

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-PF

Return of Private Foundation

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

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052 2016

		day year 2016 or tay year had inning				agupt. Upen	rio runiic inspection		
		dar year 2016 or tax year beginning	, 2016, 8	and ending		14-461	, 20		
	-	ICHLY	1	identification number					
					81-3166				
		and street (or P O box number if mail is not delivered to street address) 3RD STREET	R	oom/suite	(870)77	number (see instructions)		
_		wn, state or province, country, and ZIP or foreign postal code							
	•	KANA, AR 71854			C If exempt	ion application is pending,	check here		
			of a former public chari	th.	D 4 Faraia	n organizations, check he			
•	OHECK (Final return Amended re	·	ıy	D I. Foreig	n organizations, check he	ie P		
		Address change Name chan			2. Foreig	n organizations meeting th	ne 85% test,		
н (Check	type of organization: X Section 501(c)(3) exempt pri	-		check	ion · · · • •			
Ϊ,	_		on		foundation status was teri 07(b)(1)(A), check here				
1		rket value of all assets at J Accounting method	X Cash	Accrual	1				
		year (from Part II, col (c), Other (specify)	21 00011	100i dai		ndation is in a 60-month te ction 507(b)(1)(B), check i			
	ine 16)		he on cash hasis)		under set	MON SOY(D)(1)(D), CHECK I	iele		
_	art I	Analysis of Revenue and Expenses (The total of	T Cach Backs,		l		(d) Date		
•	. 3	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable		
8	₽	the amounts in column (a) (see instructions))	books	in	come	income	purposes (cash basis only)		
-=	<u>P</u> 1	Contributions, gifts, grants, etc., received (attach schedule)	10,000	 	(cash basis				
f	12	Check Influence of the foundation is not required to attach Sch B	10,000		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
	3	Interest on savings and temporary cash investments		[<u> </u>			
		Dividends and interest from securities							
בַ	5 4 5 a	Gross rents							
	b b	Net rental income or (loss)					-		
		Net gain or (loss) from sale of assets not on line 10	<u> </u>		· · · · · · · · · · · · · · · · · · ·	****			
nge u	2 b	Gross sales price for all assets on line 6a			REC	EWEN			
9	7	Capital gain net income (from Part IV, line 2)			4. 4.331.54	The latest	1- 141		
8	6a b 7	Net short-term capital gain	***************************************	2	MAY 6	9 (017 0			
	9	Income modifications	** ***********************************	(2)	}······(())/* (()·····)	3 201/	 		
	10a	Gross sales less returns and allowances							
	b	Less: Cost of goods sold		<u> </u>	COD	EN UT			
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	10,000		0				
_	13	Compensation of officers, directors, trustees, etc							
nses	14	Other employee salaries and wages				······································			
Sus	15	Pension plans, employee benefits							
ğ	16a	Legal fees (attach schedule)							
山	Ь	Accounting fees (attach schedule)							
Ķ	С	Other professional fees (attach schedule)					· · · · · · · · · · · · · · · · · · ·		
tra	17	Interest		<u> </u>					
nis	18	Taxes (attach schedule) (see instructions)							
Ē	19	Depreciation (attach schedule) and depletion	<u> </u>	 		<u> </u>			
Ą	20	Occupancy							
5	21	Travel, conferences, and meetings		-					
8	22	Printing and publications		 -					
Operating and Administrative Expe	23	Other expenses (attach schedule) STM103	3,764						
era	24	Total operating and administrative expenses.			-	,			
ă	-	Add lines 13 through 23	3,764	*			0		
_	123	Contributions, gifts, grants paid	3.75	}			0		
	26	Total expenses and disbursements. Add lines 24 and 25 .	3,764	<u> </u>	<u>.</u>		0		
	27	Subtract line 26 from line 12: Excess of revenue over expenses and disbursements	6 224]					
	a b	at the second second	6,230						
	C	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	**************************************	<u> </u>					

Form 990-PF (2016)

orn	1 990·	PF (2016) SOW RICHLY		81-31	66878 Page 2
Ď-	- I	Attached schedules and amounts in the description column	Beginning of year	End o	f year
ra	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		6,325	6,325
l	2	Savings and temporary cash investments			
ļ	3	Accounts receivable >			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
- 1		Less' allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts			L
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)		 	
	i	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		 	The state of the s
	'*	Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	 		
	סי	Instructions. Also, see page 1, item I)	0	6,325	6,325
	17	Accounts payable and accrued expenses			
	18	Grants payable			1
S	ł	Deferred revenue			1
Ě	19	Loans from officers, directors, trustees, and other disqualified persons	 	89	
Liabilities	20	Mortgages and other notes payable (attach schedule)		 	1
Ë	21				1
	22	Other liabilities (describe Total liabilities (add lines 17 through 22)	0	89	
	23	Foundations that follow SFAS 117, check here			1
	1	and complete lines 24 through 26 and lines 30 and 31.			
ces		Unrestricted			
ă	24	Temporarily restricted			1
Balanc	25	· · · ·			
ᅙ	26	Permanently restricted			
or Fund			ļ		
×		and complete lines 27 through 31. Capital stock, trust principal, or current funds	,		
S	27				
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	 	6,236	†
As	29	Retained earnings, accumulated income, endowment, or other funds	0	6,236	-
Net	30	Total net assets or fund balances (see instructions)		0,250	1
Z	31	Total liabilities and net assets/fund balances (see	0	6,325	
	1	instructions)		0,323	
	art i				T
1	ıota	I net assets or fund balances at beginning of year - Part II, column (a), line	ou (must agree with	1	
_	end-	of-year figure reported on prior year's return)		2	6,236
		r amount from Part I, line 27a			0,250
		er increases not included in line 2 (itemize)			6,236
		lines 1, 2, and 3		5	0,236
		reases not included in line 2 (itemize)	olumn (h) line 20		6,236
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	
FF4					Form 990-PF (2016)

		actment lace		81-31	.66878 Page 3
(a) List and describ	(a) List and describe the kind(s) of property sold (e.g., real e.g., real e.g	estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr.)
1a					
p ,					
<u>c</u>					
<u>d</u>					
(2) 6	40.5	(1)			. " ,
(e) Gross sales price			or other basis pense of sale	(h) G (e) plus	ain or (loss) (f) minus (g)
a					
b					
<u>c</u>		ļ			
d					
Complete only for accets show	ving goin in column (h) and average h	the foundation a	12/21/60	<u> </u>	·····
Complete only for assets show		Ţ		(I) Gains (C	Col (h) gain minus ot less than -0-) or
(I) F M V as of 12/31/69			ess of col (ı) l (j), if any		(from col (h))
a		 			
b					
С					
d					
в					
Part V Qualification U For optional use by domestic privi	nder Section 4940(e) for Rate foundations subject to the section	Reduced Tax of			
		• •		•	Yes No
(a) Base period years	(b)		(c) of noncharitable-use as	Dis	(d) stribution ratio) divided by col (c))
2014					
2013					
					
2011					
2 Total of line 1 column (d)				2	
• •				· · - -	
_				3	
·					
4 Enter the net value of nonchar	ritable-use assets for 2016 from Par	t X, line 5		4	
5 Multiply line 4 by line 3				5	0
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6	
- Littor 170 of Hot his countries	202 (. / v 0	· · · · · · · · · ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·

7 Add lines 5 and 6

Part VI instructions

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

		81-3	16687	88	F	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instru	ıctic	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			77.717		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				0
	here and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of					
	Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0
3	Add lines 1 and 2	3				
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	,			
6	Credits/Payments:			•		
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a					
b	Exempt foreign organizations - tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c		i			
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
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				
T	tVII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			<u></u>	Yes	No
	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		· -			
-	Instructions for the definition)?			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		ļ		··· ···	
	published or distributed by the foundation in connection with the activities.			Ī		
С	Did the foundation file Form 1120-POL for this year?		1	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1		
_	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$		1	1		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	_		ŧ		
•	on foundation managers > \$			1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	İ	х
-	If "Yes," attach a detailed description of the activities.					····
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			1		
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		· -	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		.	5		X
•	If "Yes," attach the statement required by General Instruction T.		·		T	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			Í		
	By language in the governing instrument, or			1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			f		
	conflict with the state law remain in the governing instrument?			6	Х	
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		🗀	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				7	
				1		
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		-	1		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		.	8b [†]	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		ļ		• • • • • • • • • • • • • • • • • • • •	
_	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"		Ī	İ	İ	
	complete Part XIV			9	,	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
. 🗸	names and addresses	STW	1114	10	x	

		-316687	8	F	age 5
Pa	rt VII-A Statements Regarding Activities (continued)				<u> </u>
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			Yes	No
	meaning of section 512(b)(13)? if "Yes," attach schedule (see instructions)		11		х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13		Х
	Website address ► N/A	_			
14	The books are in care of ► RICHARD WAGNON Telephone no. ►	870-77	4-22	222	
		71854			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here				▶ □
	and enter the amount of tax-exempt interest received or accrued during the year	5			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority			Yes	No
	over a bank, secunties, or other financial account in a foreign country?		16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of		~		
	the foreign country				
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		******	***************************************	<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_	Ī		
	disqualified person?	No	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	No	Ŧ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No 2	ŧ		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_	1		
	the benefit or use of a disqualified person)?	No	ļ		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	_	ļ		
	foundation agreed to make a grant to or to employ the official for a period after	_	1		
	termination of government service, if terminating within 90 days.)	No	1		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	_	[
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	<u>.</u> L	1b		
	Organizations relying on a current notice regarding disaster assistance check here] [111		,,,,_,
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		ł		
	were not corrected before the first day of the tax year beginning in 2016?		1c		<u>X</u> _
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		ŧ		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		ŧ		
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	_	1		
	6e, Part XIII) for tax year(s) beginning before 2016?	No 2	ŀ		
	If "Yes," list the years		ł		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		f		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		ŧ		
	all years listed, answer "No" and attach statement - see instructions.)		2b		<u>X</u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1		
	<u> </u>		1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	_	1		
		ON 2	1		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		ļ		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		Ī		
	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 2016.)	 	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes? .		4a		<u>X</u>
b	, , , , , , , , , , , , , , , , , , , ,		1		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?		4b	ı	X

Form 990-PF (2016)

EEA

Form 990-PF (2016) SOW RICHLY						81-3166		Page 6
Part VII-B Statements Regarding Activitie	s for \	Nhich Forr	n 4720	May Be	Requir	ed (continued))	
5a During the year did the foundation pay or incur any arr	ount to:				_			
(1) Carry on propaganda, or otherwise attempt to influ	ence leg	gislation (section	n 4945(e	e))?	L	Yes X No		
(2) Influence the outcome of any specific public electi	on (see s	section 4955);	or to car	ry on,			1	
directly or indirectly, any voter registration drive?					[Yes X No		
(3) Provide a grant to an individual for travel, study, o	r other si	imilar purposes	?		[Yes X No	1	
(4) Provide a grant to an organization other than a cha	arıtable,	etc., organızati	on descr	nbed in	_		1 1	
section 4945(d)(4)(A)? (see instructions) .					[Yes X No	1	
(5) Provide for any purpose other than religious, char	table, so	ientific, literary	, or educ	cational	_		1	
purposes, or for the prevention of cruelty to children	en or ani	mals?			[Yes X No	1	
b If any answer is "Yes" to 5a(1)-(5), did any of the trans	sactions	fail to qualify u	nder the	exceptions of	describe	ni t		
Regulations section 53.4945 or in a current notice reg-	ardıng dı	saster assistar	nce (see	instructions)	?	<u></u> .	5b	
Organizations relying on a current notice regarding dis	aster as	sistance checl	here			▶ 🔲		
c If the answer is "Yes" to question 5a(4), does the foun	dation cl	aim exemption	from the	e tax			1	
because it maintained expenditure responsibility for th					[Yes No	1 1	
If "Yes," attach the statement required by Regulations					_			
6a Did the foundation, during the year, receive any funds	directly	or indirectly, to	рау рге	emiums			1 1	
on a personal benefit contract?					[Yes X No	1 1	
b Did the foundation, during the year, pay premiums, dir	ectly or i	ndirectly, on a	persona	l benefit cont	ract?	-	6ь	X
If "Yes" to 6b, file Form 8870.	•							
7a At any time during the tax year, was the foundation a	party to a	a prohibited tax	shelter	transaction?	. [Yes X No		
b If "Yes," did the foundation receive any proceeds or hi					ction?		7b	
Part VIII Information About Officers, Dire	ectors.	Trustees.	Found	dation Ma	nager	s, Highly Paid	Emplo	yees,
and Contractors		,					•	•
1 List all officers, directors, trustees, foundation mana	igers an	d their compe	nsation	(see instru	ctions).			
	(b) Titl	e, and average	(c) Co	mpensation	(d)	Contributions to	(e) Exper	nse account,
(a) Name and address	devot	rs per week ed to position		iot paid, iter -0-)		oyee benefit plans erred compensation	other a	liowances
RICHARD WAGNON		PRESIDENT						
216 E 3RD, Texarkana, AR 71854		0.00	}	0		0		0
			1					
			†					
			ļ					
2 Compensation of five highest-paid employees (other	r than th	nose included	on line	1 - see instr	uctions	. If none, enter	1	
"NONE."					•			
		(b) Title, and				(d) Contributions to		
(a) Name and address of each employee paid more than \$50	,000	hours per v	veek	(c) Comper	sation	employee benefit plans and deferred		nse account, llowances
		devoted to p	osition			compensation		
NONE								
						}]	
		1		1			<u></u>	
	<u>_</u>	1						
		1					}	
						<u></u>	1_	
Total number of other employees paid over \$50,000								0
EEA							Form 990	0-PF (2016)

81-3166878

Form 990-PF (2016)

Form 990-PF (2016)

Total. Add lines 1 through 3

SOW RICHLY

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	n found	ations,
	see instructions.)		
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	0
þ	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	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	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	!!	
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	oundat	ions
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5 2a	1 1	
b	Income tax for 2016. (This does not include the tax from Part VI.)	1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	0
Pa	rt XII Qualifying Distributions (see instructions)		
			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4.	•
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 1b	0
b	Program-related investments - total from Part IX-B	IB	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
•	purposes	2	
3	·	3a	
a	Suitability test (prior IRS approval required)		
b	Cash distribution test (attach the required schedule)	3b 4	
4	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	 - 	
5	Enter 1% of Part I, line 27b (see instructions)	5	
_	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
6	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the		tion.
		o iouiida	uon
	qualifies for the section 4940(e) reduction of tax in those years.		

	m 990-PF (2016) SOW RICHLY art XIII Undistributed Income (see instr	ructions)		81-3166878	Page !
		(a)	(b)	(c)	(4)
1	Distributable amount for 2016 from Part XI, line 7	Corpus	Years pnor to 2015	2015	(d) 2016
2	Undistributed income, if any, as of the end of 2016				
á	_			•	
t	Total for prior years:				·····
3	Excess distributions carryover, if any, to 2016:	***************************************			'
a				#	
t	<u> </u>	-		1	
c				1	
o	From 2014	1			
е	From 2015	1		‡	
f	Total of lines 3a through e	1	1	1	
4	Qualifying distributions for 2016 from Part XII,				······································
	line 4: ▶ \$		-	1	
а	the second section of the section of the sect			[
b	Process of prior years				***********
	(Election required - see instructions)			1	
С	The area in a control out of corpus (Liection)		11411	!!!!! .!!! !.!!!!!!!!!!	
	required - see instructions)			<u> </u>	
d	Applied to 2016 distributable amount			· · · · · · · · · · · · · · · · · · ·	
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2016			**************************************	*************
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)			1	
6	Enter the net total of each column as		1	1	
•	indicated below:			1	
a b	Corpus. Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income. Subtract			**************************************	**
	line 4b from line 2b				
С	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		•	ļ	
đ	Subtract line 6c from line 6b. Taxable	''\			-157
	amount - see instructions				
е	Undistributed income for 2015. Subtract line	· · · · · · · · · · · · · · · · · · ·		······································	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	4a from line 2a. Taxable amount - see			-	
	instructions]	ŧ	
f	Undistributed income for 2016. Subtract lines				
	4d and 5 from line 1. This amount must be		1		
	distributed in 2017				0
7	Amounts treated as distributions out of corpus			· · · · · · · · · · · · · · · · · · ·	
	to satisfy requirements imposed by section		1	!	
	170(b)(1)(F) or 4942(g)(3) (Election may be			‡	
_	required - see instructions)		 		
8	Excess distributions carryover from 2011 not	ľ		**************************************	!-'`-!!!''!
9	applied on line 5 or line 7 (see instructions)		**************************************	<u></u>	
3	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a			**************************************	······································
10	Analysis of line 9:			***************************************	
a	Excess from 2012		•		· · · · · · · · · · · · · · · · · · ·
b	Excess from 2013		1	1	
c	Excess from 2014			1	
d	Excess from 2015		1		
е	Excess from 2016		1	1	
EEA			<u> </u>	<u>_</u>	

m 9	990-PF (2016) SOW RICHLY	Y			81-3166878	P
ırt	XIV Private Operating Four	ndations (see in:	structions and Pa	rt VII-A, question 9)	
1	If the foundation has received a ruling or	determination letter th	nat it is a private opera	iting		
	foundation, and the ruling is effective for	2016, enter the date o	of the ruling		<u> </u>	
	Check box to indicate whether the found	ation is a private oper	ating foundation descr	nbed in section	4942(j)(3) or 4942	2(j)(5)
	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(a) Takal
	investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					-
!	Amounts included in line 2c not used directly for active conduct of exempt activities .					
•	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon:					
	"Assets" alternative test - enter: (1) Value of all assets					
•	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
,	of minimum investment return shown in Part X, line 6 for each year listed	· ·				
•	"Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
_	(4) Gross investment income		41-14116	41 - 6 1 - 41 1 -	1.05.000	
t	XV Supplementary Informa	•	_	the foundation ha	d \$5,000 or more in	assets at
_	any time during the yea		ons.)			
	Information Regarding Foundation M List any managers of the foundation wh before the close of any tax year (but on	o have contributed me				
	SHEILA WAGNON, RICHARD WA					
)	List any managers of the foundation who ownership of a partnership or other entitions.				portion of the	
_	NONE				· · · · · · · · · · · · · · · · · · ·	
	Information Regarding Contribution,	Grant, Gift, Loan, S	cholarship, etc., Pro	grams:		
	Check here ► if the foundation online unsolicited requests for funds. If the foundations complete items 23 h	ndation makes gifts, g				
<u> </u>	other conditions, complete items 2a, b, The name, address, and telephone num		s of the person to who	m applications should be	addressed:	
	990APP					

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

Any submission deadlines:

	Grants and Contributions Paid During the Recipient	If recipient is an individual, show any relationship to	Foundation		
	Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
	Paid during the year				
				į	
		}			•
		1		l	
				1	1
			1	1	
	Total	1		▶ 3a	
b	Approved for future payment	· · · · · · · · · · · · · · · · · · ·	<u></u>	<u>> 3a</u>	
			•		
			1		
			1		
			1		
	Total	<u> </u>		▶ 3b	
		 	 		

		F(2016) SOW RICHLY				81-31668	78 Page 12
		A Analysis of Income-Producing	Activities		,		
Ent	ter gross	amounts unless otherwise indicated.	(a) Business	d business income (b) Amount	(c)	(d) Amount	(e) Related or exempt function income (See instructions.)
1	-	n service revenue:	code				<u> </u>
		•					
			ļ		-		
			<u> </u>		 		
	_				 		
	f				 		
	g Fees	s and contracts from government agencies			 		
2	_	rship dues and assessments			 		
		on savings and temporary cash investments .					
4	Dividen	ds and interest from securities					
5	Net rent	tal income or (loss) from real estate:					
		t-financed property	<u> </u>		ļ		· · · · · · · · · · · · · · · · · · ·
		debt-financed property		l 	ļ		
6		tal income or (loss) from personal property			 		
7		nvestment income			 		
8		(loss) from sales of assets other than inventory			 		
		ome or (loss) from special events					
		profit or (loss) from sales of inventory	<u> </u>				
	L-	evenue: a			 	 	
			 				
	. —				 		
	е						
12	Subtota	al. Add columns (b), (d), and (e)					
13	Total.	Add line 12, columns (b), (d), and (e)				13	
		heet in line 13 instructions to verify calculations.)					
P	art XV	Relationship of Activities to the					
_	.ine No. ▼	Explain below how each activity for which incomplishment of the foundation's exempt p	-	• •		•	
						 	
_						 	
_							
							· · · · · · · · · · · · · · · · · · ·
							
		 					
		 					
_							
_		 					· · · · · · · · · · · · · · · · · · ·
					~		
							· · · · · · · · · · · · · · · · · · ·
							
	<u> </u>						
						· 	
		 		 			
_							
EE/	_ 						Form 990-PF (2016)

Form 990-PF (2016)

	90-PF (2		OW RICHLY			81-31			ge_13
Part.			n Regarding Tra rganizations	ansfers To and Transa	ctions and R	elationships With N	oncharit	able	
1 D				ge in any of the following with a	ay other erganiza	tion described		<u> </u>	r -
				on 501(c)(3) organizations) or a				Yes	No
	rganizati		ouc (outer triair secut	or so recital organizations or r	11 5600011 321, 1616	tung to political			
	-		ting foundation to a no	oncharitable exempt organization	on of:				
				· · · · · · · · · · · · · · · · · · ·			12(1)	ŧ	
									X
		sactions.					14(2)		<u> </u>
			noncharitable evernot	organization			45/4		Х
				exempt organization					X
				sets					X
							 		X
				· · · · · · · · · · · · · · · · · · ·			1b(4)		X
				r fundraising solicitations .					X
	-			ther assets, or paid employees			 	ļ <u>-</u>	X
	-		-	nplete the following schedule (L	
		-		iven by the reporting foundation	• •	•			
		-	=	nt, show in column (d) the valu					
(a) Line		mount involved	T	charitable exempt organization		n of transfers, transactions, ar			
(a) Line	10 (0) 1	THOUSE HIVOIVED	(c) Name of none	mantable exempt organization	(u) Descriptio	Tor transfers, transactions, ar	u shanny arra	ingeme	ints
									
			 		+				
	-		 						
			 		 				
	-				 				
		· · · · · · · ·			 				
			 						
			 		 				
									
			 						
	+		 						
			 		 				
					 				
2a Is	the four	dation directly	or indirectly affiliated	with, or related to, one or more	tax-exempt organ	nizations			
				than section 501(c)(3)) or in se			. ☐ Ye:	s X	No
			llowing schedule.					عتا -	,
		a) Name of organ		(b) Type of organization	on	(c) Description of re	elationship		
		-,							
									
									
	Under pe	naities of penury, i	decian that I have examine	ed this return, including accompanying san taxpayer) is based on all information	chedules and stateme	nts, and to the best of my knowled	ge and belief, it	is true,	
Sign	correct, a	and complete Decl	aration preparer (other that	an taxpayer) is based on all information	of which preparer has a				
Here	1 📟	CHARD WAG	ak Whar	5-1517	VICE PRESI		the IRS discuss the preparer sho		
		ature of officer or tr		Date	Piple			Yes	No
		Print/Type prepar	rer's name	Preparer signature	Date	Check	if PTIN		
Paid		James S C	hism CPA	John SCH	5	self-employe	d P00626	5534	
Prep	arer	Firm's name	▶ Chism & Com	many Ltd			-156940		
Use		Firm's address		nt Place Ste 620	 	Phone no			
-55	~···y			e Rock AR 72114			1-9201		

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the Organization

Schedule of Contributors

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

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

2016

Employer identification number

OMB No 1545-0047

	RICHLY				81-3166878					
Organi	zation type (check one):									
Filers o	of:	Section:								
Form 9	90 or 990-EZ		501(c)() (enter number) organization						
			4947(a)(1) no	onexempt chantable trust not treated as a private foundation						
			527 political	organization						
Form 9	90-PF	X	501(c)(3) exe	empt private foundation						
			4947(a)(1) no	onexempt charitable trust treated as a private foundation						
			501(c)(3) tax	able private foundation						
Check	of your organization is cover	ered by	y the Genera	Il Rule or a Special Rule.						
Note: 0		3), or ((10) organizat	tion can check boxes for both the General Rule and a Special f	≀ule. See					
Genera	al Rule									
X		perty)	from any one	, or 990-PF that received, during the year, contributions totaling e contributor. Complete Parts I and II. See instructions for deter						
Specia	l Rules									
	regulations under sections 13, 16a, or 16b, and that r \$5,000 or (2) 2% of the ar	s 5096 receiv mount	(a)(1) and 170 ved from any o t on (i) Form 9	(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to 0(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), one contributor, during the year, total contributions of the greate 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Par	Part II, line er of (1) ts I and II.					
	contributor, during the year	ar, tota	tal contribution	I(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ns of more than \$1,000 <i>exclusively</i> for religious, charitable, scie prevention of cruelty to children or animals. Complete Parts I, II,	entific,					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year									
990-EZ	, or 990-PF), but it must ar	nswer	r "No" on Part	eneral Rule and/or the Special Rules doesn't file Schedule B (F t IV, line 2, of its Form 990; or check the box on line H of its For neet the filing requirements of Schedule B (Form 990, 990-EZ, o	m 990-EZ or on its					

Name of organization

SOW RICHLY

Employer identification number
81-3166878

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.								
(a) No.	· (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
1	RICHARD AND SHEILA WAGNON 216 E 3RD Texarkana, AR 71854	\$\$	Person 🔀 Payroll [] Noncash [] (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
			Person						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
			Person						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
			Person						

	Federal Supporting Statements	2016 PG01
Name(s) as shown on return		FEIN
SOW RICHLY		81-3166878

Form 990PF - Part VII-A - Line 10 Substantial Contributors Schedule

Statement #114

Name Address

RICHARD AND SHEILA WAGNON

216 3 3RD STREET

Texarkana, AR 71854

Form 990PF - Part II - Line 20 Statement #155
Loans From Officers Payable Schedule

Lender's name Gun GrabberInterco payable

Lender's title

Original amount of loan \$ 89 Balance due \$ 89

Date of note Maturity date Repayment terms

Interest rate

Security by borrower

Purpose of loan REIMBURSABLE EXPENS

Lender consideration

Consideration FMV \$

		~∑								
2016 PG01	Social Secunty Number 81-3166878	Statement #103~								
20	Your									
			l							
ents		ale	Charitable purpose	0	0					
Federal Supporting Statements		- Line 23 - Other Expenses Schedule	Adjusted net income	0 0	0					
al Support		ne 23 - Other		0 01	 					
Feder		Form 990PF - Part I - Li	Net investment							
		Form 990PI	Revenue and expenses	3,675	3,764					
		ł	a		ļļ					
	own on retum		Ē							
	Name(s) as shown on retum SOW RICHLY		Description	Supplies Supplies	Totals					

. . .

	Federal Supporting Statements	2016 PG01
Name(s) as shown on return		Your Social Security Number
SOW RICHLY		81-3166878

Form 990PF - Part XV - Line 2 <u>Application Submission Information</u>

Grant Program

Applicant Name RICHARD WAGNON

Address

216 E 3RD STREET Texarkana, AR 71854

Telephone 870-774-2222

Email Address

Form & Content

IN WRITING; AMOUNT REQUESTED, DETAILED EXPLANATION OF WHY FUNDS ARE NEEDED AND SPECIFIC USE TO WHICH FUNDS WILL BE APPLIED

Submission Deadline

NONE

Restrictions on Award

RESTRICTED TO RELIGIOUS, CHARITABLE, OR EDUCATIONAL ORGANIZATIONS EXEMPT UNDER SEC 501(c)3.