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OMB No 1545-0052

Form 990-PF

Department of the Treasury

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.

Open to Public ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. Internal Revenue Service Inspection For calendar year 2015, or tax year beginning 06-01-2015 , and ending 05-31-2016 A Employer identification number Name of foundation Grant T White Foundation 71-0561239 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) (479) 788-4353 **C** If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code Fort Smith, AR 72902 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return A mended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Address change Name change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 1,161,133 Part I **Analysis of Revenue and Expenses** Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per necessarily equal the amounts in column (a) (see (b) (c) income purposes income books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 2 Check F 7 if the foundation is **not** required to attach 3 Interest on savings and temporary cash investments 37 37 13.62 13.625 Dividends and interest from securities 4,889 4,889 Gross rents 5a Net rental income or (loss) _ b Net gain or (loss) from sale of assets not on line 10 454,985 6a Revenue b Gross sales price for all assets on line 6a 607,336 454,985 Capital gain net income (from Part IV, line 2) . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . b Gross profit or (loss) (attach schedule) . c 79 Other income (attach schedule) 11 Total. Add lines 1 through 11 473,615 473,615 2,23 559 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Expenses 忉 609 Legal fees (attach schedule). 609 16a 殂 1,866 1,866 Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . 忉 8,025 8,025 C Operating and Administrative **17** 2 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Occupancy 21 Travel, conferences, and meetings. 22 Printing and publications . . 囪 9.719 210 9,929 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. Add lines 13 through 23 23.606 19.422 3.244 62,400 62,400 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 86,006 19,422 65,644 25

Subtract line 26 from line 12

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

27

a

454,193

387,609

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) DOOK value	(D) DOOK Value	(e) i all market value
	2	Savings and temporary cash investments	49,602	32,786	32,786
	3	Accounts receivable	,	,	
	,	Less allowance for doubtful accounts -			
	4	Pledges receivable			
	7	Less allowance for doubtful accounts -			
	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
	6				
	_	disqualified persons (attach schedule) (see instructions)			
	7	Less allowance for doubtful accounts			
	•				
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ā	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	243,933		· · · · · · · · · · · · · · · · · · ·
	С	Investments—corporate bonds (attach schedule)	263,043	513,064	513,835
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨1			
		Less accumulated depreciation (attach schedule)	100,002	% 1	1
	15	O ther assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	656,580	1,044,839	1,161,133
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
┚	22	O ther liabilities (describe •)			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
Fund Balances		and complete lines 24 through 26 and lines 30 and 31.			
aŭ	24	Unrestricted			
89	25	Temporarily restricted			
핃	26	Permanently restricted			
ᆵ		Foundations that do not follow SFAS 117, check here 🕨 🔽			
<u>~</u>		and complete lines 27 through 31.			
ź	27	Capital stock, trust principal, or current funds	341,904	341,904	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	314,676	702,935	
Net	30	Total net assets or fund balances(see instructions)	656,580	1,044,839	
_	31	Total liabilities and net assets/fund balances(see instructions)	656,580	1,044,839	
Pa	rt 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 a	gree	
		with end-of-year figure reported on prior year's return)		1	656,580
2		Enter amount from Part I, line 27a			387,609
3		Other increases not included in line 2 (itemize)			650
4		Add lines 1, 2, and 3		4	1,044,839
5		Decreases not included in line 2 (itemize)		5	·
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa		ine 30 . 6	1,044,839

6

7

(a) 2-story brick warehouse, or common stock, 200 shs MLC Co) (b) D—Donation 1 a 5400 Rogers Ave Ft Smith AR p 1981-06-08 2015- b Common Trust Fund Allocations p 2001-01-01 2016- c Vanguard LTGC distributions p 2000-05-09 2016- d e (e) Gross sales price (f) (or allowable) Depreciation allowed (f) (or allowable) Cost or other basis (g) plus expense of sale (h) (e) plus (f) minus Gain or (loss) (h) (e) plus (f) minus 152,351 b 5,207 c 1,671 d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FM V as of 12/31/69 Adjusted basis Excess of col (i) (k), but not less that (ii) Losses (from col (iii) Losses (from col (iiii) Losses (from col (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	e sold		
b Common Trust Fund Allocations c Vanguard LTGC distributions d e (e) Gross sales price (f) (or allowable) Depreciation allowed (f) (or allowable) Cost or other basis (g) plus expense of sale (h) (e) plus (f) minus 5,207 c 1,671 d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 Adjusted basis (j) as of 12/31/69 (k) over col (j), if any Complete only for assets (from col (i)) (k) over col (j), if any Complete only for assets (from col (i)) (k) over col (j), if any Complete only for assets (from col (i)) (k) over col (j), if any Complete only for assets (from col (i)) (c) Losses (from col (i))	uay, yr)		
c Vanguard LTGC distributions P 2000-05-09 2016-05-09 d e Cost or other basis (g) plus expense of sale Gain or (loss) (h) (e) plus (f) minus a 600,458 152,351 b 5,207 5,207 c 1,671 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain col (k), but not less that col (k) over col (j), if any (i) F M V as of 12/31/69 Adjusted basis (g) as of 12/31/69 Excess of col (l) (k) over col (j), if any Col (k), but not less that col (k) over col (j), if any	9-28		
d e (e) Gross sales price (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus a 600,458 b 5,207 c 1,671 d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 (j) as of 12/31/69 (k) over col (j), if any b Cost or other basis (g) plus expense of sale (h) (e) plus (f) minus (h) (e)	05-31		
e (e) Gross sales price (f) Cor allowable) (g) plus expense of sale (h) (e) plus (f) minus a 600,458 b 5,207 c 1,671 d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 (j) as of 12/31/69 (k) over col (j), if any (i) Losses (from col (i) Los	05-31		
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d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) (j) as of 12/31/69 (k) over col (j), if any b Gains (Col (h) gain in column (h) and owned by the foundation on 12/31/69 (k) over col (j), if any (l) Losses (from col (i) column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation on 12/31/69 Col (k), but not less that column (h) and owned by the foundation (h) and owned by the foundation (h) and owne	5,207		
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(i) FMV as of 12/31/69 Adjusted basis (j) as of 12/31/69 (k) over col (j), if any (l) Col (k), but not less that (l) Losses (from col (าเทเเร		
a b	n -0-) or		
b			
	148,107		
c	5,207		
	1,671		
d			
e			
· · · · · · · · · · · · · · · · · · ·	154,985		
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			
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 Yes Yes TYes	J✓ No		
1 Enter the appropriate amount in each column for each year, see instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in) (b) Adjusted qualifying distributions (b) Adjusted qualifying distributions (col (b) divided by col (c)			
	05932		
2013 63,708 1,132,263 0	05627		
2012 55,091 1,082,323 0	05090		
	04234		
	02684		
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 0	235667		
the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	235667 047133		

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

Enter 1% of net investment income (1% of Part I, line 27b). . .

6

7

53,585

4,542

58,127

65,644

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	940(e)	or 4948—se	e nag	- 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here		, 01 15 10 5	\ \	10 0.	the mot	Tuctio		
14	and enter "N/A" on line 1	-							
	Date of ruling or determination letter			\					
_	(attach copy of letter if necessary-see instructions)								
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V,	, check		J	1				1,542
	here 🟲 🔽 and enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza	ations 6	enter 4% of						
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	ndation	s only Othe	ers					
	enter -0-)	idacion	5 only other	., 5	2				
3	Add lines 1 and 2			•	3				1,542
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four	ndatıor	ns only Oth	ers	4				
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	ntar - C)_		5				1,542
	Credits/Payments	incer -c		•	5				+,542
6 a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	800					
b	Exempt foreign organizations—tax withheld at source	6b		000					
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				800
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2				8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9				 3,742
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount				10				,, 12
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	•	11				
	t VII-A Statements Regarding Activities					<u> </u>			
1a	During the tax year, did the foundation attempt to influence any national, state	e. or loc	al legislatio	n or di	d			Yes	No
	it participate or intervene in any political campaign?				<u> </u>		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	politica	l purposes (see In	structi	ons			
	for definition)?						1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	ppies of any i	materia	ls				
	published or distributed by the foundation in connection with the activities.								
c	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) impor	sed du	rıng the yea	r					
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers	F \$ _							
е	Enter the reimbursement (if any) paid by the foundation during the year for pole $\overline{\mbox{\sc pole}}$	ıtıcal e	xpenditure t	ax ımp	osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been rep	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in Γ	ts gove	erning instru	ıment,	artıcle	S			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	formed (copy of the c	hanges			3	\sqcup	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	_					4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	\longmapsto	No
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring th	e year [?]				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 49 • By language in the governing instrument, or	45) sa	tisfied eithe	er					
	 By state legislation that effectively amends the governing instrument so th 	at no r	nandatory d	irectio	nc				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year.						۳	163	
,	10.134		s, complete		, cor. (c	//	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (• •	•		فيا	. 03	
	►AR								
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attor	ney					
	General (or designate) of each state as required by General Instruction G? If				2		8b		No
9	Is the foundation claiming status as a private operating foundation within the r								
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	tructions for	Part X	ΊV)?				
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,	" attach	n a schedule	listing	their n	ames			
	and addresses.						10		No

Pai	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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►First National Bank Telephone no ►(479))788	-4353	
	Located at ▶PO Box 7 Fort Smith AR ZIP+4 ▶72902			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	ء ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			T
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes ✓ 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)?			
	(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)			
ь	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)?	1b		No
	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 before the first day of the tax year beginning in 2015?	1c		No
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))			
а	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 🕨 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		No
С	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			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
D	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		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+-	No
ъ Б	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-ru		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Par	t VII-B S	tatements Rega	arding Activities for	r Wh	ich Form 4720	May	Be Required (Cont	inue	d)	
5a	During the ye	ar dıd the foundatıo	n pay or incur any amour	nt to						
	(1) Carry on	propaganda, or othe	rwise attempt to influenc	e legi	ıslatıon (section 494	45(e)) [?]	. No		
	(2) Influence	the outcome of any	specific public election	(see s	section 4955), or to	carr	y			
		- No							
	(3) Provide a	- No								
			ation other than a charita			scrib	·			
			ee instructions)					- No		
			r than religious, charitabl			•		110		
			the prevention of cruelty					- No		
L			(5), did any of the transac				· ·	140		
U	•	• •			• •		•		FL	No
			in a current notice regard						5b	No
	_	· -	nt notice regarding disast							
C			n 5a(4), does the foundat					_		
			diture responsibility for t			•	Yes	′ No		
	If "Yes," attac	h the statement requ	ured by Regulations section	on 53.4	4945–5(d).					
6a	Did the found	ation, during the yea	ar, receive any funds, dir	ectly	or indirectly, to pay	prem				
	a personal be	nefit contract?						No		
b	Did the found	ation, during the yea	ar, pay premiums, directl	y or 11	ndırectly, on a perso	onal b	enefit contract?		6b	No
	If "Yes" to 6b,	file Form 8870.								
7a	At any time d	uring the tax year, v	was the foundation a part	y to a	prohibited tax shel	ter tr	ansaction? TYes F	No No		
b	If yes, did the	e foundation receive	any proceeds or have ar	ny net	: income attributable	e to th	ne transaction?		7b	No
	Inf	ormation Abou	t Officers, Director	s, Tr	ustees, Founda	ation	Managers, Highly	Paid	Employ	ees,
Par	t VIII and	d Contractors								
1	List all officer	s, directors, trustee	s, foundation managers	and th	neir compensation (see in	structions).			
	(a) Name a	and address	Title, and average hours per week (b) devoted to position	` `	Compensation(If not paid, enter -0-)		(d) Contributions to nployee benefit plans		xpense acother allow	•
Firet N	lational Bank Trus	t Dent	A dminstrator		2 2 2 7		deferred compensation			
	ox 7	Съсре	2 00		2,237					
	Smith, AR 729	902								
			d employees (other than	those	included on line 1—	-see i	nstructions). If none, e	ıter "N	IONE."	
	-						Contributions to			
Nan		(a) s of each employee nan \$50,000	paid Title, and aver hours per we (b) devoted to pos	ek	(c) Compensatio	on	employee benefit plans and deferred (d) compensation		xpense acother allow	
NON	E						•			
								ļ		

Form 990-PF (2015)		Page 7
Part VIII Information About Officers, Directors, Truste and Contractors (continued)	es, Foundation Managers, Hig	hly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	:".
(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.		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		of Expenses
1Scholarships for college students (list attached)		62,400
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 t	he tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•

Part X Minimum Investment Return

PG	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	919,658
b	Average of monthly cash balances	1b	88,712
c	Fair market value of all other assets (see instructions)	1 c	145,835
d	Total (add lines 1a, b, and c)	1d	1,154,205
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,154,205
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	17,313
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,136,892
6	Minimum investment return. Enter 5% of line 5	6	56,845
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	56,845
2a	Tax on investment income for 2015 from Part VI, line 5 2a 4,542		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	4,542
3	Distributable amount before adjustments Subtract line 2c from line 1	3	52,303
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	52,303
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	52,303
Par	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	65,644
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	65,644
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	4,542
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	61,102
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

F	art XIII Undistributed Income (see insti	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				52,303
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			4,518	
Ь	Total for prior years 20, 20, 20				
3					
a	From 2010				
	From 2011				
c	From 2012				
d	From 2013				
e	From 2014				
	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part				
Ī	XII, line 4 🕨 \$65,644				
а	Applied to 2014, but not more than line 2a			4,518	
	Applied to undistributed income of prior years			·	
	(Election required—see instructions)				
	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2015 distributable amount				52,303
е	Remaining amount distributed out of corpus	8,823			
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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,823			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount—see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				0
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	8,823			
10	Analysis of line 9	, 			
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015 8,823				

	m 990-PF (2015)					Page 10
	art XIV Private Operating Foundat	•			9)	
1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization	is a private opera	ting foundation des		4942(j)(3) or	厂 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b	35% of line 2a					
C	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross 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					
Dа	(4) Gross investment income rt XV Supplementary Information (C	omnlete this	l nart only if the	 e organization	 had \$5 000 o	r more in
	assets at any time during the			· · · gaa	45,666	
1 a	Information Regarding Foundation Managers: List any managers of the foundation who have co before the close of any tax year (but only if they				•	ation
ь	List any managers of the foundation who own 10 ownership of a partnership or other entity) of wh				large portion of the	e
2	Information Regarding Contribution, Grant, Gift	, Loan, Scholarshi	p, etc., Programs:			
	Check here F if the foundation only makes co unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and d	ntributions to pre makes gifts, gran	selected charitable	-	·	ns under
	The name address and talantam arms.	mod oddes CU	20 para = 15 :: 1-	anningstrans at	ıld ba addı	
a	The name, address, and telephone number or e- Jeannie Wakefield	-man address of th	ie heizoli ro Milow	applications shot	na ne addressed	
	602 Garrison Avenue Fort Smith, AR 72901 (479) 788-4353 JeannieWakefield@fnbfs com					
	The form in which applications should be submi	tted and informati	on and materials t	hev should include	<u> </u>	
_	Scholarship application form should be complet transcript must be attached to the application	ed and returned b	efore the deadline	date on the applic		e student's
С	Any submission deadlines	Tradente may als	access rectors of	. commendation		
_	April 17		al areas sharitable			

Applicant must be attending or planning to attend college

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid	If recipient is an individual,		uture Payment	
Recipient	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year Various individuals - statement att Various Fort Smith, AR 72901	None	N/A	Scholarships	62,400
Total	 		▶ 3a	62,400
b Approved for future payment				

	ing Activities				
nter gross amounts unless otherwise indicated	Unrelated bus	(b)	Excluded by section	(d)	(e) Related or exemp function income
L Program service revenue a	Business code	A mount	Exclusion code	A mount	(See Instructions)
b					
c					
e					
g Fees and contracts from government agencies Membership dues and assessments					
Interest on savings and temporary cash investments			14	37	
Dividends and interest from securities Net rental income or (loss) from real estate			14	13,625	
a Debt-financed property					
b Not debt-financed property			16	-4,825	
O ther investment income			10	454.005	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory			18	454,985	
Other revenue a <u>Royalties</u>			15	79	
ь					
c					
d					
d e					
e Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e).			1	463,901 13	
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify	calculations)			.3	
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
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Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify a line XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify and XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify and the accomplishment of the foundation's	calculations) o the Accomplich income is repo	lishment of I	Exempt Purpos (e) of Part XVI-A co	es ontributed importa	463,901 ntly to

Part	XVI	Information Re Noncharitable					sactio	ns and I	Relationships	With			
		rganization directly or i	ndırectly (engage	ın any of t	the following wi						Yes	No
		ions?			(-)(-) -	, ,		,					
a Trai	nsfers	from the reporting four	ndation to	a nonc	harıtable e	exempt organız	ation of						
(1)	Casl	1									1a(1)		No
(2)	Othe	erassets									1a(2)		No
b 0 th	er tra	nsactions											
(1)	Sale	s of assets to a noncha	rıtable ex	empt or	ganızatıoı	n					1b(1)		No
(2)	Purc	hases of assets from a	noncharit	able ex	empt orga	anızatıon					1b(2)		No
(3)	Rent	al of facilities, equipme	nt, or othe	erasset	ts						1b(3)		No
(4)	Rein	nbursement arrangemer	nts								1b(4)		No
(5)	Loar	s or loan guarantees.									1b(5)		No
(6) F	erfor	mance of services or m	embershi	p or fun	draising s	olicitations					1b(6)		No
c Sha	rıng d	of facilities, equipment,	mailing lis	sts, oth	er assets,	or paid employ	ees				1c		No
of th	ne god ny tra	swer to any of the above ods, other assets, or se insaction or sharing arr (b) Amount involved	rvices giv angement	en by t , show	he reporti in column	ng foundation 1	If the fou f the god	undation r ods, other	eceived less than	n fair marko ces receive	et value ed	!	nts
						-							
							-						
des	cribe	indation directly or indidin section 501(c) of the complete the following (a) Name of organization	ne Code (d schedule		an sectioi		ın secti			otion of relati	. □Ye	es 🔽	No.
Sign Here	the info	der penalties of perjury, best of my knowledge a rmation of which prepar****** Signature of officer or t	and belief, rer has an	ıt ıs tru	ıe, correct		Declar			May t May t return with t below	r) is bas he IRS di he prepai	sed on scuss th	all us vn
				Ι			Date		Check if self-	PTIN		1031 1	
Paid Prepa	arer	Print/Type preparer's Joseph A Sanford Firm's name ► SANFORD & COMPA		Prepa	rer's Sıgn	ature	Date		employed F		004062	273	
Use													
Only		Firm's address ► 812 DEQUEEN ST MI	ENA, AR	71953	4173				Phone no (479) 394-54:	L 4		

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TY 2015 Accounting Fees Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting fees	1,866	0	0	1,866

TY 2015 Explanation of Non-Filing with Attorney General Statement

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Software Version: 2015v2.0

Statement: The organization does not solicit contributions and does not

receive contributions in excess of \$25,000 during a calendar year. Therefore it is exempt from annual reporting requirements with the

Arkansas Attorney General's office.

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TY 2015 Investments Corporate Bonds Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Name of Bond	End of Year Book Value	End of Year Fair Market Value
Common Trust Fixed Income Fund	513,064	513,835

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TY 2015 Investments Corporate Stock Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Common Trust Equity Fund	193,737	260,769
Vanguard 500 Index Fund	125,251	163,250
Fidelity Intl Discovery Fd #305	60,000	60,392
Vanguard Equity Income Fund Admiral	60,000	64,952
Vanguard Stk Mkt Index Fd	60,000	65,148

TY 2015 Land, Etc. Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Land	1		1	1

TY 2015 Legal Fees Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal fees	609	0	0	609

TY 2015 Other Expenses Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Rental Expenses	9,714	9,714		
Royalty expenses	5	5		
Scholarship committee expense	210			210

TY 2015 Other Income Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

	Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
R	oyalties	79	79	

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TY 2015 Other Professional Fees Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment fees	8,025	8,025	0	0

TY 2015 Taxes Schedule

Name: Grant T White Foundation

EIN: 71-0561239

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
U S excise taxes	940			

FIRST NATIONAL BANK OF FT SMITH TAX WORKSHEET FOR THE ACCOUNT OF GRANT T WHITE FOUNDATION

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BOOK

VALUE

REG

12/21/2016	DISTRIBUTION	PRINCIPAL	INCOME
TAX PARTY U	JNKNOWN-0		
CODE 865	GRANTS, SCHOLARSHIPS, ETC.	PAID BY PRIVATE FOUNDATIONS	
06/01/2015	#30 SCHOLARSHIP PAYMENT PAI ALEXA KOENIGSEDER FALL 2015 SEMESTER SSN: 432-85-9982	D TO	650 00-
06/01/2015	#31 SCHOLARSHIP PAYMENT PAI JASMENE ABERNATHY FALL 2015 SEMESTER SSN: 433-89-0418		650,00-
06/01/2015	#32 SCHOLARSHIP PAYMENT PAI EDWARD MERIDA FALL 2015 SEM SSN: 610-82-2839		650.00-
06/08/2015	#4 SCHOLARSHIP PAYMENT PAID SAVANNAH HARRIS FALL 2015 SEMESTER SSN: 430-87-3695	o TO	650.00-
06/17/2015	#1 SCHOLARSHIP PAYMENT PAID BRYCE GEELS FALL 2015 SEMES SSN: 431-91-3841		650.00-
07/06/2015	#4 SCHOLARSHIP PAYMENT PAID CHRISTOPHER WELCH FALL 2015 SEMESTER SSN: 431-89-8098		650.00-
07/13/2015	#4 SCHOLARSHIP PAYMENT PAIL LAUREN PAYNE FALL 2015 SEME SSN: 431-87-1380		650.00-
07/16/2015	#1 SCHOLARSHIP PAYMENT PAID MARYE RACHEL WINGFIELD FALL SEMESTER SSN: 430-89-3994		650.00-
07/16/2015	#2 SCHOLARSHIP PAYMENT PAID PERLA RODRIGUEZ FALL 2015 SEMESTER SSN: 676-12-8086) TO	650.00-
07/23/2015	#4 SCHOLARSHIP PAYMENT PAID NGUYEN FALL 2015 SEMESTER S 676-03-8255		650.00-
07/30/2015	#4 SCHOLARSHIP PAYMENT PAIL ROXANA CORDOVA FALL 2015 SEMESTER SSN: 626-92-0985) TO	650.00-

FIRST NATIONAL BANK OF FT SMITH TAX WORKSHEET FOR THE ACCOUNT OF GRANT T WHITE FOUNDATION

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05/31/2016	DISTRIBUTION	PRINCIPAL	INCOME	BOOK VALUE	REG
07/30/2015	#5 SCHOLARSHIP PAYMENT PAID TO DEVYN CHRONISTER FALL 2015 SEMESTER SSN: 429-91-0962		650.00-		
	#6 SCHOLARSHIP PAYMENT PAID TO ANGELA HERNANDEZ FALL 2015 SEMESTER SSN: 429-89-5968		650.00-		
	#7 SCHOLARSHIP PAYMENT PAID TO LA'KENDRA FELLS FALL 2015 SEMESTER SSN: 430-87-1069		650.00-		
07/30/2015	#8 SCHOLARSHIP PAYMENT PAID TO TERENCE MCELWEE FALL 2015 SEMESTER SSN: 431-87-9748		650.00~		
08/04/2015	#3 SCHOLARSHIP PAYMENT PAID TO UNIVERSITY OF CENTRAL ARKANSAS FALL 2015 SEMESTER SSN:		650.00~		
08/04/2015	430-93-5166 Emily N Tran #4 SCHOLARSHIP PAYMENT PAID TO UNIVERSITY OF ARKANSAS FORT SMITH FALL 2015 SEMESTER SSN: 429-93-8652 Rasa A Vongkhamchanh		650.00~		
08/05/2015	#7 SCHOLARSHIP PAYMENT PAID TO HANNAH SHARP FALL 2015 SEMESTER SSN: 397~15-3644		650.00-		
08/07/2015	#2 SCHOLARSHIP PAYMENT PAID TO ASHER G. PARVU FALL 2015 SEMESTER SSN: 622-86-7393		650.00-		
08/10/2015	#7 SCHOLARSHIP PAYMENT PAID TO FRANCESCA BOONE FALL 2015 SEMESTER SSN: 432-91-0232		650.00-		
08/13/2015	#7 SCHOLARSHIP PAYMENT PAID TO KENDREKA MYLES FALL 2015 SEMESTER SSN: 429-87-7022		650.00-		
08/14/2015	#5 SCHOLARSHIP PAYMENT PAID TO ASHLYNNE HIXON FALL 2015 SEMESTER SSN: 430-89-9889		650.00-		
08/14/2015	#6 SCHOLARSHIP PAYMENT PAID TO CENTRAL PIEDMONT COMMUNITY COLLEGE FALL 2015 SEMESTER SSN: 431-85-3187 JOVONNA RELEFORD STUDENT ID: 3909231		650.00-		

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	DISTRIBUTION	PRINCIPAL	INCOME	BOOK VALUE	REG
08/19/2015	#4 SCHOLARSHIP PAYMENT PAID TO JESSICA WILSON FALL 2015 SEMESTER SSN: 440-11-9552		650.00-		
08/19/2015	#5 SCHOLARSHIP PAYMENT PAID TO KHOINGUYEN TRINH FALL 2015 SEMESTER SSN: 431-93-0760		650.00-		
08/19/2015	#6 SCHOLARSHIP PAYMENT PAID TO BRENDA ROSALES FALL 2015 SEMESTER SSN: 623-94-8471		650.00-		
08/19/2015	#7 SCHOLARSHIP PAYMENT PAID TO SIERRA DANIELS FALL 2015 SEMESTER SSN: 427-77-3743		650.00-		
08/20/2015	#4 SCHOLARSHIP PAYMENT PAID TO SKYLER EDWARDS FALL 2015 SEMESTER SSN: 432-85-3952		650.00-		
08/20/2015	#5 SCHOLARSHIP PAYMENT PAID TO KALLY TRAN FALL 2015 SEMESTER SSN: 432-91-5183		650.00-		
08/24/2015	#4 SCHOLARSHIP PAYMENT PAID TO ALEXANDRA CRUZ FALL 2015 SEMESTER SSN: 676-18-3065		650.00-		
08/24/2015	#5 SCHOLARSHIP PAYMENT PAID TO HENDRIX COLLEGE FALL 2015 SEMESTER SSN: 430-91-5744 TINA NGUYEN UG-ID NO.: 459177		650.00-		
08/31/2015	#2 SCHOLARSHIP PAYMENT PAID TO TRUC TRAN FALL 2015 SEMESTER SSN: 607-17-6875		650.00-		
09/01/2015	#27 SCHOLARSHIP PAYMENT PAID TO PHILLIP SMITH FALL 2015 SEMESTER SSN: 431-91-4686		650.00-		
09/04/2015	#1 SCHOLARSHIP PAYMENT PAID TO NICHOLAS BLAIR FALL 2015 SEMESTER SSN: 432-89-3785		650.00-		
09/04/2015	#2 SCHOLARSHIP PAYMENT PAID TO KAITLYNN JARRELS FALL 2015 SEMESTER SSN: 432-85-2270		650.00-		

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05/31/2016	DISTRIBUTION	PRINCIPAL	INCOME	BOOK BOOK	REG
09/14/2015	#4 SCHOLARSHIP PAYMENT PAID TO JOHN SPRADLIN FALL 2015 SEMESTER SSN: 430-87-6635		650.00-		
09/14/2015	#5 SCHOLARSHIP PAYMENT PAID TO DAXTON BOYD FALL 2015 SEMESTER SSN: 430-87-3354		650.00-		
09/23/2015	#1 SCHOLARSHIP PAYMENT PAID TO KIMBERLY CORDON FALL 2015 SEMESTER SSN:430-93-3240		650.00-		
09/28/2015	#4 SCHOLARSHIP PAYMENT PAID TO KHANHNY PATOUMMA FALL 2015 SEMESTER SSN: 431-87-2073		650.00-		
09/28/2015	#5 SCHOLARSHIP PAYMENT PAID TO MARY LINAM FALL 2015 SEMESTER SSN: 429-91-9519		650.00~		
09/29/2015	#19 SCHOLARSHIP PAYMENT PAID TO DARBY WHITE FALL 2015 SEMESTER SSN: 432-85-0869		650.00-		
09/30/2015	#4 SCHOLARSHIP PAYMENT PAID TO HELEN SAYRE FALL 2015 SEMESTER SSN: 429-93-1336		650.00-		
10/05/2015	#7 RECEIVED FROM CENTRAL PIEDMONT COMM. COLLEGE REMAINDER OF UNUSED SCHOLARSHIP FUNDS FOR JOVANNA RELEFORD	650.00			
12/16/2015	#7 SCHOLARSHIP PAYMENT PAID TO ELISEO DIAZ SPRING 2016 SEMESTER SSN: 431-89-8683		650.00-		
12/16/2015	#8 SCHOLARSHIP PAYMENT PAID TO DUNG HANH NGUYEN SPRING 2016 SEMESTER SSN: 676-03-8255		650.00-		
12/16/2015	#9 SCHOLARSHIP PAYMENT PAID TO LA'KENDRA FELLS SPRING 2016 SEMESTER SSN: 430-87-1069		650.00-		
12/16/2015	#10 SCHOLARSHIP PAYMENT PAID TO DANIEL PEEK SPRING 2016 SEMESTER SSN: 431-87-8132		650.00-		

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03/31/2016	DISTRIBUTION	PRINCIPAL	INCOME	BOOK VALUE	REG
12/18/2015	#4 SCHOLARSHIP PAYMENT PAID TO ELIZABETH JAMES SPRING 2016 SEMESTER SSN: 346~88~7044		650.00~		
12/18/2015	#5 SCHOLARSHIP PAYMENT PAID TO CHRYSTA DURHAM SPRING 2016 SEMESTER SSN: 432-89-4558		650.00-		
12/18/2015	#6 SCHOLARSHIP PAYMENT PAID TO SIERRA DANIELS SPRING 2016 SEMESTER SSN: 427-77-3743		650.00-		
12/22/2015	#7 SCHOLARSHIP PAYMENT PAID TO FRANCESCA BOONE SPRING 2016 SEMESTER SSN: 432-91-0232		650.00-		
12/22/2015	#8 SCHOLARSHIP PAYMENT PAID TO ROXANA CORDOVA SPRING 2016 SEMESTER SSN: 626-92-0985		650.00-		
12/22/2015	#9 SCHOLARSHIP PAYMENT PAID TO ASHER PARVU SPRING 2016 SEMESTER SSN: 622-86-7393		650.00-		
12/23/2015	#1 SCHOLARSHIP PAYMENT PAID TO TERENCE MCELWEE SPRING 2016 SEMESTER SSN: 431-87-9748		650.00+		
12/29/2015	#7 SCHOLARSHIP PAYMENT PAID TO EDWARD MERIDA SPRING 2016 SEMESTER SSN: 610-82-2839		650.00-		
12/29/2015	#8 SCHOLARSHIP PAYMENT PAID TO JASMENE ABERNATHY SPRING 2016 SEMESTER SSN: 433-89-0418		650.00-		
12/29/2015	#9 SCHOLARSHIP PAYMENT PAID TO HAYLEY TAYLOR SPRING 2016 SEMESTER SSN: 431-91-9383		650.00-		
12/29/2015	#10 SCHOLARSHIP PAYMENT PAID TO BRYCE GEELS SPRING 2016 SEMESTER SSN: 431-91-3841		650.00-		
12/29/2015	#11 SCHOLARSHIP PAYMENT PAID TO BRENDA ROSALES SPRING 2016 SEMESTER SSN: 623-94-8471		650.00-		

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05/31/2016	DISTRIBUTION	PRINCIPAL	INCOME	BOOK VALUE	REG
12/29/2015	#12 SCHOLARSHIP PAYMENT PAID TO HELEN M. SAYRE SPRING 2016 SEMESTER SSN: 429-93-1336		650.00-		
12/29/2015	#13 SCHOLARSHIP PAYMENT PAID TO KHANHNY PATOUMMA SPRING 2016 SEMESTER SSN: 431-87-2073		650.00-		
12/29/2015	#14 SCHOLARSHIP PAYMENT PAID TO NAJEEAH SMITH SPRING 2016 SEMESTER SSN: 430-89-9846		650.00-		
12/30/2015	#4 SCHOLARSHIP PAYMENT PAID TO HAYLEY TAYLOR FALL 2015 SEMESTER SSN: 431-91-9383		650.00-		
12/30/2015	#5 SCHOLARSHIP PAYMENT PAID TO ANGELA HERNANDEZ SPRING 2016 SEMESTER SSN: 429-89-5968		650.00-		
12/30/2015	#6 SCHOLARSHIP PAYMENT PAID TO UNIVERSITY OF CENTRAL ARKANSAS SPRING 2016 SEMESTER EMILY N. TRAN SSN: 430-93-5166 STUDENT ID NO.: B01117485		650.00-		
12/30/2015	#7 SCHOLARSHIP PAYMENT PAID TO CHRISTOPHER PHAM SPRING 2016 SEMESTER SSN: 431-87-0623		650.00-		
12/31/2015	#7 SCHOLARSHIP PAYMENT PAID TO PERLA RODRIGUEZ SPRING 2016 SEMESTER SSN: 676-12-8086		650.00-		
01/12/2016	#4 SCHOLARSHIP PAYMENT PAID TO CHRISTOPHER WELCH SPRING 2016 SEMESTER SSN: 431-89-8098		650.00-		
01/12/2016	#5 SCHOLARSHIP PAYMENT PAID TO STEPHANIE RATSAMY SPRING 2016 SEMESTER SSN: 429-89-9333		650.00-		
01/12/2016	#6 SCHOLARSHIP PAYMENT PAID TO ALEXANDRA CRUZ SPRING 2016 SEMESTER SSN: 676-18-3065		650.00-		
01/12/2016	#7 SCHOLARSHIP PAYMENT PAID TO KAITLYNN JARRELS SPRING 2016 SEMESTER SSN: 432-85-2270		650.00-		

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01/12/2016 #8 SCHOLARSHIP PAYMENT PAID TO DEVYN CHRONISTER SPRING 2016 SEMESTER SSN: 429-9-1-0962 01/12/2016 #9 SCHOLARSHIP PAYMENT PAID TO DAXTON BOYD SFRING 2016 SEMESTER SSN: 430-87-3354 01/12/2016 #10 SCHOLARSHIP PAYMENT PAID TO KHOINGUYEN TRINK SFRING 2016 SEMESTER SSN: 431-93-0760 01/12/2016 #11 SCHOLARSHIP PAYMENT PAID TO SAVANNAH HARRIS SPRING 2016 SEMESTER SSN: 431-93-0760 01/13/2016 #1 SCHOLARSHIP PAYMENT PAID TO SAVANNAH HARRIS SPRING 2016 SEMESTER SSN: 430-87-3695 01/13/2016 #1 SCHOLARSHIP PAYMENT PAID TO KRISTON DORSEY SPRING 2016 SEMESTER SSN: 432-87-0100 01/15/2016 #9 SCHOLARSHIP PAYMENT PAID TO LAUREN PAYME SPRING 2016 SEMESTER SSN: 431-97-1380 01/20/2016 #4 SCHOLARSHIP PAYMENT PAID TO MARYE WINGFIELD SPRING 2016 SEMESTER SSN: 430-83-394 01/20/2016 #4 SCHOLARSHIP PAYMENT PAID TO KENDERKA WILES SPRING 2016 SEMESTER SSN: 429-87-7022 01/20/2016 #1 SCHOLARSHIP PAYMENT PAID TO KENDERKA WILES SPRING 2016 SEMESTER SSN: 430-93-3340 01/21/2016 #1 SCHOLARSHIP PAYMENT PAID TO KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #3 SCHOLARSHIP PAYMENT PAID TO ALEXA KOENIGSDER SPRING 2016 SEMESTER SSN: 430-93-3740 01/21/2016 #3 SCHOLARSHIP PAYMENT FAID TO HENDRIK COLLEGE SPRING 2016 SEMESTER SSN: 430-93-3740 01/21/2016 #3 SCHOLARSHIP PAYMENT FAID TO HENDRIK COLLEGE SPRING 2016 SEMESTER SSN: 430-93-3940 01/21/2016 #4 SCHOLARSHIP PAYMENT FAID TO HENDRIK COLLEGE SPRING 2016 SEMESTER SSN: 432-95-9985		DISTRIBUTION	PRINCIPAL	INCOME	BOOK VALUE	REG
01/12/2016 #9 SCHOLARSHIP PAYMENT PAID TO	01/12/2016	DEVYN CHRONISTER SPRING 2016		650.00-		
KHOINGUVEN TRINH SPRING 2016 SEMESTER SSN: 431-93-0760 01/12/2016 #11 SCHOLARSHIP PAYMENT PAID TO	01/12/2016	#9 SCHOLARSHIP PAYMENT PAID TO DAXTON BOYD SPRING 2016 SEMESTER		650 00-		
SAVANNAH HARRIS SPRING 2016 SEMESTER SSN. 430-87-3695 01/13/2016 #1 SCHOLARSHIP PAYMENT PAID TO 650.00- KRISTON DORSEY SPRING 2016 SEMESTER SSN: 432-87-0100 01/15/2016 #9 SCHOLARSHIP PAYMENT PAID TO 650.00- LAUREN PAYNE SPRING 2016 SEMESTER SSN: 431-87-1380 01/15/2016 #10 SCHOLARSHIP PAYMENT PAID TO 650.00- MARYE WINGFIELD SRRING 2016 SEMESTER SSN: 430-89-3994 01/20/2016 #4 SCHOLARSHIP PAYMENT PAID TO 650.00- KENDREKA MYLES SPRING 2016 SEMESTER SSN: 429-87-7022 01/20/2016 #5 SCHOLARSHIP PAYMENT PAID TO 650.00- KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #1 SCHOLARSHIP PAYMENT PAID TO 650.00- ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO 650.00- HENDRIX COLLEGE SPRING 2016 SEMESTER SSN: 432-85-9982 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO 650.00- HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-ID NO.: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO 650.00- NICHOLAS BLAIR SPRING 2016	01/12/2016	KHOINGUYEN TRINH SPRING 2016		650.00-		
KRISTON DORSEY SPRING 2016 SEMESTER SSN: 432-87-0100 01/15/2016 #9 SCHOLARSHIP PAYMENT PAID TO LAUREN PAYNE SPRING 2016 SEMESTER SSN: 431-87-1380 01/15/2016 #10 SCHOLARSHIP PAYMENT PAID TO MARYE WINGFIELD SPRING 2016 SEMESTER SSN: 430-89-3994 01/20/2016 #4 SCHOLARSHIP PAYMENT PAID TO KENDREKA MYLES SPRING 2016 SEMESTER SSN: 429-87-7022 01/20/2016 #5 SCHOLARSHIP PAYMENT PAID TO KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #1 SCHOLARSHIP PAYMENT PAID TO ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 432-85-9982 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 432-85-9982 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-ID NO.: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO NICHOLAS BLAIR SPRING 2016	, ,	SAVANNAH HARRIS SPRING 2016 SEMESTER SSN· 430-87-3695		650.00-		
LAUREN PAYNE SPRING 2016 SEMESTER SSN: 431-87-1380 01/15/2016 #10 SCHOLARSHIP PAYMENT PAID TO MARYE WINGFIELD SPRING 2016 SEMESTER SSN: 430-89-3994 01/20/2016 #4 SCHOLARSHIP PAYMENT PAID TO KENDREKA MYLES SPRING 2016 SEMESTER SSN: 429-87-7022 01/20/2016 #5 SCHOLARSHIP PAYMENT PAID TO KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #1 SCHOLARSHIP PAYMENT PAID TO ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 432-85-9882 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-ID NO: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO NICHOLAS BLAIR SPRING 2016		KRISTON DORSEY SPRING 2016 SEMESTER SSN: 432-87-0100		650.00-		
MARYE WINGFIELD SPRING 2016 SEMESTER SSN: 430-89-3994 01/20/2016 #4 SCHOLARSHIP PAYMENT PAID TO KENDREKA MYLES SPRING 2016 SEMESTER SSN: 429-87-7022 01/20/2016 #5 SCHOLARSHIP PAYMENT PAID TO KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #1 SCHOLARSHIP PAYMENT PAID TO ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 432-85-9982 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-JD NO.: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO NICHOLAS BLAIR SPRING 2016	01/15/2016	LAUREN PAYNE SPRING 2016		650.00-		
KENDREKA MYLES SPRING 2016 SEMESTER SSN: 429-87-7022 01/20/2016 #5 SCHOLARSHIP PAYMENT PAID TO 650.00- KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #1 SCHOLARSHIP PAYMENT PAID TO 650.00- ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 432-85-9982 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO 650.00- HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-ID NO.: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO 650.00- NICHOLAS BLAIR SPRING 2016	01/15/2016	MARYE WINGFIELD SPRING 2016		650.00-		
KIMBERLY CORDON SPRING 2016 SEMESTER SSN: 430-93-3240 01/21/2016 #1 SCHOLARSHIP PAYMENT PAID TO 650.00- ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 432-85-9982 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO 650.00- HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-ID NO.: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO 650.00- NICHOLAS BLAIR SPRING 2016	01/20/2016	KENDREKA MYLES SPRING 2016		650.00~		
ALEXA KOENIGSEDER SPRING 2016 SEMESTER SSN: 432-85-9982 01/21/2016 #2 SCHOLARSHIP PAYMENT PAID TO 650.00~ HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-JD NO.: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO 650.00~ NICHOLAS BLAIR SPRING 2016	01/20/2016	KIMBERLY CORDON SPRING 2016		650.00-		
HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN: 430-91-5744 UG-JD NO.: 459177 02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO 650.00- NICHOLAS BLAIR SPRING 2016	01/21/2016	ALEXA KOENIGSEDER SPRING 2016		650.00-		
02/03/2016 #4 SCHOLARSHIP PAYMENT PAID TO 650.00- NICHOLAS BLAIR SPRING 2016	01/21/2016	HENDRIX COLLEGE SPRING 2016 SEMESTER FBO: TINA NGUYEN SSN:		650.00~		
	02/03/2016	#4 SCHOLARSHIP PAYMENT PAID TO NICHOLAS BLAIR SPRING 2016		650.00-		

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0,01,2010	DISTRIBUTION	PRINCIPAL	INCOME	BOOK VALUE	REG
02/03/2016	#5 SCHOLARSHIP PAYMENT PAID TO UNIVERSITY OF ARKANSAS FORT SMITH SPRING 2016 SEMESTER FBO: RASA A. VONGKHAMCHANH SSN: 429-93-8652 STUDENT ID: 000294167		650.00-		
02/03/2016	#6 SCHOLARSHIP PAYMENT PAID TO ASHLYNNE HIXON SPRING 2016 SEMESTER SSN: 430-89-9889		650.00-		
03/01/2016	#26 SCHOLARSHIP PAYMENT PAID TO DARBY WHITE SPRING 2016 SEMESTER SSN: 432-85-0869		650.00~		
03/01/2016	#27 SCHOLARSHIP PAYMENT PAID TO JOHN SPRADLIN SPRING 2016 SEMESTER SSN: 430-87-6635		650.00~		
04/22/2016	#4 SCHOLARSHIP PAYMENT PAID TO KALLY TRAN SPRING 2016 SEMESTER SSN: 432-91-5183		650.00-		
05/19/2016	#7 SCHOLARSHIP PAYMENT PAID TO BRENDA ROSALES FALL 2016 SEMESTER SSN: 623-94-8471		650.00-		
05/19/2016	#8 SCHOLARSHIP PAYMENT PAID TO NAJEEAH SMITH FALL 2016 SEMESTER SSN: 430-89-9846		650.00~		
05/19/2016	#9 SCHOLARSHIP PAYMENT PAID TO CHRISTOPHER PHAM FALL 2016 SEMESTER SSN: 431-87-0623		650.00-		
05/19/2016	#10 SCHOLARSHIP PAYMENT PAID TO HAYLEY TAYLOR FALL 2016 SEMESTER SSN: 431-91-9383		650.00-		
05/20/2016	#4 SCHOLARSHIP PAYMENT PAID TO ELISEO DIAZ FALL 2016 SEMESTER SSN: 431-89-8683		650.00-		
05/20/2016	#5 SCHOLARSHIP PAYMENT PAID TO FRANCESCA PEREZ FALL, 2016 SEMESTER SSN: 432-91-0232		650.00-		

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10 0	3/31/2010	DISTRIBUTION	PRINCIPAL	INCOME	BOOK VALUE	REG
	05/26/2016	#4 SCHOLARSHIP PAYMENT PAID TO EDWARD MERIDA FALL 2016 SEMESTER SSN: 610-82-2839		650.00-		
	05/26/2016	#5 SCHOLARSHIP PAYMENT PAID TO BRYCE GEELS FALL 2016 SEMESTER SSN: 431-91-3841		650.00-		
	05/27/2016	#4 SCHOLARSHIP PAYMENT PAID TO DANIEL PEEK FALL 2016 SEMESTER SSN: 431-87-8132		650 00-		
	05/27/2016	#5 SCHOLARSHIP PAYMENT PAID TO ASHER PARVU FALL 2016 SEMESTER SSN: 622-86-7393		650.00-		
*	TOTAL CODE	865	650.00	63,050.00-	0.00	
**	TOTAL FOR 1	TAX PARTY UNKNOWN	650.00	63,050.00-	0.00	P I
***	TOTAL DIST	PRIBUTIONS TO BENEFICIARY	650.00	63,050.00-	0.00	
* 1 *	TOTAL BENEI	FICIARY DISTRIBUTIONS	650.00	63,050.00~	0.00	

Net current year grants paid \$62,400