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# Form **990-P,F**

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

OMB No. 1545-0052 2016

Department of the Treasury Internal Revenue Service

► 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.irs.gov/form990pf.

Open to Public Inspection

For cale	endar year 2016 or tax year beginning	, 2016,	, and ending	,	
			Α	Employer identification num	nber
	WHITE MEMORIAL FOUNDATION		B	31-1041899 Telephone number (see insti	- diana)
	BOX 537 RA, AR 71640-0537		l <sub>R</sub>	870-355-8536	ructions)
FODOI	RA, AR /1640-055/		<del> </del>	670-333 6336	
			C	If exemption application is	pending, check here
G Che	ck all that apply. Initial return	Initial return of a form	ner public charity	1.5	
<b>u</b> 0,,,0	Final return	Amended return	D D	1 Foreign organizations, chec	k nere .
	Address change	Name change		2 Foreign organizations meet	
H Che		501(c)(3) exempt private f	oundation	here and attach computation	on • 📗
	Section 4947(a)(1) nonexempt charitab			If private foundation status	was terminated
I Fair		Accounting method: X C		under section 507(b)(1)(A)	
	n Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60-	month termination
▶ \$	9,001,404. (Pa	rt I, column (d) must be or		under section 507(b)(1)(B)	
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
L	Expenses (The total of amounts in	expenses per books	income	income	for charitable
	columns (b), (c), and (d) may not necessity as a little amounts in a claim (c)	es-			purposes
	sarily equal the amounts in column (a) (see instructions))	' \			(cash basis only)
	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ► X if the foundation is not required to attach S	ch B			
	3 Interest on savings and temporary cash investments	214.	214.	214.	<u></u>
	4 Dividends and interest from securities 5 a Gross rents	460 242	460 242	460 242	
	<b>b</b> Net rental income	468,343.	468,343.	468,343.	
_	or (loss)  6 a Net gain or (loss) from sale of assets not on line 10	·		ļ	
RE	<b>b</b> Gross sales price for all			<b> </b>	
٧	assets on line 6a 7 Capital gain net income (from Part IV, line 2)	<del></del>		-	
E i	8 Net short-term capital gain			<del> </del>	
U	9 Income modifications				
E	10 a Gross sales less returns and				
	allowances		<del></del>		
	b Less Cost of goods sold				
	C Gross profit or (loss) (attach schedule).				
	11 Other income (attach schedule)				
	DECENTED				
	12 rotal. And lines 1, through/11-!	468,557.	468,557.	468,557.	
	1. 101	12,600.		<u> </u>	
	15 Pension plans employee salaries and wages	\ <del></del>		<u> </u>	<del></del>
_	15 Pension plans Amply & benefits O				
A D	b Accounting tees (attach sch)			<del>                                     </del>	
M I	C Other protessional tees (attach sch)			<del> </del>	
οı	17 Interest	<del></del>	<del></del>	<u> </u>	
O I S	18 Taxes (attach schedule)(see instrs).			<u> </u>	
R Ř <u>A</u> A	19 Depreciation (attach	1			
Î	schedule) and depletion See Stmt	15,186.	15,186.		
Ņ V G E	20 Occupancy	·		<b> </b>	
_	21 Travel, conferences, and meetings 22 Printing and publications.			<del> </del>	
A E N X D P	23 Other expenses (attach schedule)			-	
É	See Statement	2 73,860.	73,860.	73,680.	
N S E S	24 Total operating and administrative				
E S	expenses. Add lines 13 through 23	101,646.	89,046.	73,680.	
	25 Contributions, gifts, grants paid Part X	V 433,841.			433,841.
	26 Total expenses and disbursements.	, FOE 409	00.046	70.000	400.044
	Add lines 24 and 25  27 Subtract line 26 from line 12:	535,487.	89,046.	73,680.	433,841.
	27 Subtract line 26 from line 12:  a Excess of revenue over expenses				
	and disbursements	-66,930.			
	<b>b</b> Net investment income (if negative, enter -0-).		379,511.		
	C Adjusted net income (if negative, enter -0-)			394,877.	

SCANNED MAY 25 2017

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Par	F 11	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	f year
-		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing .	1,748.	6,508.	6,508.
	2	Savings and temporary cash investments	2,602.	92,057.	92,057.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
_	7	Other notes and loans receivable (attach sch)			
S		Less allowance for doubtful accounts			
Š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges	4,400.	3,600.	3,600.
S	10 a	Investments – U.S and state government obligations (attach schedule)			:
	l t	Investments — corporate stock (attach schedule)			
		: Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis. ►			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ► 4,617,832.			
		Less accumulated depreciation (attach schedule) See Stmt 3  617,382.	4,015,636.	4,000,450.	8,899,239.
	15	Other assets (describe ► See Statement 4 )	11,178.	12,316.	
	16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	4,035,564.	4,114,931.	9,001,404.
Ŀ	17	Accounts payable and accrued expenses	25,308.	175,406.	
Å	18	Grants payable		·	; !
A B	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
İ	21	Mortgages and other notes payable (attach schedule)	171,446.	171,446.	!
i	22	Other liabilities (describe See Statement 5 )	1.	2.	
E 	23	Total liabilities (add lines 17 through 22)	196,755.	346,854.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			1
E U	25	Temporarily restricted			
D	26	Permanently restricted			
A B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔĹ	27	Capital stock, trust principal, or current funds	20,000.	20,000.	
SN	28	Paid-in or capital surplus, or land, bldg., and equipment fund	687,320.	687,320.	
O E R S	29	Retained earnings, accumulated income, endowment, or other funds	3,131,489.	3,060,757.	}
RS	30	Total net assets or fund balances (see instructions)	3,838,809.	3,768,077.	
	31	Total liabilities and net assets/fund balances (see instructions)	4,035,564.	4,114,931.	ļ ì
Par	t III	Analysis of Changes in Net Assets or Fund Balance			<u></u>
1	Tota	net assets or fund balances at beginning of year - Part II, colu	ımn (a), line 30 (must ag		2 020 000
•		of-year figure reported on prior year's return)		1	3,838,809.
_		r amount from Part I, line 27a	C	2	-66, <u>930</u> .
3		increases not included in line 2 (itemize) See Statement	<u>p</u>	3	817.
4		lines 1, 2, and 3.	7	4 5	3,772,696.
5 6		ases not included in line 2 (itemize)  See Statement I net assets or fund balances at end of year (line 4 minus line 5)			4,619.
6	ivla	i net assets of fund balances at end of year (line 4 millus line 5)	- rait ii, columiii (b), lif	16 20 T P	3,768,077.

(a) List and descr 2-story brick war	ibe the kind(s) of property sold (e.g., rehouse, or common stock, 200 shares	real estate, MLC Company)	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A					
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	
<u>a</u>		· <u> </u>			
b c		<del></del>			
	·	<del></del>		<del></del>	
e		<u> </u>			<del></del>
<del></del>	owing gain in column (h) and owned t	by the foundation on 12/31/6	59	(I) Gains (Col.	(h)
(i) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	g	ain minus col (k), b an -0-) or Losses (fi	out not less
а					
b					
<u>c</u>					
d		<del></del> -			
е				ι	
2 Capital gain net income or (	net capital loss)If (loss), en	ter -0- in Part I, line 7	2		
	or (loss) as defined in sections 1222(5	· · · · · · · · · · · · · · · · · · ·		1	
If gain, also enter in Part I, in Part I, line 8	line 8, column (c) (see instructions). I	f (loss), enter -0-	3	1	
	der Section 4940(e) for Reduce	d Tay on Net Investme			
f 'Yes,' the foundation does not o	section 4942 tax on the distributable a qualify under section 4940(e). Do not on the each column for each year, see the in	omplete this part		Yes	X No
(a)  Base period years  Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets	(d) Distribution (col. (b) divided	
2015	429,627.	8,772	2,422.		0.048975
2014	437,609.	8,780	,376.		0.049839
2013	439,016.		,931.		0.049157
2012	411,725.		,925.		0.045942
2011	186,600.	8,427	,436.		0.022142
2 Total of line 1, column (d)			2		0.216055
3 Average distribution ratio fo number of years the founda	r the 5-year base period — divide the tion has been in existence if less than	total on line 2 by 5, or by th 5 years	e <u>3</u>		0.043211
4 Enter the net value of noncl	naritable-use assets for 2016 from Par	t X, line 5	4		3,769,296.
5 Multiply line 4 by line 3			5		378,930.
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		3,795.
7 Add lines 5 and 6			7		382,725.
8 Enter qualifying distribution:	s from Part XII, line 4		8	<u> </u>	433,841.
If line Q is equal to or greater	than line 7, check the box in Part VI, line	1h, and complete that part u	sing a 1% tax r	ate. See the	

Forn	1 990-PF (2016) BOB WHITE MEMORIAL FOUNDATION 31-	1041899		F	Page 4
Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instructio	15)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter: (attach copy of letter if necessary — see instructions)				
Ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		3,	795.
	check here. ► X and enter 1% of Part I, line 27b			,	
(	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	<del> </del>			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only Others enter -0-)	2			0.
3	Add lines 1 and 2	3		3,	795.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		3,	795.
6	Credits/Payments:				
ā	2016 estimated tax pmts and 2015 overpayment credited to 2016 6a 3, 600.				
Ł	Exempt foreign organizations – tax withheld at source 6b	]			
(	: Tax paid with application for extension of time to file (Form 8868)	1 1			
c	Backup withholding erroneously withheld . 6d	1			
7	Total credits and payments. Add lines 6a through 6d	7		3,6	500.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  from 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			195.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be. Credited to 2017 estimated tax	11			
Pai	t VII-A   Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1 a		Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				
	(see Instructions for the definition)?		16		X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?		1 c		X
	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.			İ
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers				
_	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		
2					X
	If 'Yes,' attach a detailed description of the activities.		1		]
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		-		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.		3		- <del>X</del>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	/A
כ	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		- <u>*</u> -		X
_	If 'Yes,' attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or		1		
	<ul> <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> </ul>		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV		7	X	
8 8	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	AR				1
ı	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			<b>.</b>	
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	•	8 b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	r <b>49</b> 42(j)(5)			ļ
-	for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' comple	te Part XIV	9	L	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		x

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BAA

Par	t VII-A	Statements Regarding Activities (cont	inued)					
11	At any ti within th	me during the year, did the foundation, directly or e meaning of section 512(b)(13)? If 'Yes,' attach s	indirectly, own a controlled entity schedule (see instructions)			11	Yes	No X
12	Did the fo	undation make a distribution to a donor advised fund privileges? If 'Yes,' attach statement (see instructions)	over which the foundation or a disqualified petions) .	erson had		12		Х
13		oundation comply with the public inspection require	ements for its annual returns and exempti	on applica	tion?	13	Х	
14		address . • N/A ss are in care of • REBECCA POOLE	Tolonbe	ne no	870-35	E - 01		
14		at PO BOX 537, EUDORA, AR	ZIP + 4			22-0	236_	
15		1947(a)(1) nonexempt charitable trusts filing Form				N/Ā		П
	and ente	r the amount of tax-exempt interest received or a	ccrued during the year	<b>-</b> [	15			N/A
16	At any tin bank, se	ne during calendar year 2016, did the foundation have curities, or other financial account in a foreign cou	e an interest in or a signature or other authorit untry?	y over a	!	16	Yes	No X
	See the enter the	nstructions for exceptions and filing requirements name of the foreign country	for FinCEN Form 114. If 'Yes,'					
Par	t VII-B	Statements Regarding Activities for W	hich Form 4720 May Be Required					
	File Form	n 4720 if any item is checked in the 'Yes' column	unless an exception applies.				Yes	No
1 a	During th	e year did the foundation (either directly or indire	ctly)					
	(1) Enga	ige in the sale or exchange, or leasing of property	with a disqualified person?	Yes	XNo			
		ow money from, lend money to, or otherwise external in the control of the control	nd credit to (or accept it from) a	Yes	XNo			
	(3) Furn	sh goods, services, or facilities to (or accept then	n from) a disqualified person?	Yes	X No		-	
	<b>(4)</b> Pay	compensation to, or pay or reimburse the expense	es of, a disqualified person?	Yes	X No			
	(5) Tran for th	sfer any income or assets to a disqualified person be benefit or use of a disqualified person)?	(or make any of either available	Yes	XNo			
	(6) Agre found of go	e to pay money or property to a government offici lation agreed to make a grant to or to employ the offi overnment service, if terminating within 90 days)	al? ( <b>Exception.</b> Check 'No' if the cial for a period after termination	Yes	ΧNο			
t	If any an Regulation	swer is 'Yes' to 1a(1)–(6), did <b>any</b> of the acts fail ons section 53 4941(d)-3 or in a current notice reg	to qualify under the exceptions described arding disaster assistance (see instruction	ın s) <sup>?</sup>		1 b	N	/A
	Organiza	tions relying on a current notice regarding disaste	r assistance check here	•	· 📙 🔠		- 1	
C	Did the f	oundation engage in a prior year in any of the act e not corrected before the first day of the tax year	s described in 1a, other than excepted acts beginning in 2016?	5,		1 c		X
2	Taxes or private o	failure to distribute income (section 4942) (does perating foundation defined in section 4942(j)(3) o	not apply for years the foundation was a or 4942(j)(5)):					ļ
a	At the er and 6e, I	ld of tax year 2016, did the foundation have any u Part XIII) for tax year(s) beginning before 2016?	ndistributed income (lines 6d	X Yes	∏No			
	If 'Yes,' I	ıst the years ► 20 <u>15</u> , 20 , 20 , 2	<sup>0</sup>					<u> </u>
ŧ	Are there	any years listed in 2a for which the foundation is	not applying the provisions of section 49	42(a)(2)				
		to incorrect valuation of assets) to the year's undi		2(a)(2) to	,	2 6		
	-	listed, answer 'No' and attach statement — see in visions of section 4942(a)(2) are being applied to	•	a horo		2 b	X	
•	•	, 20 _ , 20 _ , 20	any of the years listed in Za, list the years	s liere.				
_							l	
	enterpris	oundation hold more than a 2% direct or indirect in eat any time during the year?	-	Yes	X No			
t	or disqua	did it have excess business holdings in 2016 as a alified persons after May 26, 1969, (2) the lapse of commissioner under section 4943(c)(7)) to dispose pse of the 10-, 15-, or 20-year first phase holding	the 5-year period (or longer period approved of holdings acquired by gift or bequest; or	on ved				
	determin	e if the foundation had excess business holdings	in 2016)			3 b	N	/A_
4 a		oundation invest during the year any amount in a e purposes?	manner that would jeopardize its			4 a		Х
	• D'' 4 TE = 1	oundation make any construction of the constru	od offer December 21, 1000 Heat and 1					
1	jeopardiz	oundation make any investment in a prior year (biggists in the propose that had not been removed frow the propose that had not been removed frow the propose in 2016?	om jeopardy before the first day of			4 b		X
BAA			-		Fo	rm <b>99</b>	0-PF (	

•				
Form 990-PF (2016) BOB WHITE MEMORIA			31-10	41899 Page (
Part VIEB Statements Regarding Activit		n 4720 May Be Red	uired (continued)	
<ul><li>5 a During the year did the foundation pay or inct</li><li>(1) Carry on propaganda, or otherwise attem</li></ul>		n (coction 4945(o))?	□vac [v]	No
(2) Influence the outcome of any specific pub			∐ Yes X	No
on, directly or indirectly, any voter registra	ation drive?	· ·	☐ Yes X	No
(3) Provide a grant to an individual for travel,	•	• •	∐ Yes X	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	i a charitable, etc., organi s)	ization described	Yes X	No
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes X	No
b If any answer is 'Yes' to 5a(1)—(5), did any or described in Regulations section 53 4945 or in (see instructions)?	f the transactions fail to n a current notice regard	qualify under the exce ding disaster assistance	ptions e	5 b N/A
Organizations relying on a current notice rega	irding disaster assistanc	ce check here	▶ [	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No
If 'Yes,' attach the statement required by Reg		• •		
6 a Did the foundation, during the year, receive a on a personal benefit contract?		, , , ,	Yes _X	No Maria
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b X
<b>7 a</b> At any time during the tax year, was the found	dation a party to a prohi	ibited tax shelter transa	action? Yes X	No
<b>b</b> If 'Yes,' did the foundation receive any proceed			transaction?	N/A 7b
Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manage	gers, Highly Paid E	mployees,
1 List all officers, directors, trustees, foundation	on managers and their o	compensation (see ins	tructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
STACEY T. RANKIN	Trustee	4,200.	0.	0
PO_BOX_537	1.00			
EUDORA, AR 71640	m	4 000		
_STEPHEN_TISDALEPO BOX 537	Trustee	4,200.	0.	0
EUDORA, AR 71640	1.00			
ALVIN REYNOLD MEYER	Trustee	4,200.	0.	0.
PO_BOX_537	1.00			
EUDORA, AR 71640				
2 Compensation of five highest-paid employees (o	ther than those included o	on line 1 – see instructio	<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 deferred compensation	(e) Expense account, other allowances
None			<u>-</u>	

3 Five highest-paid independent contractors for professional services (see in	structions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		-
		· · · · · · · · · · · · · · · · · · ·
Total number of others years are CEO 000 for an formal		
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 relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 N/A		
. 1/11		
2		
3		<del></del>
4		<del></del>
	<del></del>	
Part IX-B   Summary of Program-Related Investments (see instruc	tions)	
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2.	Amount
1		
N/A		
2		
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	<b>•</b>	0.
BAA		Form <b>990-PF</b> (2016)

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	1 a	
b Average of monthly cash balances		0 000 000
C Fair market value of all other assets (see instructions)	1c	8,902,839.
d Total (add lines 1a, b, and c)	10	8,902,839.
e Reduction claimed for blockage or other factors reported on lines 1a and	1	
1c (attach detailed explanation).  2 Acquisition indebtedness applicable to line 1 assets.	2	^
2 Acquisition indebtedness applicable to line 1 assets. 3 Subtract line 2 from line 1d	3	0.
	-3+	8,902,839.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	133,543.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,769,296.
6 Minimum investment return. Enter 5% of line 5	6	438,465.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► and do not complete this part.)	iting fo	undations
1 Minimum investment return from Part X, line 6	1	438,465.
2a Tax on investment income for 2016 from Part VI, line 5 2a 3,795.		
<b>b</b> Income tax for 2016. (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	3,795.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	434,670.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	434,670.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	434,670.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.  a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26.	1 a	433,841.
<b>b</b> Program-related investments — total from Part IX-B	1 b	133,011.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	<del></del> _
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	433,841.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	2 705
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,795. 430,046.
		430,040.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ındatıon	
BAA		Form <b>990-PF</b> (2016)

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	<b>(c)</b> 2015	<b>(d)</b> 2016
1 Distributable amount for 2016 from Part XI,				424 670
line 7  2 Undistributed income, if any, as of the end of 2016:				434,670.
<b>a</b> Enter amount for 2015 only		  -	122 065	
<b>b</b> Total for prior years: 20, 20, 20			433,965.	<del></del>
3 Excess distributions carryover, if any, to 2016:		0.		
a From 2011				
<b>b</b> From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e .	0.			
4 Qualifying distributions for 2016 from Part	0.		<del></del>	
XII, line 4 ► \$ 433,841.				
a Applied to 2015, but not more than line 2a.		<u></u>	433,841.	
			433,041.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0			
d Applied to 2016 distributable amount.	0.			
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2016	0.			0.
(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>b</b> Prior years' undistributed income Subtract line 4b from tine 2b		0.		
c Enter the amount of prior years' undistributed				<del></del>
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount — see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from				
line 2a Taxable amount — see instructions			124.	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2017				434,670.
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 2011 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a .	0.			
10 Analysis of line 9 a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				
BAA				Form <b>990-PF</b> (2016)
				1 UIIII <b>33U-FF</b> (2010)

Form 990-PF (2016) BO					31-104189	9 Page <b>10</b>
	Operating Foundat					N/A
	s, enter the date of the	ruling		•	· •	10404)(5)
	te whether the foundat		rating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the income from Part I	the adjusted net or the minimum	Tax year		Prior 3 years		(e) Total
investment return freach year listed	rom Part X for	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	
<b>b</b> 85% of line 2a.	_					
c Qualifying distribution ine 4 for each year	listed					
d Amounts included in line for active conduct of exe	mpt activities	· · · · · · · · · · · · · · · · · · ·				
<ul> <li>Qualifying distribute for active conduct of Subtract line 2d from</li> </ul>	of exempt activities	-				
3 Complete 3a, b, or alternative test relie	ed upon:	i				
a 'Assets' alternative (1) Value of all ass						
(2) Value of assets section 4942(i)(	qualifying under					
b 'Endowment' alternative minimum investment ret line 6 for each year lister	test — enter 2/3 of urn shown in Part X,					
c 'Support' alternative	e test – enter					
(1) Total support of investment inconditional dividends, rents on securities to 512(a)(5)), or results for the securities of the securities for th	ome (interest, s, payments ans (section					
(2) Support from gener more exempt organi in section 4942(j)(3	izations as provided					
(3) Largest amount an exempt orga	anızation					
(4) Gross investme						
Part XV Suppleme	entary Information any time during th	(Complete this	part only if the	foundation had	\$5,000 or more	in
	ding Foundation Manag		Structions.)		<del> </del>	
a List any managers of	f the foundation who have ar (but only if they have	e contributed more t	nan 2% of the total co than \$5,000) (See	ontributions received section 507(d)(2).)	by the foundation bet	fore the
<b>b</b> List any managers of a partnership or oth None	f the foundation who own ner entity) of which the	10% or more of the foundation has a 1	stock of a corporation of a corporation of greater interests.	on (or an equally large est	e portion of the owner	rship of
requests for funds. If complete items 2a,	of the foundation only ma the foundation makes go b, c, and d	kes contributions to fts, grants, etc (see	preselected charitable instructions) to individual	viduals or organization	ns under other condit	
<b>a</b> The name, address,	and telephone number or	e-mail address of t	he person to whom a	pplications should be	addressed:	
<b>b</b> The form in which a	applications should be s	submitted and infor	mation and materia	ils they should include	de·	
c Any submission dea	adlines:				· · · · · · · · · · · · · · · · · · ·	
d Any restrictions or	limitations on awards, s	such as by geograp	hıcal areas, charıta	ble fields, kinds of i	nstitutions, or other	factors
BAA	· · · · · · · · · · · · · · · · · · ·	TE	EA0310L 12/16/16			Form <b>990-PF</b> (2016)
		16				J. 11 (2010)

Page 11

3	Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
	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		
	Paid during the year				
See	Statement 8				
			ļ	ļ	
				ļ	
		1			
				ļ	
			ļ		
			ļ		:
			Į.		
	Total		<u> </u>	► 3a	433,841.
	Approved for future payment			1	133,011.
_	, , , , , , , , , , , , , , , , , , ,				
			i I		
				1	
				1	1
				1	
			٠		1
	Total .	L	L	<b>▶</b> 3b	
				J 1	1

Enter gross	s amounts unless otherwise indicated.	<del></del>	business income	<del></del> -	section 512, 513, or 514	(e)
1 Progr	ram convec revious:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
•	ram service revenue:	ļ	<del></del>	code		
a		<del>                                     </del>		+		
Č		+		+		
ď		<del> </del>		+		
ĕ——				+		
<u> </u>	<del></del>	<del>                                     </del>		<del>                                     </del>	_	
o Fees	and contracts from government agencies	<del>                                     </del>		+		
_	bership dues and assessments					
_	st on savings and temporary cash investments	<del>                                     </del>		14		214.
	ends and interest from securities			1 1 1		
5 Net r	rental income or (loss) from real estate:			<del>-  </del> -		
	-financed property			1 1		
<b>b</b> Not c	debt-financed property					
6 Net re	ntal income or (loss) from personal property			16	394,483.	<del></del>
7 Othe	r investment income			<del> </del>	031/1001	
8 Gain o	or (loss) from sales of assets other than inventory		<u></u>			
9 Net ii	ncome or (loss) from special events			<u> </u>	- <del></del>	
10 Gross	s profit or (loss) from sales of inventory					
<b>11</b> Othe	r revenue:					
a						· · · · · · · · · · · · · · · · · · ·
b						
d						
е						
12 Subt	otal Add columns (b), (d), and (e)				394,483.	214.
13 Total	I. Add line 12, columns (b), (d), and (e)				13	394,697.
	<ol> <li>Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation</li> </ol>	ons )			13 -	<u>394,697.</u>
(See works			nment of Exem	pt Purpose	-	394,697.
(See works	sheet in line 13 instructions to verify calculation	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.    Relationship of Activities to the     Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the
See works Part XVI Line No.	sheet in line 13 instructions to verify calculated.  Relationship of Activities to the Explain below how each activity for which in	Accomplis	ed in column (e) of	Part XVI-A c	es contributed important	ly to the

# Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							Yes	No
1 Did the d	organization directly	or indirectly er	ngage in any of the following w	ith any other organizatio	n 307			
relating	to political organizati	ions?	her than section 501(c)(3) orga	inizations) or in section :	027,			
•			a noncharitable exempt organi	zation of.			ļ.	
(1) Cash						1 a (1)		Х
(2) Othe				,		1 a (2)		X
<b>b</b> Other tra		•	•			10(2)		Ĥ
	es of assets to a none	charitable ever	mot organization			1 b (1)		X
			ble exempt organization		}-	1 b (2)	-+	X
` '	tal of facilities, equip		• •	•	<u> </u>		-+	
` '			assets .		į-	1 b (3)	$\dashv$	X
	nbursement arranger				-	1 b (4)	-+	<u>X</u>
` .	ns or loan guarantees				-	1 b (5)		<u>X</u>
			p or fundraising solicitations		<u> -</u>	1 b (6)		<u>X</u>
c Snaring	ot tacilities, equipme	ent, mailing lis	ts, other assets, or paid emplo	yees	L	1 c		<u>X</u>
d If the an	swer to any of the at	nove is 'Yes' o	complete the following schedul	Column (h) should alv	vavs show the fair ma	arket valu	e of	
the goods	s, other assets, or sen	vices given by t	complete the following schedul he reporting foundation. If the fo	undation received less than	fair market value in	irket value	C 01	
any tran	<del></del>		now in column (d) the value of					
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt organization	(d) Description of tran	sfers, transactions, and sh	aring arrang	ements	<u> </u>
N/A					<u> </u>			
					-	·—		
			-	<del></del>			_	
		<del></del>	<del></del>	<del> </del>				
				<u> </u>				
2a is the fou	undation directly or ind ad in section 501(c) o	lirectly affiliated of the Code (of	with, or related to, one or more her than section 501(c)(3)) or i	tax-exempt organizations		∏Yes	XΝ	No.
	complete the following	•	net than section 507(c)(0)) or	11 3000011 027		□''€3	[₩].	•••
<u> </u>	Name of organization	<u> </u>	(b) Type of organizatio		) Description of relati	onebin		
	Traine of organization	-	(b) Type of organization	" (	) Description of relati	Orisinp		
N/A								
				<del>-  </del>		<del></del>		
	<del></del>							
			<del></del>	<del></del>	·			
correct	enalties of perjury, I declare and complete Declaration	e that I have exami of preparer (other t	ned this return, including accompanying han taxpayer) is based on all information	schedules and statements, and to of which preparer has any know	o the best of my knowledge a riedge	and belief, it	is true,	
Sign   / 🚶	144	(1)	11. 10 n	<b>1</b>		May the IR	S discus	ss
Here <pre>✓ /`</pre>	March.	1. Kar	4001 1 5-11-1	+ Chairman		this return preparer st	hown be	wols
Signa	iture of officer or trustee	<u> </u>	Date	Title		(see instru	ctions)? /es	ำ。。ไ
	Print/Type preparer's nam	ne	Preparer's signature	Date 5/16	theck of F	TIN	45	140
n	ļ		1000 611		///Cueck		1 4 2	
Paid	Mary Ellen G		- in arificent	neemelay coa		2006221	142	
Preparer		cQueen &		<u> </u>	Firm's EIN > 71-04	<u>/4815</u>		
Use Only	· -	O Box 326						
	<u> </u> De	<u>ermott, A</u>	R 71638		Phone no (870)	<u>538-5</u>		
BAA					1	Form <b>990</b> -	-PF (2	2016)

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## **Federal Statements**

Page 1

**Client BOBWHITE** 

#### **BOB WHITE MEMORIAL FOUNDATION**

31-1041899

5/02/17

03.33PM

#### Statement 1 Form 990-PF, Part I, Line 19 Allocated Depreciation

Date <u>Acquired</u> NEW PONDS	Cost Basis	Prior Yr Depr	Method	Rate	<u>Life</u>	Current Yr Depr	Net Invest Income	Adjusted <u>Net Income</u>
8/27/01	204,201	148,045	S/L		20	10,210	10,210	0
08 CB Leveli 11/24/08	ng 5,240	2,472	S/L		15	349	349	0
09 CB Leveli: 3/12/09	ng 16,000	7,291	S/L		15	1,067	1,067	0
UNDERGROUND 1 3/16/10	PIPE 3,399	1,305	S/L		15	227	227	0
IMPROVEMENTS 10/05/10	- LEVELING 13,500	4,725	S/L		15	900	900	0
SHED 9/07/10	600	320	S/L		10	60	60	0
GOULD PUMP & 2/08/11	HITACHI MT 1,622	ΓR 1,140	S/L		7	232	232	0
8" NATIONAL 1 5/10/11	HEAD 7,050	4,699	S/L		7	1,007	1,007	0
RICELAND PUM 6/09/11	P BOWL 1,662	1,087	S/L		7	237	237	0
15HP SUBMERS 7/05/11	IBLE MOTOR 1,844	1,184	S/L		7	263	263	0
COMPUTER 6/13/13	925	478	S/L		5	185	185	0
EMPIRE WELL 7/11/13	3,140	1,122	S/L		7	449	449	0

Statement 2 Form 990-PF, Part I, Line 23 Other Expenses

	(a)	(b) Net	(c)	(d)
	Expenses	Investment	Adjusted	Charitable
	<u>per Books</u>	<u>Income</u>	Net Income	<u> Purposes</u>
Rental Expenses	Total $\frac{$}{$}$ $\frac{73,860}{73,860}$ .	\$ 73,860. \$ 73,860.	\$ 73,680. \$ 73,680.	\$ 0.

2016	Federal Statements	Page 2
Client BOBWHITE	BOB WHITE MEMORIAL FOUNDATION	31-1041899
5/02/17		03:33PM
Statement 3 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipme	ent	
Category	Accum. Book Basis Deprec. Value	Fair Market Value
Machinery and Equipment Buildings Improvements Land	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	0. 0. 8,886,600.
Statement 4 Form 990-PF, Part II, Line 15 Other Assets		Poder Manhah
STOCK AND COOP EQUITIES	Book Value \$ 12,316. \$ 12,316.	Fair Market Value 0.
Statement 5 Form 990-PF, Part II, Line 22 Other Liabilities		
Rounding	Total	2. <u>\$ 2.</u>
Statement 6 Form 990-PF, Part III, Line 3 Other Increases		
DPAD FROM COOPERATIVES TAX FREE INCOME	Total	\$ 769. 48. \$ 817.
Statement 7 Form 990-PF, Part III, Line 5 Other Decreases		
FEDERAL INCOME TAXES	Total	\$ 4,619. \$ 4,619.

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2016	Federal Sta	tements		Page 3
Client BOBWHITE	BOB WHITE MEMORIA	AL FOUNDATI	ON	31-1041899
5/02/17  Statement 8 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				03:33PM
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	 Amount
UNIVERSITY OF ARKANSAS - MONTICELLO P.O. BOX 3508 MONTICELLO AR 71656	NONE	509(a)(1)	TO PROVIDE FUNDING FOR SCHOLARSHIPS FOR CHICOT COUNTY AGRICULTURAL STUDENTS	\$ 12,000.
ROSS VAN NESS-WELLFORD VFD 103 STEPHENSON LANE EUDORA AR 71640	NONE	501 (C) (3)	TO PROVIDE FUNDING TO REPAIR BRUSH TRUCK & MATCH FOR FEMA FUNDS	10,000.
SOUTHEAST AR REGIONAL LIBRARY 107 EAST JACKSON MONTICELLO AR 71655	NONE	501 (C) (3)	TO FUNDING TO INSTALL METAL ROOF	17,000.
J. AUSTIN WHITE CULTURAL CENTER P.O. BOX 316 EUDORA AR 71640	NONE	501 (C) (3)	CHILDREN'S MUSEUM PHASE 2	100,000.
J. AUSTIN WHITE CULTURAL CENTER P.O. BOX 316 EUDORA AR 71640	NONE	501 (C) (3)	TO FUND DIRECTORS SALARY AND OPERATING SUPPORT	40,000.
THE EUDORA CHRISTIAN SCHOO 310 NORTH MAIN STREET EUDORA AR 71640	L NONE	501 (C) (3)	REFUND OF FUNDS FOR SCHOLARSHIPS AND TO SUPPORT THE ORGANIZATIONS OPERATING AND MAINTENANCE ACTIVITIES	-5,300.
THE WASHINGTON FOUNDATION PO BOX 395 EUDORA AR 71640	NONE	501 (C) (3)	TO PROVIDE FUNDING TO EXPAND READING ENRICHMENT PROGRAM	5,000.
HAMBURG SCHOOL FOUNDATION PO BOX 51 PORTLAND AR 71663	NONE	501(C)(3)	TO PROVIDE FUNDING FOR PORTLAND ELEMENTARY-PROJE CT LEAD THE WAY-INSTRUCTIONA L MATERIALS & 26 IPAD AIR 2'S W/ WIFI	25,600.

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2016	Federal Sta	tements		Page 4		
Client BOBWHITE	BOB WHITE MEMORIA	31-104189				
Statement 8 (continued) Form 990-PF, Part XV, Line 3a						
Recipient Paid During the Year  Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount _		
ALEX FOUNDATION 148 COURNEY LOOP DERMOTT AR 71638	NONE	501 (C) (3)		\$ 8,250		
CHICOT COUNTY SHERIFF'S DEPT 513 MAIN STREET LAKE VILLAGE AR 71653	NONE	509(a)(1)	TO PROVIDE FUNDS FOR COMMUNITY RESTORE- ACTIVE SHOOTER & TACTICAL EQUIPMENT	5,000		
ST JUDE CHILDRENS RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS TN 38105	NONE	509(a)(1)	TO PROVIDE FUNDING FOR AREA PATIENT SUPPORT COSTS	4,500		
TEACH FOR AMERICA-ARKANSAS 2013 South Broadway LITTLE ROCK AR 72206	NONE	POF	TO PROVIDE CHICOT COUNTY TEACHER RECRUITMENT, TRAINING, & SUPPORT	25,000		
INDIAN SWITCH WATER ASSOC PO BOX 133 EUDORA AR 71640	NONE	501 (C) (3)	TO PROVIDE FUNDING TO REPAIR AND UPGRADE 2 WATER TANKS - PHASE 2	28,000		
EUDORA CITY PARK 239 S MAIN ST EUDORA AR 71640		501 (C) (3)	TO PROVIDE FUNDING TO CONSTRUCT PAVILION, NEW PLAYGROUND EQUIPMENT, REPAIRS TO EXISTING BUILDINGS & WALKING TRAIL, SITE WORK	118,824		
DELTA COTTON BELLES, INC. PO BOX 1292 GREENVILLE MS 38702		501 (C) (3)	TO PROVIDE FUNDING FOR BREAST CANCER SUPPORT SERVICES	8,000		
ARKANSAS FOODBANK 4301 W 65TH ST. LITTLE ROCK AR 72209		501 (C) (3)	TO PROVIDE FUNDING FOR FOOD SUPPLIES FOR 6 CHICOT COUNTY PANTRIES	19,967		

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2016	Federal Stat	ements		Page 5
Client BOBWHITE	BOB WHITE MEMORIA	31-1041899		
5/02/17		· · · · · · · · · · · · · · · · · · ·		03 33PN
Statement 8 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
FREEDOM SUMMER COLLEGIATE 31 TUCK HALL HANOVER NH 03755		501 (C) (3)	STIPEND FOR 4 PHD STUDENTS TO LEAD PROGRAM TO INSTILL INTEREST IN PURSUING A COLLEGE DEGREE AND IMPROVING ACT SCORES	\$ 12,000.
			Total	\$ 433,841.

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