0.	'		
d Applied to 2015 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.	İ		0.	
f Undistributed income for 2015, Subtract				·
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				607.
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)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014	ļ			
e Excess from 2015				

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Part XIV   Private Operating Fo		structions and Part VII	·A. question 9)	N/A	304330
1 a If the foundation has received a ruling or		· · · · · · · · · · · · · · · · · · ·	7.1, 440011011 0)	**/	
foundation, and the ruling is effective for					
<b>b</b> Check box to indicate whether the found	*	=	n section	4942(j)(3) or	4942())(5)
	Tax year	ly louiluation described i	Prior 3 years	1 4342())(3) 01	1042())(0)
2 a Enter the lesser of the adjusted net	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4)2010	(8)2014	(4)20.0	(0,000	(-,
investment return from Part X for					
each year listed	<del></del>		<del></del>	<del> </del>	<del></del>
<b>b</b> 85% of line 2a				<b>-</b>	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		ļ			<u> </u>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	<u> </u>				
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed			İ		
c "Support" alternative test - enter:			· · · · · · · · · · · · · · · · · · ·		
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)				· [	
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		·			
an exempt organization					
(4) Gross investment income			<u> </u>		
Part XV   Supplementary Info	rmation (Comple	ete this part only	if the foundatio	n had \$5,000 or	more in assets
at any time during t				•	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh		than 2% of the total con	ributions received by th	e foundation before the	close of any tax
year (but only if they have contributed n			·		
NONE					
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large por	tion of the ownership of	a partnership or
	s a 10/6 of greater intere				
NONE			· · · · · · · · · · · · · · · · · · ·		
2 Information Regarding Contribut					navianta fau firmala. If
Check here <b>X</b> if the foundation of the foundation makes gifts, grants, etc.					
	<u> </u>	<del></del>			und u,
a The name, address, and telephone num	uer or e-mail address of	ше регоон ю мнош арр	ications should be addr	caacu.	
b The form in which applications should be	e submitted and informa	ation and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable fields	, kınds of ınstıtutions. o	r other factors:	

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Grants and Contributions Paid During th	ne Year or Approved for Future P	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	<u></u>	
Paid during the year				
NONE				
NONE				
			•	
			<del></del>	
	1			
	i			
Total			<b>▶</b> 3a	
b Approved for future payment				
NONE				
NONE	}			}
				}
		<u> </u>		
	i i			
Total	· · · · · · · · · · · · · · · · · · ·		<b>▶</b> 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			Excluded by section 512, 513, or 514				
enter gross amounts unless otherwise mulcated.	(a)	(b)	(C) Exclu-	(d)	(e) Related or exempt			
4 December consider accounts	Business	Amount	SION	Amount	function income			
1 Program service revenue:	code		code	,,,,,,	101101101111101110			
<u> </u>			ļ					
b			<u> </u>					
C			<u> </u>					
d								
e								
1			_					
g Fees and contracts from government agencies								
2 Membership dues and assessments								
3 Interest on savings and temporary cash		<del></del>						
investments								
4 Dividends and interest from securities								
5 Net rental income or (loss) from real estate:	}							
a Debt-financed property	<del></del>		-					
	<del></del>	<del> </del>	-					
b Not debt-financed property			<del> </del>		<del></del>			
6 Net rental income or (loss) from personal	1 1		1	,				
property	<b></b>		<b> </b>					
7 Other investment income	<b> </b>		Ь					
8 Gain or (loss) from sales of assets other	1 1							
than inventory		<u> </u>	<u> </u>					
9 Net income or (loss) from special events	L		<u> </u>					
10 Gross profit or (loss) from sales of inventory			<u> </u>					
11 Other revenue;			1					
a								
b								
С								
d								
e								
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.			
13 Total. Add line 12, columns (b), (d), and (e)				13	0.			
(See worksheet in line 13 instructions to verify calculations.)								
Part XVI-B Relationship of Activities	to the Accou	mplishment of Fy	amr	ot Purnoses				
Telationship of Activities	to the Accor	inpliatinient of Ex	· · · · ·	ot i di poses				
Line No. Explain below how each activity for which inco			contri	buted importantly to the accor	nplishment of			
the foundation's exempt purposes (other than	by providing fund	is for such purposes).						
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Part XVII			fore To e	nd Transactions a	nd Polations	hine With Nonch		age 10
Part AVII	Exempt Organi		siers io a	inu Transactions a	inu neiations	nips with Noticin	aritable	
1 Did the ord			f the following	g with any other organization	n described in secti	on 501(c) of	Yes	No
				7, relating to political organ		o., oo .(o, o.		
	from the reporting founda							
(1) Cash	Total tale reporting realise		no anomprove	,			1a(1)	x
(2) Other	assets						1a(2)	X
b Other trans							1-(-/	<del> </del>
	of assets to a noncharital	ble exempt organizati	.on				16(1)	x
• •	ases of assets from a nor						1b(2)	X
` '	l of facilities, equipment,	•	<b>3</b>				1b(3)	X
· ·	oursement arrangements						1b(4)	X
	or loan guarantees						1b(5)	X
• •	mance of services or me	mbership or fundrais	ing solicitatio	ns			1b(6)	X
c Sharing of	facilities, equipment, ma	iling lists, other asset	s, or paid em	ployees			1c	X
_				dule. Column (b) should al	ways show the fair n	narket value of the goods	, other assets,	
				ed less than fair market valu				
column (d	) the value of the goods,	other assets, or servi	ces received.					
(a)Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, an	d sharing arranger	ments
			N/A					
						<u> </u>		
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						· -		
						*******		
ın section	501(c) of the Code (othe	r than section 501(c)	-	or more tax-exempt organ tion 527?	izations described		Yes [	X No
	omplete the following sch			(h) Type of prespiration	1	(c) Description of relation	nchin	
-	(a) Name of org	Janization -		(b) Type of organization	<del> </del>	(c) Description of relation	istrih	
	N/A				<del> </del>	·		
					<del> </del>			
	<del></del>							
								<del></del>
Under	penalties of periury, 1 declare	that I have examined the	s return, includir	l ng accompanying schedules and	d statements, and to the	best of my knowledge		
Sign and be	elust it is true, correct, and co	oplete Beclaration of pr	eparer (other tha	in taxpayer) is based on all infor	mation of which prepare	r has any knowledge	May the IHS discus	oarer
Here	la le 3	1 )		105/10/201	A SECRE	rary/dir	xhown below (see	
	nature of officer or trustee	· · · · · · · · · · · · · · · · · · ·		Date	Title		LALITES L	No
	Print/Type preparer's na		Preparer's s		Date	Check   if PTII	V	
		<del>-</del>	,	_		self- employed		
Paid	MICHELLE M	(ANN	m	cheler man	05/09/16	' ' 1	0106448	3
Preparer	Firm's name ▶ JPM		LC	7	1-0,00,20	Firm's EIN ▶ 20 -		
Use Only	I mironamo Pozz							
	Firm's address ▶ 11	300 CANTR	ELL RO	AD, SUITE 30	)1			
		TTLE ROCK		•	- <del>-</del>	Phone no. 501-	227-580	0
			<u> </u>	<del> </del>			Form <b>990-P</b>	

### 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.lrs.gov/form990 .

OMB No 1545-0047

Employer identification number

Name of the organization ARNOLD, ROGERS & SMITH FAMILY

FOUNDATION

81-0902956

Organization type (check one):						
Filers of	:	Section:				
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
		covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1. Complete Parts I and II.				
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.				
	year, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., 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).

LHA 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)

Name of organization ARNOLD, ROGERS & SMITH FAMILY FOUNDATION

Employer Identification number

81-0902956

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	ARNOLD ELECTRIC COMPANY, INC.  3716 HAROLD STREET  NORTH LITTLE ROCK, AR 72118	\$\$	Person X 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.)		

Name of organization

ARNOLD, ROGERS & SMITH FAMILY
FOUNDATION

Employer identification number

81-0902956

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	

Employer identification number

ARNOLD, ROGERS & SMITH FAMILY

FC	UN	Δח	mΤ	$\cap N$	
T. C	/UIN	ᄱ	1 1	$\Delta TA$	

FOUNDA	TION	ributions to organizations described in sec	tion 501(c)(7), (8), or (10) that total more than \$1,000 for		
Part III	the year from any one contributor. Complete of	olumns (a) through (e) and the following by	16 60trV. For organizations		
	completing Part III, enter the total of exclusively religious	s, charitable, etc., contributions of \$1,000 or less for	the year (Enterthis info once) > \$		
	Use duplicate copies of Part III if addition	al space is needed.			
(a) No. from	(h) Burnoss of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	(b) Purpose of gift	(c) Ose of gift	(a) Description of now gire is not		
] '					
	· · · · · · · · · · · · · · · · · ·	(e) Transfer of gift			
		(2, 332, 32, 32, 32, 32, 32, 32, 32, 32,			
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
-	, , , , , , , , , , , , , , , , , , , ,		·		
1.	M				
	***************************************				
(a) No.					
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Farti					
-		(a) Tunnefer of eiff	<u> </u>		
		(e) Transfer of gift			
		17ID 4	Detaile a chia ed hacardones ha hacardones		
-	Transferee's name, address, a	1d ZIP + 4	Relationship of transferor to transferee		
	<del> </del>				
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		<del></del>			
(a) No.					
from I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	<del></del>				
1					
			•		
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	(e) Transfer of gift				
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
1			<del></del>		
(a) No		<u> </u>	<del></del>		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	(,	(3, 5 = 2 + 3.11	(1)		
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		<del></del>			
L					
	(e) Transfer of gift				
1					
L	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
1					
1					

	UBSTANTIAL CONTRIBUTORS T VII-A, LINE 10	STATEMENT	1
NAME OF CONTRIBUTOR	ADDRESS		
ARNOLD ELECTRIC COMPANY, INC.	3716 HAROLD STREET NORTH LITTLE ROCK, AR 7	2118	

	I - LIST OF OFFICERS, I		STATI	EMENT 2
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
W.W. ARNOLD, JR. P.O. BOX 688 NORTH LITTLE ROCK, AR 7212	PRESIDENT/DIRE 0.00	ECTOR 0.	0.	0.
SHARON ARNOLD P.O. BOX 688 NORTH LITTLE ROCK, AR 7212	DIRECTOR 0.00	0.	0.	0.
JONATHAN T. ROGERS P.O. BOX 688 NORTH LITTLE ROCK, AR 7212	SECRETARY/DIRE 0.00	ECTOR 0.	0.	0.
RACHEL ROGERS P.O. BOX 688 NORTH LITTLE ROCK, AR 7213	DIRECTOR 0.00	0.	0.	0.
CAROLE SMITH P.O. BOX 688 NORTH LITTLE ROCK, AR 7212	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF	PAGE 6, PART VIII	0.	0.	0.