

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

OMB No 1545-1150

Open to Public Inspection

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-EZ and its instructions is at www.irs.gov/form990.

A	For the	e 2016 calend	ar year, or tax year beginning	, 2016	, and ending		, 20		
_	Check if a		C Name of organization			D Em	ployer identification number		
Г	Addre	ss change							
	Name	change	WALNUT LAKE CEMETERY ASSOCIATION T	RUST		71-	6105306		
	Initial	return	Number and street (or P O box, if mail is not delivered to street ad-	dress)	Room/suite	E Te	lephone number		
	Final	return/terminated	PO BOX 603			(87	0) 382-4311		
	Amen	ided return	City or town, state or province, country, and ZIP or foreign postal of	ode		F Gr	oup Exemption		
	Applic	cation pending	DUMAS, AR 71639			Nu	Number 🕨		
G	Accour	nting Method	X Cash Accrual Other (specify) ▶		H Chec	k ► X	If the organization is not		
ı	Websi	te: ►N/A			requ	red to a	ttach Schedule B		
J	Tax-exem	npt status (check only	one) - 501(c)(3) X 501(c) (13) ◀ (insert no)	4947(a)(1) or	527 (Form	1 990, 99	90-EZ, or 990-PF)		
ĸ	Form of	f organization	Corporation X Trust Association	Other					
			b to line 9 to determine gross receipts. If gross receipts are	e \$200,000 or r	nore, or if total ass	ets			
(Pa	ırt II, co	olumn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-E	z	<u> </u>	\$	183,151.		
	art I		xpenses, and Changes in Net Assets or F				ions for Part I)		
			e organization used Schedule O to respond to ar						
	1	Contributions	gifts, grants, and similar amounts received			1	13,561.		
	2	Program servi	ice revenue including government fees and contracts			2			
	3	-	dues and assessments			3			
	4	Investment in	come	AT	ÇH.1	4	5,273.		
	5 a	Gross amoun	t from sale of assets other than inventory <u>5a</u>	1	164,317.				
	Ь	Less cost or o	other basis and sales expenses		164,804.				
	C						-487.		
	6		undraising events						
	a	Gross income	from gaming (attach Schedule G if greater than						
ine	}	\$15,000)							
Revenue	b								
æ	1	from fundrais	ing events reported on line 1) (attach Schedule G if the						
		sum of such g	gross income and contributions exceeds \$15,000) 6b			1			
	С	Less direct e	xpenses from gaming and fundraising events 6c			1			
	d	Net income	or (loss) from gaming and fundraising events (add line	es 6a and 6b	and subtract				
201	-	lıne 6c)				6d	.,		
		Gross sales o	of inventory, less returns and allowances						
<u> </u>		Less cost of g	goods sold		0.				
G.	` C	Gross profit o	r (loss) from sales of inventory (Subtract line 7b from line 7a)		7c			
AM	8	Other revenue	e (describe in Schedule O)			8			
\leq	9	Total revenu	ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		<u></u>	9	18,347.		
<i>´</i> .	10	Grants and si	milar amounts paid (list in Schedule O) A.	CRECE	T/E; ···	10	18,035.		
Expenses	11	Benefits paid	to or for members		4 A 7 7 7 1 1 1	11			
	12	Salaries, othe	r compensation, and employee benefits			12	1,440.		
	13	Professional f	fees and other payments to independent contractors 🛣	APR .0 .;	8 2017 3	13	1,100.		
	14	Occupancy, re	ent, utilities, and maintenance			14	,		
	15		ications, postage, and shipping	Dene	1 112	15			
	16		es (describe in Schedule O)	THE PARTY OF	Ia.U.I.	16	2,136.		
	17		ses. Add lines 10 through 16		i	17	22,711.		
Ś	18	•	ficit) for the year (Subtract line 17 from line 9)			18	-4,364.		
Assets	19		r fund balances at beginning of year (from line 27, co						
As			gure reported on prior year's return)			19	250,196.		
Net	20		s in net assets or fund balances (explain in Schedule O) A.			20	1,590.		
	21		fund balances at end of year Combine lines 18 through 20	<u></u>	<u></u>	21	247,422.		
Fο	r Paper	work Reduction	n Act Notice, see the separate instructions				Form 990-EZ (2016)		

JSA

6 q

Form 990-EZ (2016)

79107

Page 3

Yes Note the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.	Part '	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this	in the Part V) '	
detailed description of each activity in Schedule O Were any significant changes made to the organizing of governing documents? If Yes, attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the 34 John the organization was unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? If Yes, 10 in a 35a, has the organization face a Form 89a-1 for the year? If Yes, 10 in a 35a, has the organization face a Form 89a-1 for the year? If Yes, 10 in a 35a, has the organization discal form they are? If Yes, 10 in a 35a, has the organization of the 30 in (1), 50 in (.			$\overline{}$	No
Sab Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? If "Yes," to line 35a, has the cognization field a form 960-17 for the year? If "No," provide an explanation in Schedule 0, 35b organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule 0, Part III. 48 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule 0, Part III. 48 37a Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37a Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 120-POL for this year? 37d Did the organization file	33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
Sab Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? If "Yes," to line 35a, has the cognization field a form 960-17 for the year? If "No," provide an explanation in Schedule 0, 35b organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule 0, Part III. 48 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule 0, Part III. 48 37a Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37a Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37b Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 120-POL for this year? 37d Did the organization file	34	detailed description of each activity in Schedule O	33		Х
activities (such as those reported on lines 2, 6a, and 7a, among others)? bit "Yes": bit a 55a, bat the organization field a form 980-17 for yeave? if No. 'provide an explanation in Schedule 0, 35b 35b 10 for organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35c 37a 37a 37b 37a 37	25-	change on Schedule O (see instructions)	34		X
b If "Yes," to line 35a, has the organization is asction 501c(l/4), 501c(l/5), 501c(l/6), 501c(l/6	35a		250		Х
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice reporting, and proxy lax requirements during the year? If "Yes," complete Schedule C, Part III. 35c 37a 37b 37b 37a 37b 37a 37b 37a 37b 37a 37b 37b 37a 37b 37b	.				Λ
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations but he programization with a states with which a copy of this returns of the states with which a copy of this returns filed. 41 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on ine. 42 All organization has one and solution of the states are of the states are of the reganization has a file greated on organization the states with which a copy of this returns in filed. 42 The organization has of each of the reganization has a file greated and the reference on the reganization has a file greated and the reference on the reganization has a single filed for the states are of the foreign country. 43 Exciton 4911 ►			330		
Dut the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete apphicable parts of Schedule N., 200 and 2	·		35c		Х
during the year? If "Yes," complete applicable parts of Schedule N. 37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a b Did the organization file Form 1120-POL for this year? 37b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38b Did the organization benefit and still outstanding at the end of the tax year covered by this return? 38c Section 501(c)(3) againizations Enter and and the state of the foreign country benefit and the state of the foreign country benefit and enter the total amount involved. 38b Section 501(c)(3) againizations Enter amount of tax imposed on the organization during the year under section 4911 P section 4912 P section 4912 P section 4913 P section 4914 P section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organizations managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. • All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8866-T. 11 Located at ▶ P.O. BOX 187 DUMAS, 7R. 21P + 4 P 71639 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United St	36		000		
The ramount of political expenditures, direct or indirect, as described in the instructions ▶ 37a Did the organization file Form 1120-POL for this year? 38b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?			36		Х
b Did the organization file Form 1120-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved. b If "Yes," complete Schedule L, Part II and enter the total amount involved. 38b 9 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 . 38a b Gross receipts, included on line 9, for public use of club facilities. 39b 9 Gross receipts, included on line 9, for public use of club facilities. 9 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4912 ▶ section 4955 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I. cost and 4918 ▶ section 4951 organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c rembursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelfer transaction? If "Yes," complete Form 8868-T. 14 List the states with which a copy of this return is filed ▶ 15 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a fannancial account in a foreign country load of the foreign country ▶ 16 Section 4947(a)(1) nonexempt chairtable trusts filing Form 990-EZ in lieu of Form 1041 - Check here. 17 At any time during the calendar year, did the organization maintain an office outside the United States? 18 Did the organization maintain any donor	37a				
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved. 38a Section 501(c)(7) organizations Enter Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations Enter amount of tax imposed on the organization duming the year under section 4911 ▶ section 4911 ▶ section 4912 ▶ section 4911 ▶ section 4911 ▶ section 4912 ▶ section 4911 ▶ section 4911 ▶ section 4911 ▶ section 4912 ▶ section 4911 ▶ section 4915 section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 sexess benefit transaction duming the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization and the didentified persons during the year under sections 4912, 4955, and 4958. d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed by the organizations of the property of the section o	b		7 1	, , , , , , , ,	X
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		:	1.0	<i>3</i>
39 Section 501(c)(7) organizations. Enter a Intitation fees and capital contributions included on line 9. b Gross receipts, included on line 9, for public use of club facilities. 39b 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4915 ▶ b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part1 . c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 did Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. List the states with which a copy of this return is filled ▶ 1 List the states with which a copy of this return is filled ▶ 2 The organization's books are in care of ▶ MBRCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 Tild 10 Ti			38a		X
a Initiation fees and capital contributions included on line 9. 5 Gross receipts, included on line 9, for public use of club facilities. 5 Gross receipts, included on line 9, for public use of club facilities. 5 Section 501(c)(3) granizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4912 ▶ section 4915 ▶ 5 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I. 6 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 6 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. 6 All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete form 8886-T 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 1 List the states with which a copy of this return is filed ▶ 2 List the states with which a copy of this return is filed	b	If "Yes," complete Schedule L, Part II and enter the total amount involved	J., ,	٠,	ۇ د د
40a Section 501(c)(3) organizations. Enter amount of fax imposed on the organization during the year under section 4911 №	39	Section 501(c)(7) organizations Enter][::	3.	
Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► section 4916 ► section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part 1	а	Initiation fees and capital contributions included on line 9] ` , ,		* *
b Section 4911 ▶ section 4912 ▶ section 4955 ▶ b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T. 41 List the states with which a copy of this return is filed ▶ 12 The organization's books are in care of ▶MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 71639 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States?	b	Gross receipts, included on line 9, for public use of club facilities	* .		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part 1	40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	, ,		
excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I			, "	, "	
that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	þ		8,	,	
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ►					
on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. 1 List the states with which a copy of this return is filed		•	40b		
4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. List the states with which a copy of this return is filed ▶ 12a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 15a The organization to power a selection of the firm and the authority over A single part of the authority over A single part of the authority over A selection of the authority over A sele	С		, ,	s.	,
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. List the states with which a copy of this return is filed ▶ 41a The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 Located at ▶ P.O. BOX 187 DUMAS, AR ZIP+4 ▶ 71639 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States?				, :	,
All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed ▶ 42a The organization's books are in care of ▶MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 Located at ▶ P. O. BOX 187 DUMAS, AR Located at ▶ P. O. BOX 187 DUMAS, AR At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) C At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here. and enter the amount of tax-exempt interest received or accrued during the tax year. 44 Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. 44 Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. 45 Did the organization receive any payments for indoor tanning services during the year? 46 If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 45 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes." Form 990 and Schedule R may need to be completed instead of becompleted instead of Entity within the meaning of section 512(b)(13)? If "Yes." Form 990 and Schedule R may need to be completed instead of the completed instead of the controlled entity within the meaning of secti	_		, ~	' <u>"</u>	;
All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	u		V.,	,	. ,
transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed ▶ List the states with which a copy of this return is filed ▶ Located at ▶ P.O. BOX 187 DUMAS, AR Diametria and a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization maintain an office outside the United States? At any time during the calendar year, did the organization form 990-EZ in lieu of Form 1041 - Check here. At any time during the calendar year, did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ Did the organization necreve any payments for indoor tanning services during the year? At 44a At 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? At 55a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	_			<i>j</i>	,
The organization's books are in care of ▶ MERCHANTS & FARMERS BANK Telephone no ▶ 870-382-4311 Located at ▶ P.O. BOX 187 DUMAS, AR ZIP + 4 ▶ 71639 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) At any time during the calendar year, did the organization maintain an office outside the United States?	C		1	~°/	X
The organization's books are in care of ▶MERCHANTS & FARMERS BANK Telephone no	41	•	100		
Located at ▶ P.O. BOX 187 DUMAS, AR At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States?		· · · · · · · · · · · · · · · · · · ·	2-43:	1	
a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States?					
If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ► 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	b		er	Yes	No
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States?			42b		Х
Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States?			3.		<i>a</i>
c At any time during the calendar year, did the organization maintain an office outside the United States?					3 % 3 %
If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		·		·	1
Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	C	· · · · · · · · · · · · · · · · · · ·	42c		<u>X</u>
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 Yes N 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	40	· · · · · · · · · · · · · · · · · · ·			\Box
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. c Did the organization receive any payments for indoor tanning services during the year? d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	43		• • •		
Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		and enter the amount of tax-exempt interest received of accided during the tax year,		Yes	No
completed instead of Form 990-EZ	442	Did the organization maintain any donor advised funds during the year? If "Yes" Form 990 must be	-		
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	774		44a	in a romi	X
c Did the organization receive any payments for indoor tanning services during the year?	b				
c Did the organization receive any payments for indoor tanning services during the year?	_		44b		x
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	С		-		X
explanation in Schedule O			~ ~		12.1h
b Did the organization have a controlled entity within the meaning of section 512(b)(13)?					
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	45a		45a		Х
meaning of section 512(b)(13)? If 'Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	3 ,500		, ,
Form 990-EZ (see instructions) 45b			25%	30	ržid
		Form 990-EZ (see instructions)	45b		_X

JSA 6E1029 1 000

Form 990-EZ (2016)

Form 99	0-EZ (2016)						Page 4
	•					Yes	No
46	Did the organization engage, directly or indirectly,	•	_				
•	to candidates for public office? If "Yes," complete S	chedule C, Part I.	<u> </u>	<u></u>	46		Х
Part							
	All section 501(c)(3) organizations mus	t answer question	is 47-49b and 52, a	and complete the ta	bles fo	r line	es
	50 and 51.						
	Check if the organization used Schedule	O to respond to	any question in this	Part VI		<u></u>	<u>. L.</u>
47	Did the organization engage in lobbying activities	or have a section	501(h) election in	effect during the tax		Yes	No
	year? If "Yes," complete Schedule C, Part II				47		<u></u>
48	is the organization a school as described in sectio						
49 a	Did the organization make any transfers to an exe	-	_				L
b	If "Yes," was the related organization a section 527	•				L	
50	Complete this table for the organization's five high	•					id key
	employees) who each received more than \$100,00				ter "No	ne "	
	(a) Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	(d) Health benefits, contributions to employee benefit plans, and deferred	e) Estima		
		devoted to position	(Forms W-2/1099-MISC)	compensation	other co	mpens	ation
]					
		-]				
		1					
		1					
			j				
51	Complete this table for the organization's five his \$100,000 of compensation from the organization (a) Name and business address of each independent contraction.	If there is none, ent	d independent contrier "None " (b) Type of service		mpensatio		than
d	Total number of other independent contractors ear	ch receiving over \$	100,000▶				
52	Did the organization complete Schedule A? No completed Schedule A					s X	No
Jnder p	malties of perjury, I declare that I have examined this return, inclined, and complete. Declaration of preparer (other than officer) is be	uding accompanying sch	edules and statements, and	d to the best of my knowle	dge and	belief,	ıt ıs
rue, cor	Williahantax / Amus Dank		which preparer has any kn	lowledge			
	Lenda Duce VIITE	2		03/16/2017			
Sign	Signature of officer			Date			
lere							
	Type or print name and title						
Paid	Print/Type preparer's name Preparer's s	signature	Date)	Check if P1	ΓIN		
Prepa	KEVIN HORN	W-	3/20/2	self-employed I	20037	2843	<u> </u>
Jse C	Erroria access RKD T.T.D			Firm's EIN			
Jac C	Firm's address P.O. BOX 3667			Phone no 501-3	72-10	040	
	LITTLE ROCK, AR 722	03-3667					
May th	e IRS discuss this return with the preparer shown a	above? See instruction	ons <u></u>	<u></u>	XYe	s 🗀	No
					004	- F-7	

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

20**16**

2015 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Inspection
Employer identification number

WALNUT LAKE CEMETERY ASSOCIATION TRUST	
	ATTACHMENT 1
FORM 990EZ, PART I - INVESTMENT INCOME	
DESCRIPTION	AMOUNT
DIVIDEND INCOME	1,772.
INTEREST INCOME	3,501.
TOTAL	5,273.
FORM 990EZ, PART I - OTHER EXPENSES	ATTACHMENT 2
INTEREST	458.
UTILITIES	304.
NSURANCE PREMIUMS	1,332.
TAXES	42.
TOTAL	2,136.
FORM 990EZ, PART I - OTHER CHANGES IN FUND BALANCES	ATTACHMENT 3
INCREASES IN FUND BALANCES	
2016 ACTIVITY REPORTED IN 2015	132.
PRIOR PERIOD ADJUSTMENT	2,414.
TOTAL	2,546.
DECREASES IN FUND BALANCES	
2017 ACTIVITY REPORTED IN 2016	956.
TOTAL	956.

Schedule O (Form 990 or 990-EZ) 2016 Page				
Name of the organization	Employe	Employer identification number		
WALNUT LAKE CEMETERY ASSOCIATION TRUST				
•	ATTACHI	MENT 4		
FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS				
	BEGINNING	END		
DESCRIPTION	OF YEAR	OF YEAR		
CASH	6,403.	6,418.		
SAVINGS	56,591.	23,455.		
INVESTMENTS - SECURITIES	187,202.	217,549.		
TOTALS	250,196.	247,422.		