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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/form990of.

		nue Service ► Information about Form 990-PF and its service	eparate instructions	is at www	.irs.gov/fori	m990pf. □	pen to Publi	ic inspection
For	calen	dar year 2016 or tax year beginning	07-22 , 2016,		•		12-31 ,	2016
N	ame of	foundation			A Employer	r identification numb	er	
v	ande	voir Family Foundation, Inc.			81-333	8420		
N	umber a	and street (or P O box number if mail is not delivered to street address)	F	Room/suite	B Telephone	e number (see instruct	ions)	
6	32 W	Lancashire Blvd	·		(479)2	73-2515		
С	ty or to	wn, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	dına, check he	ere 🕨
В	ella	Vista, AR 72715_			5	tion application is point	g,	
G	Check	all that apply X Initial return Initial return	of a former public cha	arity	D 1. Foreig	gn organizations, chec	k here	▶□
		Final return Amended re	eturn		2 5000		the 950/ to	
	,	Address change Name change				n organizations meeti here and attach comp		est, ►
H_	heck	type of organization X Section 501(c)(3) exempt pri	vate foundation		E If private	foundation status was	s terminated u	ınder
\perp			taxable private founda	ation		607(b)(1)(A), check he		▶ _
I	air ma	arket value of all assets at J Accounting method	X Cash	Accrual	F If the fou	ndation is in a 60-mon	th termination	, –
		year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), che	eck here	▶
	ine 16		pe on cash basis)	, 		,		
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and					sbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment come	(c) Adjusted net income		charitable urposes
		the amounts in column (a) (see instructions))	DOURS			lileonie	(cash	n basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	62,34	<u>q</u>	***************************************			
	2	Check ▶ if the foundation is not required to attach Sch B .		<u> </u>				
	3	Interest on savings and temporary cash investments.	3	7				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	4	Dividends and interest from securities					·	
	5a	Gross rents						·····
17	b	Net rental income or (loss)		-	.,,,,,	III	 	
9	6a	Net gain or (loss) from sale of assets not on line 10			***************************************			·····
MAY Rêvênge 17	, D	Gross sales price for all assets on line 6a					· · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ဇွ်	(Capital gain net income (from Part IV, line 2)			RECE	M/En		·····
⋚		Net short-term capital gain		 	THE WHAT WHAT B			
⋛	9 10a	Income modifications		2	APR 1	7 2017 8		······································
_	b		7-1-		AFR A	1 2017 3		.,-1-11
ANNED	C	Gross profit or (loss) (attach schedule)			*****			·····
2	11	Other income (attach schedule)	·	++-	OGDE	N. UT		*****
Ş	12	Trans. Add to an Add to the Add	62,37	-				······································
}	13	Compensation of officers, directors, trustees, etc	02,31					······································
IJ.	14	Other employee salaries and wages		 				
ses	15	Pension plans, employee benefits .						
ĕ	16a	Legal fees (attach schedule) . STM107	2,34	d				
and Administrative Expenses	b	Accounting fees (attach schedule)		1 i	F			
é	С	Other professional fees (attach schedule)			/ Ach	1 000	1-	
aţį	17	Interest		1	() /\P	7 (-1.		
istr	18	Taxes (attach schedule) (see instructions)		i			: -	
ij	19	Depreciation (attach schedule) and depletion			<i>j</i> ,		1	
P	20	Occupancy					- !	
Q D	21	Travel, conferences, and meetings			·			
ä	22	Printing and publications						
Operating	23	Other expenses (attach schedule)						
rati	24	Total operating and administrative expenses.						
per		Add lines 13 through 23	2,340	d	C			0
0	25	Contributions, gifts, grants paid .	40,000					0
	26	Total expenses and disbursements. Add lines 24 and 25	42,340	q	C			0
	27	Subtract line 26 from line 12		ļ				·
	а	Excess of revenue over expenses and disbursements	20,03	4				
	b	Net investment income (ıf negatıve, enter -0-)		ļ	C		1,,	,, ,,,, ,, ,
	С	Adjusted net income (if negative, enter -0-)					d	

Vandevoir Family Foundation, Inc.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of	year
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			
2 Savings and temporary cash investments		20,037	20,037
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 schedule)			
Less. allowance for doubtful accounts ▶			
		-	
8 Inventories for sale or use			
10a Investments - U S and state government obligations (attach schedule)			
			_
b Investments - corporate stock (attach schedule)			
c 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 ▶			
Less accumulated depreciation (attach schedule)			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers - see the			
ınstructions. Also, see page 1, ıtem I)	0	20,037	20,037
17 Accounts payable and accrued expenses			
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable (attach schedule)			
22 Other liabilities (describe >			
23 Total liabilities (add lines 17 through 22)	0	0	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 20 and 31			
24 Unrestricted		20,037	
26 Permanently restricted			
26 Permanently restricted . Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
and complete lines 27 through 31.			
5 27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg , and equipment fund			
Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see			
30 Total net assets or fund balances (see instructions) .	0	20,037	
Z 31 Total liabilities and net assets/fund balances (see			
	0	20,037	
Part III Analysis of Changes in Net Assets or Fund Balance			
Total net assets or fund balances at beginning of year - Part II, column (a), line			
end-of-year figure reported on prior year's return)		1	
2 Enter amount from Part I, line 27a	•	2	20,037
3 Other increases not included in line 2 (itemize)	•	3	
4 Add lines 1, 2, and 3		. 4	20,037
5 Decreases not included in line 2 (itemize)		5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	. 6	20,037
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	the kind(s) of property sold (e g , rea nouse, or common stock, 200 shs ML	al estate, .C Co) —————————	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo., day, yr)
1a		e			
b					
<u>c</u>					
<u>d</u>					
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		in or (loss) (f) minus (g)
a					
<u>b</u>					
C					_
<u>d</u>					
Complete only for coorts above			40/04/00		
Complete only for assets snow	ring gain in column (h) and owne	ed by the foundation	on 12/31/69	(I) Gains (Co	ol (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (ı) (j), if any	col (k), but no Losses (f	t less than -0-) or from col. (h))
а			<u></u>		
b					
<u>c</u>				ļ	
d					
<u>e</u>					
Capital gain net income or (net	rcanitaliossi 🔨 📑	also enter in Part I, I), enter -0- in Part I, li	,	2	
Net short-term capital gain or (I	loss) as defined in sections 122:	2(5) and (6):			
If gain, also enter in Part I, line	8, column (c) (see instructions)	If (loss), enter -0- in	ı		
Part I, line 8			, 3	3	
art V Qualification Un	der Section 4940(e) for R	Reduced Tax on	Net Investme	nt Income	
as the foundation liable for the se	ection 4942 tax on the distributal	ble amount of any ve	ar in the base per	d0	
	ualify under section 4940(e) Do	not complete this pa	rt .		Yes N
Enter the appropriate amount in		not complete this pa	rt .		
	n each column for each year; se	not complete this pa	rt .	entries	(d) ribution ratio divided by col (c))
Enter the appropriate amount ii (a) Base period years	n each column for each year; se	not complete this pa	rt fore making any e (c)	entries	(d)
Enter the appropriate amount ii (a) Base period years Calendar year (or tax year beginning 2015 2014	n each column for each year; se	not complete this pa	rt fore making any e (c)	entries	(d)
Enter the appropriate amount ii (a) Base period years Calendar year (or tax year beginning 2015	n each column for each year; se	not complete this pa	rt fore making any e (c)	entries	(d)
Enter the appropriate amount ii (a) Base period years Calendar year (or tax year beginning 2015 2014	n each column for each year; se	not complete this pa	rt fore making any e (c)	entries	(d)
Enter the appropriate amount ii (a) Base period years Calendar year (or tax year beginning 2015 2014 2013	n each column for each year; se	not complete this pa	rt fore making any e (c)	entries	(d)
Enter the appropriate amount ii (a) Base period years Calendar year (or tax year beginning 2015 2014 2013 2012 2011	n each column for each year; se	not complete this pa	rt fore making any e (c)	entries	(d)
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning 2015 2014 2013 2012 2011 Total of line 1, column (d)	n each column for each year; se (b) Adjusted qualifying distributi	not complete this pare the instructions be ons Net value of	rt fore making any e (c) noncharitable-use a	entries Dist (col (b)	(d)
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for the	n each column for each year; se (b) Adjusted qualifying distributi	not complete this page the instructions be ons Net value of the complete this page the instructions be ons Net value of the complete this page the instructions be one to the instructions be one to the complete this page the complete the complete this page the complete this	rt fore making any e (c) noncharitable-use a	entries Dist (col (b)	(d)
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning) 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	n each column for each year; se (b) Adjusted qualifying distribution Adjusted qualifying distribution c	not complete this page the instructions be ons Net value of the value	rt fore making any e (c) noncharitable-use a	entries Ssets Dist (col (b)	(d)
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning) 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	n each column for each year; se (b) Adjusted qualifying distribution Adjusted qualifying distribution c	not complete this page the instructions be ons Net value of the value	rt fore making any e (c) noncharitable-use a	entries Sissets Dist (col (b))	(d)
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning) 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharic Multiply line 4 by line 3.	n each column for each year; se (b) Adjusted qualifying distribution e 5-year base period - divide the has been in existence if less the table-use assets for 2016 from F	not complete this page the instructions be ons Net value of the value	rt fore making any e (c) noncharitable-use a	entries Sissets Dist (col (b)	(d)
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for the	n each column for each year; se (b) Adjusted qualifying distribution e 5-year base period - divide the has been in existence if less the table-use assets for 2016 from F	not complete this page the instructions be ons Net value of the value	rt fore making any e (c) noncharitable-use a	pontries Sissets Dist (col (b)) 2 3 4 5	(d)
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning) 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharic Multiply line 4 by line 3. Enter 1% of net investment income	n each column for each year; se (b) Adjusted qualifying distribution e 5-year base period - divide the has been in existence if less that table-use assets for 2016 from Figure 1, line 27b).	not complete this page the instructions be ons Net value of the value	rt fore making any e (c) noncharitable-use a	entries Sesets Cool (b) 2 3 4 5 6	(d)

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names and addresses

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969. (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

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

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

. . .

Yes X No

Х

3b

4a

4b

at any time during the year?

foundation had excess business holdings in 2016) . .

Pai	t VII-B Statements Regarding Activitie	s for	Which Form	1 4720	May Be F	Requir	ed (co	ntinued)			
5a	During the year did the foundation pay or incur any a	amount	to					_			
	(1) Carry on propaganda, or otherwise attempt to in	fluence	legislation (see	ction 494	45(e))? .		Yes	X No			
	(2) Influence the outcome of any specific public elec-	ction (se	ee section 4955	5), or to	carry on,	,	-				
	directly or indirectly, any voter registration drive?						Yes	X No			
	(3) Provide a grant to an individual for travel, study,	or othe	r sımılar purpos	ses?	•	. [Yes	X No			
	(4) Provide a grant to an organization other than a c	charitab	le, etc , organiz	ation de	escribed in	1	-				
	section 4945(d)(4)(A)? (see instructions)			•		[Yes	X No			
	(5) Provide for any purpose other than religious, cha			ary, or e	ducational			<u></u>			
	purposes, or for the prevention of cruelty to child			•	•		Yes	X No			
þ	If any answer is "Yes" to 5a(1)-(5), did any of the tra				•		ibed in				
	Regulations section 53.4945 or in a current notice re	-		•		ns)?	•	ب	5b		
	Organizations relying on a current notice regarding of					•	•	▶ 📋			
С	If the answer is "Yes" to question 5a(4), does the for			on from	the tax	r	_				
	because it maintained expenditure responsibility for	-				Į	Yes	No			
_	If "Yes," attach the statement required by Regulation										
6a	Did the foundation, during the year, receive any fund	is, direc	tly or indirectly	, to pay	premiums	Г	٦.,	₹.			
h	on a personal benefit contract? .	d ali] 244	Yes	X No	6 L		v
D	Did the foundation, during the year, pay premiums, o	irectiy	or indirectly, on	a perso	onal benefit o	ontract:	,	•	6b		<u>X</u>
- -	If "Yes" to 6b, file Form 8870					-0 [¬	X No			
	At any time during the tax year, was the foundation a if "Yes," did the foundation receive any proceeds or		•					X NO	7b	, 1	
	t VIII Information About Officers, Dire							v Paid F		1006	
E GE	and Contractors	CCO 3	iiustees, i	Ound	ation mar	agers	, i iigiii	y raid t	-iiipioj	ces,	
1 1	ist all officers, directors, trustees, foundation man	20016	and their com	neneatio	on /eas inst	ructions	<u> </u>		-		
	ist an omcers, unectors, trustees, foundation mar		tle, and average		ompensation		Contribut	ions to	(e) Expe		
	(a) Name and address		urs per week ted to position		not paid, nter -0-)		oyee bend ferred con	efit plans npensation		allowan	
Ları	y Vandevoir	Presi		<u> </u>		3					
	W Lancashire Blvd, AR 72715		1.00	ļ	0	1		0			0
	th Vandevoir	Vice	President								
632	W Lancashire Blvd, AR 72715		1.00		0			0			0
Shar	non V Deal	Secre	tary								
632	W Lancashire Blvd, AR 72715		0.00		0			0	<u> </u>		0
Todo	Vandevoir	Treas	urer								
632	W Lancashire Blvd, AR 72715		1.00		0			0			0
2 C	ompensation of five highest-paid employees (other	er than	those include	d on line	e 1 - see ins	truction	s). If no	ne, enter	_		
	NONE."				 						
			(b) Title, and a	average				ributions to	(a) Evna		.aat
	(a) Name and address of each employee paid more than \$50	,000	hours per w	veek ~	(c) Comper	nsation	plans an	ee benefit Id deferred	(e) Expe	allowand	
			devoted to po				comp	ensation —————			
NONE											
			}		l		1				
			<u> </u>								
							[
			 	-							
			 	-							
Total	number of other employees paid over \$50,000		<u> </u>		<u> </u>		L	. •			0
TOLAI	number of other employees paid over 400,000	.	· · ·	<u> </u>		<u>. </u>			Form 99	0-DF (

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Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign	i toundations,	
see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
purposes.		
a Average monthly fair market value of securities	1a	0
b Average of monthly cash balances	1b	9,170
c Fair market value of all other assets (see instructions)	1c	0
d Total (add lines 1a, b, and c)	1d	9,170
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation) . 1e	_	
2 Acquisition indebtedness applicable to line 1 assets	2	0
3 Subtract line 2 from line 1d	3	9,170
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
Instructions)	4	138
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,032
6 Minimum investment return. Enter 5% of line 5	6	202
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	oundations	-
and certain foreign organizations check here and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	202
2a Tax on investment income for 2016 from Part VI, line 5 2a	_	
b Income tax for 2016 (This does not include the tax from Part VI) . 2b	_	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1 .	3	202
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	202
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,	1 1	
line 1	7	202
Part XII Qualifying Distributions (see instructions)		
Tate Air J Qualitying 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	1a	0
b Program-related investments - total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the.		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
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	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	er the foundatior	n e e e e e e e e e e e e e e e e e e e
qualifies for the section 4940(e) reduction of tax in those years.		

1	Distributable amount for 2016 from Part XI, line 7	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
2	Undistributed income, if any, as of the end of 2016	<u> </u>			202
a					
	· · · · · · · · · · · · · · · · · · ·				
b	Total for prior years,,	781		144	
3	Excess distributions carryover, if any, to 2016				
a	From 2011 .				
b	From 2012				
C	From 2013				
d	From 2014				
е	From 2015				
f	Total of lines 3a through e				
4	Qualifying distributions for 2016 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2015, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election	<u> </u>	' '		
	required - see instructions)				
d	Applied to 2016 distributable amount	· · · · · · · · · · · · · · · · · · ·			
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2016			111 111	
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b				7.1	
D	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	İ			
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				.11111111111111111111111111111111111111
	amount - see instructions				
е	Undistributed income for 2015 Subtract line		,	111111111111111111111111111111111111111	-*H*
	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2016. Subtract lines			••••	
	4d and 5 from line 1 This amount must be	1			
	distributed in 2017	İ			202
7	Amounts treated as distributions out of corpus	100	-\H	····	
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be			,	
	required - see instructions)				
8	Excess distributions carryover from 2011 not				
-	applied on line 5 or line 7 (see instructions)	ŀ			
9	· · · · · · · · · · · · · · · · · · ·				
J	Excess distributions carryover to 2017.	ĺ			
^	Subtract lines 7 and 8 from line 6a		13-11		, , <u>,,,,,</u>
0	Analysis of line 9	· ·			
	Excess from 2012	Į]	
	Excess from 2013	•			
	Excess from 2014		j		
d	Excess from 2015				
е	Excess from 2016				
	-				

Part	XIV Private Operating Foun	dations (see instr	uctions and Part '	VII-A, question 9)		
1a	If the foundation has received a ruling of	r determination letter th	hat it is a private opera	ating		<u> </u>
	foundation, and the ruling is effective fo	r 2016, enter the date	of the ruling	ı	-	
b	Check box to indicate whether the foun-	dation is a private oper	rating foundation desc	ribed in section	4942(j)(3) or 4	942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for each year listed			1	\-,\-,\-\-	
ь	85% of line 2a					
-		-			-	
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) .					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed			-		
С	"Support" alternative test - enter					
Ū	(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 .					
Part	XV Supplementary Informat			foundation had	\$5,000 or more in	assets at
	any time during the year	r - see instruction	ıs.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation wi	no have contributed me	ore than 2% of the tot	al contributions receive	d by the foundation	
	before the close of any tax year (but or	ily if they have contribu	uted more than \$5,000	0) (See section 507(d)	(2))	
b	List any managers of the foundation wi	no own 10% or more o	f the stock of a corpor	ation (or an equally lar	ge portion of the	
	ownership of a partnership or other ent					
2	Information Regarding Contribution,	Grant, Gift, Loan, Sch	nolarship, etc., Progr	ams:		
	Check here ► X if the foundation on				does not accept	
	unsolicited requests for funds. If the for					
	other conditions, complete items 2a, b,	-	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	ŭ	
a	The name, address, and telephone nu	mber or e-mail address	s of the person to who	m applications should	be addressed	
	•		·	• •		
b	The form in which applications should t	be submitted and inforr	mation and materials t	they should include		
•	,,			•		
	Any submission deadlines		·			
-	, commont doddingo					
d	Any restrictions or limitations on award	s, such as by geograph	hical areas, charitable	fields, kinds of instituti	ons, or other	
	factors					

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of Amount any foundation manager or substantial contributor recipient Name and address (home or business) a Paid during the year Bella Vista Assembly of God 1771 Forest Hills Blvd Missions and Bella Vista, AR 72715 PC None Building Fund 30,000 Reign Ministries 5401 West Broadway Avenue Minneapolis, MN 55428 PC Mission Work 3,000 Ambassadors for Christ Academy PO Box 924 Educational 7,000 Bentonville, AR 72712 PC Ministry Total За 40,000 Approved for future payment

3b

Total

	Officialed	ousiness income	Excluded by s	ection 512, 513, or 514	(e) Related or exempt
	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
1 Program service revenue.	code		-		
a					
b	-		 		
c d					
·					<u> </u>
e			 		 -
g Fees and contracts from government agencies			 		
2 Membership dues and assessments			-		
3 Interest on savings and temporary cash investments		34			
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate		······································			
a Debt-financed property .			 		
b Not debt-financed property .					
6 Net rental income or (loss) from personal property .					
7 Other investment income			 		-
8 Gain or (loss) from sales of assets other than inventory			 		
9 Net income or (loss) from special events		-	 		
O Gross profit or (loss) from sales of inventory			†		
1 Other revenue a		-		_	
L			-		
					
			 		
e			 		
2 Subtotal Add columns (b), (d), and (e)		34			
3 Total. Add line 12, columns (b), (d), and (e)				13	3
See worksheet in line 13 instructions to verify calculations)			•		<u>~</u>
to morning to more than to the complete to the					
Part XVI-B Relationship of Activities to the	Accomplis	hment of Exe	mpt Purpos	 es	
Explain below how each activity for which inc					o the
Explain below how each activity for which inc	ome is report	ed ın column (e) o	f Part XVI-A cor	ntributed importantly to	
Explain below how each activity for which inc	ome is report	ed ın column (e) o	f Part XVI-A cor	ntributed importantly to	
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Rogers AR 72756

479-621-0006

Form **990-PF** (2016)

Pa	t XVII		n Regarding Tra ganizations	ansfers To	o and Transac	tions and	l Relation	ships	With	No	ncha	aritab	le	
1	Did the		ectly or indirectly eng	age in any o	of the following with	any other	organization	describ	ed				Yes	No
•		•	Code (other than sec		-	•	_						103	110
	organiz			J. J. J. J. J. J. J. J. J. J. J. J. J. J	o, organization o	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	027,7010.0115	, to point						į
а	•		rting foundation to a	noncharitab	le exempt organiza	ation of								İ
_	(1) Cas	•	, ,									1a(1)		Х
	• •	er assets		•		•		•				1a(2)	_	X
b		ansactions	·			• •	•			•		1(_,	,	
_			noncharitable exem	pt organizati	ion							1b(1)		Х
	• •		from a noncharitab					•				1b(2)		X
			quipment, or other a						•	•		1b(3)	_	X
		mbursement arra	• •				•	•				1b(4)	_	X
		ns or loan guara	-			•	•		•		•	1b(5)		X
		=	rices or membership				·					1b(6)		X
c	• •		ipment, mailing lists,		•	 es	•					1c		X
d			ne above is "Yes," co		•		Ne blunda lw	ave sho	w the fa	air m	arket			
~		-	er assets, or services			•	•	-						
		-	or sharing arrangen		· ·									
(a) Lu		Amount involved			empt organization	1	cription of tran						ngeme	
(4)	10 110 10	y various it involved	(e) Hame of Her	ionania io		(4, 500	onpuon or trai	101010, 114	11040(101	<u> </u>	0.112	g carre	2go.,	
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2a	Is the fo	undation directly	or indirectly affiliate	d with or rel	ated to one or mo	re tay-evem	int organizat	ions				-		
		•	(c) of the Code (other					10113			ſ	Ye	s X	No
h			llowing schedule.	or aran occa	on oo nonon on m	5000011021					L		نت د	
	<i>n</i> 100,	(a) Name of organ		0	b) Type of organization		1	(c) De	scription	of re	elation			
_		(a) Name or organ			of Type of organization	<u></u>		(0) 50	oon paoi		- Catton	ioi iip		
							<u> </u>							
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							-		_		-			
	Under	penalties of penury. I	declare that I have examin	ed this return, in	cluding accompanying s	chedules and s	tatements, and t	o the best	of my kno	wledd	e and	belief, it	s true.	
Sig	correc	t, and complete Decla	declare that I have examinaration of preparer tother th	an taxpayer) is b	sed on all information	of which prepare	er has any know	ledge	,	3	,		,	
			- \ \ \ (1/	MICHAEL	W-V 4-34	Toma a i de			ſ			discuss		
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	Pai ei	Firm's name	► KMBSP PLLC ► 224 South 2	and St				Firm's El						

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

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2016

Employer identification number Name of the organization Vandevoir Family Foundation, Inc. 81-3338420 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** Kor an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. 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, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III 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 Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Vandevoir Family Foundation, Inc.

Employer identification number

81-3338420 Contributors (See instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person 1 Larry Vandevoir **Pavroll** Noncash 632 W Lancashire Blvd 62,340 (Complete Part II for noncash contributions) Bella Vista, AR 72715 (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (a) (c) (d) Total contributions No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll**

Noncash (Complete Part II for noncash contributions)

Federal Supporting Statements	2016 PG01
Name(s) as shown on return	FEIN
Vandevoir Family Foundation, Inc.	81-3338420

Form 990PF - Part VII-A - Line 10 Substantial Contributors Schedule Statement #114

Name Address

Larry Vandervoir 632 W Lancashire Blvd

Bella Vista, AR 72715

2016 PG01	Your Social Security Number	81-3338420	Statement #107~								
nents			ule	Charitable purpose 0	0						
Federal Supporting Statements			Line 16(a) - Legal Fees Schedule	Adjusted net income	0						
Federal Su		1	1	Net investment	0				,		
			Form 990PF - Part I	Revenue and expenses 2,340	2,340						
	Name(s) as shown on return Vandovoir Eamily Equadation	יא בסתומפרוסו, זווכי									
	Name(s) as shown on return				Totals	-			 <u> </u>	 	