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Firm 990-PF

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052 pen to Public Inspection

Depa	rtmen	t of the Treasury			social security numbers or			
Inter	nal Re	venue Service			rs.gov/Form990PF for inst		ormation.	Open to Public Inspection
		ndar year 2017 (or tax year	Deginning		, and ending	TA = 1 11 11 11 11	
		f foundation	חודם מו	DIATO 531	/TT 17		A Employer identificatio	n number
				N BLAIR FAN	ITTX		71 004140	S
		NDATION		f mail is not delivered to stree	t addraga)	Room/suite	71-084149	<u> </u>
		•			,	İ	8 Telephone number	2545
				AVENUE, STE		330	1_	-2545
		own, state or pro		intry, and ZIP or foreign of 2703	DOSTAI CODE		C If exemption application is	pending, check here
G (Check	all that apply:		Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here
				Final return	Amended return			
				Address change	Name change		2 Foreign organizations m check here and attach of	neeting the 85% test, computation
H (Check	type of organiz	ation:	X Section 501(c)(3) e	xempt private foundation		E If private foundation st	atus was terminated
	Se	ction 4947(a)(1) nonexem	pt charitable trust	Other taxable private found	ation	under section 507(b)(
I F	air ma	arket value of all	assets at e	and of year J Account	ing method: X Cash	Accrual	F If the foundation is in a	60-month termination
(f	rom F	Part II, col. (c), li			ther (specify)		under section 507(b)(
	\$		1,333	, 483 . (Part I, colu	mn (d) must be on cash bas	is.)		
Pa	art I	Analysis of R (The total of amonecessarily equal	ounts in colur	mns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1			s, etc., received	3,815.		N/A	
_	2			n is not required to attach Sch. B	-,			
*	3	Interest on saving	s and tempo				 	
	4	Dividends and		m securities	81,107.	81,107		STATEMENT 1
		Gross rents			<u> </u>	927,207		<u> </u>
		Net rental income	or (loss)		<u></u>			
	_			assets not on line 10	<71,875.	>		STATEMENT 2
Ę	b	Gross sales price assets on line 6a	for all	451,688.	1,270.01			
Revenue	7					0		
æ	8	Net short-term	-	•		., 8		
	9	Income modific	. •					-
	10a	Gross sales less and allowances	returns		I'' MAY OF THE	7.1		
	Ι.	Less Cost of goo	ds sold		1 Kini Zi - Lo	3 1.1		
	1	Gross profit or			L	1' 1		
	11	Other income	` ,		4-			
	12	Total, Add line	s 1 through	h 11	13,047.	81,107		
	13	Compensation of	officers, dire	ctors, trustees, etc	0.	0		0.
	14	Other employe						
	15	Pension plans,		-				
Ses	16a	Legal fees						
Expenses	Ь	Accounting fee	s	STMT 3	2,500.	1,250		0.
X	C	Other profession	onal fees					
	1	Interest						
Administrative	18	Taxes		STMT 4	3,443.	1,722		0.
IST	19	Depreciation ar	nd dépletio	n	6,436.	0		
Ė	20	Occupancy						
	21	Travel, confere	nces, and r	meetings				
and	22	Printing and pi	ublications					
5	23	Other expenses		STMT 5	12,904.	0		0.
Operating	24	Total operatin	g and adm	inistrative				
per		expenses Add	-		25,283.	2,972		0.
Ō	25	Contributions,	gifts, grant	s paid	51,315.			51,315.
	26	Total expense	s and disbi	ursements.				
		Add lines 24 ar	nd 25		76,598.	2,972		51,315.
	27	Subtract line 2	6 from line	12:				
	a	Excess of revenue	e over expens	ses and disbursements	<63,551.	>		
	b	Net investmen	t income (f negative, enter -0-)		78,135		
	C	Adjusted net is	ncome (if ne	egative, enter -0-)			N/A	
	_			·	· · · · · · · · · · · · · · · · · · ·			

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
(must agree with end-of-year figure reported on prior year's return)	1	1,609,757.
2 Enter amount from Part I, line 27a	2	<63,551.>
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	1,546,206.
5 Decreases not included in line 2 (itemize) ► NONDEDUCTIBLE EXPENSES	5	250.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,545,956.

71-0841498

(b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (for example, real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) 03/23/11 08/03/17 P b 500,000 DELTA AIRLINES, INC. DEL PASS 08/03/04 11/01/17 P INC. DEL PASS 08/03/04 05/08/17 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 1,530. 293. 1,237. a 10,331. 189,873. <179,542.> b C 388 0. 388 d 4,439. 4,439. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) (j) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 over col. (j), if any as of 12/31/69 1,237. <179,542.> b C 0. d 4,439. е If gain, also enter in Part I, line 7 <173,866.> 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 N/A Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income Part V (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) (d) Distribution ratio (c) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) 1,407,029 75,968. .053992 2016 .040731 64,600. 1,586,030. 2015 1,520,029. .017434 26,500. 2014 96,700. 1,538,097. .062870 2013 2012 93.820 773.547. .052900 .227927 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years .045585 3 1,841,522. 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 83,946. Multiply line 4 by line 3 5 781. Enter 1% of net investment income (1% of Part I, line 27b) 6 84,727. 7 Add lines 5 and 6 7 51,315. 8 8 Enter qualifying distributions from Part XII, line 4

Form **990-PF** (2017)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

THE JAMES BURTON BLAIR FAMILY

	m 990-PF (2017) FOUNDATION, INC. art VI Excise Tax Based on Investment Income (Section 4940(a), 4940((b), 4940(e), or 4	71-0 948-s	841498 see instru	ctio	Page 4	
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on life	· /·				,	-
-	Date of ruling or determination letter: (attach copy of letter if necessary-see in:	ľ					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	-	1		1,5	63.	
	of Part I, line 27b						
C	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		1,5	63.	_
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		1,5	<u>63.</u>	
6	Credits/Payments:						
	a 2017 estimated tax payments and 2016 overpayment credited to 2017	944.					
	Exempt foreign organizations - tax withheld at source	0.					
	Tax paid with application for extension of time to file (Form 8868)	0.					
	d Backup withholding erroneously withheld 6d 6d	0.					
7	Total credits and payments. Add lines 6a through 6d		7		9	<u>44.</u>	
. 8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			0.	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9		<u> 6 </u>	19.	
10		▶	10				
	Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded ►	11				-
_	art VII-A Statements Regarding Activities				1.0		-
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	participate or intervene	ın		Yes		
	any political campaign?			1a		X	-
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the in		ition	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	s published or					
	distributed by the foundation in connection with the activities.						
	Did the foundation file Form 1120-POL for this year?			1c		X	-
C	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	sed on foundation					
	- managers. ▶ \$0 .						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		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, article to the IRS, in its governing in the IRS, in its governing in the IRS, in i	icles of incorporation, o	Г	_		•••	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X	
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		37 /	4 <u>a</u>		X	-
	b If "Yes," has it filed a tax return on Form 990-T for this year?		N/.			77	-
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						
6							
	By language in the governing instrument, or Protected logislature that effectively accorded to a second of the control o		1				
	By state legislation that effectively amends the governing instrument so that no mandatory directions the	at conflict with the state	law				
-	remain in the governing instrument?	L (-) - 4D +>0(6	X		-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col	I. (c), and Part XV		7	X		-
	Catanaha atatan ta sahada ta Casanda ka sana atau atau atau atau atau atau atau a						
88	a Enter the states to which the foundation reports or with which it is registered. See instructions.						
	AR	al (an dance 11)					
b	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ıı (or aesignate)			7,7		
^	of each state as required by General Instruction G? If "No," attach explanation	D) == 40.40/2//5/ 4 4		8b	X		
9	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		ndar			v	
40	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV			9		A.	. 0
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their nar	mes and addresses		10	ı	Λ	

Pa	irt VII-A Statements Regarding Activities (continued)						
			Yes	No			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of						
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	ļ	X			
12	12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?						
40	If "Yes," attach statement. See instructions	12		X			
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X				
14	Website address \blacktriangleright N/A The books are in care of \blacktriangleright JAMES B. BLAIR Telephone no. \blacktriangleright (47)	0 \ E21	1 /	0.2			
14		>72703		<u>U 3</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	<u> </u>					
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A				
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No			
	securities, or other financial account in a foreign country?	16		X			
	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						
	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					
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes						
	a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X Yes X	I					
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X						
	(5) Transfer any income or assets to a disqualified person (or make any of either available	,,,					
	for the benefit or use of a disqualified person)?	No					
	(6) Agree to pay money or property to a government official? (Exception Check "No"	.					
	if the foundation agreed to make a grant to or to employ the official for a period after						
	termination of government service, if terminating within 90 days.)	No					
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	A 1b					
	Organizations relying on a current notice regarding disaster assistance, check here	_					
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected						
^	before the first day of the tax year beginning in 2017?	1c	 	X			
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):						
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning						
	before 2017?	No					
	If "Yes," list the years \(\bigs_{\text{\tiket{\texi}\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\texi{\text{\texi}\text{\texi{\text{\texi}\text{\texit{\texit{\texi{\texi\texi{\texi{\texi{\texi}\tint{\texi}\tint{\texi{\texi{\texi}\texi{\texi{\texi{\		İ				
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect						
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	A 2b					
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	7 20		-			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time						
	during the year?	No	1				
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after						
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose						
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,						
	Form 4720, to determine if the foundation had excess business holdings in 2017.)	A 3b	1	<u> </u>			
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	<u>X</u> _			
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that						
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	0.05	(22.47)			
		Form 99	ひ-ピト	(2017)			

723541 01-03-18

	nordada on mile iji ii none;	CITECI ITOITE.		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances
NONE				
Total number of other employees paid over \$50,000			>	

723551 01-03-18

Form **990-PF** (2017)

Total. Add lines 1 through 3

All other program-related investments. See instructions.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, 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	1,308,809.
b		1b	30,990.
C	Fair market value of all other assets	1c	529,766.
d	Total (add lines 1a, b, and c)	1d	1,869,565.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,869,565.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	28,043.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,841,522.
6	Minimum investment return Enter 5% of line 5	6	92,076.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	ıd certair	1
1	Minimum investment return from Part X, line 6	1	92,076.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)	1 1	
C	Add lines 2a and 2b	2c	1,563.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3_	90,513.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	90,513.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	90,513.
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	51,315.
b	Program-related investments - total from Part IX-B	1b	0.
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	51,315.
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	5	0 <u>.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,315.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies	for the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				90,513.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 6,679.				
b From 2013 21,279.				
c From 2014				
d From 2015				
e From 2016 7,009.				
f Total of lines 3a through e	34,967.			
4 Qualifying distributions for 2017 from				
Part XII, line 4 [.] ► \$ 51,315.			_	
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.	<u> </u>	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			51,315.
d Applied to 2017 distributable amount	0.			31,313.
e Remaining amount distributed out of corpus	34,967.			34,967.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	34,907.			34,307.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously		•	,	
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2017. Subtract	- 10		0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				4,231.
7 Amounts treated as distributions out of				7,251.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

723581 01-03-18

THE JAMES BURTON BLAIR FAMILY

Part XV Supplementary Information	n (continued)			
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
a Paid duning the year				
FAYETTEVILLE PUBLIC EDUCATION	NONE	NONE	UNRESTRICTED	
FOUNDATION PO BOX 571				
FAYETTEVILLE AR 72702				2,000
KUAF	NONE	NONE	UNRESTRICTED	
9 S. SCHOOL AVE.				
FAYETTEVILLE, AR 72701				1,000
	TOWN	NO.YE	TRUD DOME TO COME D	•
MAYO CLINIC 200 FIRST STREET SW	NONE	NONE	UNRESTRICTED	
ROCHESTER, MN 55905				15,000
SINGLE PARENT SCHOLARSHIP FUND OF	NONE	NONE	UNRESTRICTED	
NORTHWEST ARKANSAS				
16 W. COLT SQUARE DRIVE FAYETTEVILLE. AR 72703				10.000
				10,000
SYMPHONY OF NW AR	NONE	NONE	UNRESTRICTED	
PO BOX 1243				
FAYETTEVILLE AR 72702	NAME AND ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDA ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDA ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDA	Dm (G)		5,000
Total SEE CO b Approved for future payment	ONTINUATION SHE	ET(S)	▶ 3a	51,315
- · · · · · · · · · · · · · · · · · · ·			i	
NONE				
NONE				
Tatal			▶ 3b	
Total				orm 990-PF (2017

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		section 512, 513, or 514	(e)
· ·	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	741100111	code	Amount	Tancadh moome
a	—- —				
b					
C					
d					
e					
· · · · · · · · · · · · · · · · · · ·					
g Fees and contracts from government agencies		···	-		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	81,107.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					<u></u>
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<71,875.>	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	<u></u>	(0.	9,232.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	9,232.
(See worksheet in line 13 instructions to verify calculation	ns.)				
Part XVI-B Relationship of Activit	ies to the Accon	plishment of	Exempt Pu	ırposes	
Line No Explain below how each activity for whice the foundation's exempt purposes (other				importantly to the accomp	lishment of
NOT APPLICABLE	oj providing latid		-		
MOI AFFIICADIE					

Part X	VI-B Relationship of Activities to the Accomplishment of Exempt Purposes
Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	NOT APPLICABLE
	
	^

71 - 0841498 Page 13

Part XVII	Information Re			nd Transa	actions an	d Relationsl		haritable		ige 13
1 Did the e	Exempt Organ rganization directly or indi		of the follows	a with any oth		deasthed in east			Yes	No
	an section 501(c)(3) organ				-	i described ili sect	1011 50 1(0)		163	140
	from the reporting found	· ·		-	gamzations					ĺ
(1) Cash										_x_
(2) Other assets										X
b Other tran	nsactions:			• •]	
(1) Sales	s of assets to a noncharita	ible exempt organiza	tion					1b(1)		X
(2) Purc	hases of assets from a no	ncharitable exempt (organization					15(2)		X
(3) Rent	al of facilities, equipment,	or other assets						1b(3)		X
	nbursement arrangements	;						1b(4)		X
	is or loan guarantees							1b(5)		X
	ormance of services or me							1b(6)		X
	of facilities, equipment, ma				مريناه المساحل المال	h tha fa	wowleds the second	1 <u>c</u>		X
	wer to any of the above is es given by the reporting fo						_		ets,	
	d) the value of the goods,				II IIIaikei vaiue	in any transaction	TOT SHALING AFFAITGETTS	ant, snow in		
(a) Line no	(b) Amount involved	 	f noncharitable		nization	(d) Description	of transfers, transactions	and sharing ar	rangeme	ents
`	. (-7		N/A			(-)		,		
										
	· · · · · · · · · · · · · · · · · · ·		<u></u>							
			 	·						
	·									
		 								
										
		 								
		 								
		 								
		 		_						
2a is the four	indation directly or indirec	tly affiliated with or	related to one	or more tax-e	yempt organiza	ations described				
	i 501(c) (other than sectio	=			Nompt or game	2.10110 400011004		Yes	X	No
	omplete the following sch									
	(a) Name of org	janization		(b) Type of o	organization		(c) Description of rela	tionship		
	N/A									
			···							
				ļ						
				<u>L. </u>	<u> </u>	·	_			
ما اسمما	r penalties of perjury, I declare pelief it is true, correct, and cor	that I have examined the mplete Declaration of pr	is return, includir reparer (other tha	ng accompanying in taxpayer) is ba	i schedules and s sed on all informa	itatements, and to the ition of which prepare	best of my knowledge r has any knowledge	May the IRS return with th	discuss	this
Sign Here	/1/ Pm	On De	VD	1	Lula	116)	shown below	? See in	
	mu 1	12m/	<u> </u>		114/19	VI		LX Yes	;	_l No∣
siy	nature of officer or trustee		Dranararia a	Date		Title	Check I if P	TIN		
	Plant/Type preparer's na	anie	Preparer's s	aignature		Date	self- employed	TIIN		
Paid	LADDY C E	ידי זארזייטריי	How	$\mathcal{S}_{\sim}\mathcal{P}_{\mathcal{A}}$	الكات	5(7/2018	<u> </u>	D00120	776	
Preparer	HARRY C. E Firm's name ► ERW	RWIN, III		<u> </u>	CMA N		Firm's EIN ▶ 71	<u> P00130</u>		
Use Only		IN & COMP	тит, Р	·A.	~~11		Trimisein - / 1	-00033	0 /	
	Firm's address ▶ 63	11 RANCH	DRIVE		····		 			
				12222			Dhono no /FA	1 \ 0 6 0	710	6

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation show any relationship to any foundation manager Purpose of grant or status of Amount contribution Name and address (home or business) recipient or substantial contributor THEATRESQUARED NONE NONE UNRESTRICTED P.O. BOX 4188 FAYETTEVILLE, AR 72702 <u>5,065.</u> UNIVERSITY OF ARKANSAS FOUNDATION NONE NONE CHANCELLOR'S SOCIETY 210 RAVENWOOD LANE FAYETTEVILLE, AR 72701 2,000. UNIVERSITY OF ARKANSAS FOUNDATION NONE NONE FULBRIGHT COLLEGE 535 RESEARCH CENTER BLVD., SUITE 120 DEAN'S FUND FAYETTEVILLE, AR 72701 10,000. WALTONS ARTS CENTER NONE NONE UNRESTRICTED 255 N. SCHOOL AVENUE FAYETTEVILLE, AR 72701 1,000. ARKANSAS COMMUNITY FOUNDATION NONE NONE UNRESTRICTED P.O. BOX 8962 PINE BLUFF, AR 71611 250. Total from continuation sheets 18 315.

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

THE JAMES BURTON BLAIR FAMILY FOUNDATION, INC.

Employer identification number

71-0841498

Organization type (check one) Section: Filers of: 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 X 501(c)(3) exempt private foundation Form 990-PF 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 For 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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

THE JAMES BURTON BLAIR FAMILY

FOUNDATION, INC.

Employer identification number

71-0841498

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	MARGARET BLAIR 24 SOUTH UNIVERSITY, #201 FAYETTEVILLE, AR 72701	\$\$	Person X Payroll						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
2	JIM BLAIR 1722 N. COLLEGE AVE, SUITE 2, #330 FAYETTEVILLE, AR 72703	\$1,815.	Person X Payroll						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	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 Payroll Noncash (Complete Part II for noncash contributions)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
			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 Payroll Noncash (Complete Part II for noncash contributions)						

Name of organization

Employer identification number

THE JAMES BURTON BLAIR FAMILY FOUNDATION, INC.

71-0841498

Ioncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	4.5	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given S

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number THE JAMES BURTON BLAIR FAMILY FOUNDATION, INC. 71-0841498 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1 000 or less for the year (Effer this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S'	FATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS - WELLS FARGO INTEREST - WELLS	81,460.	4,439.	77,021.	77,021.	
FARGO	4,086.	0.	4,086.	4,086.	
TO PART I, LINE 4	85,546.	4,439.	81,107.	81,107.	

MANNER DATE ACQUIRED ACQUIRED DATE SOI	FORM 990	-PF	GAIN	OR	(LOSS)	FROM	SALE	OF	ASSETS		STAT	PEMENT	2
C	DESCRIPT		Y									DATE	SOLD
GROSS SALES PRICE OTHER BASIS 1,530. 293. 0. 0. 1,530. AMANNER ACQUIRED ACQUIRED DATE ACQUIRED ACQUIRED DATE SOLE 500,000 DELTA AIRLINES, INC. DEL PASS (B) GROSS SALES PRICE OTHER BASIS (C) COST OR SALES PRICE OTHER BASIS (B) COST OR COST OR DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) GROSS SALES PRICE OTHER BASIS (C) COST OR DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) GROSS COST OR DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) DESCRIPTION OF PROPERTY (C) DESCRIPTION OF PROPERTY (D) DESCRIPTION OF PROPERTY	32 SHS D	ELTA AIR LINES	, INC	2.					PURCHASED	03/	/23/11	08/0	3/17
1,530. 293. 0. 0. 1,237		GROSS		cosi	r OR	EX	PENSE	OF			CA TN		aa
MANNER DATE ACQUIRED ACQUIRED DATE SOI 500,000 DELTA AIRLINES, INC. (B) GROSS COST OR SALES PRICE (A) DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) GROSS COST OR SALES PRICE OTHER BASIS (B) MANNER DEPREC. GAIN OR LOSS (A) DESCRIPTION OF PROPERTY (A) DESCRIPTION OF PROPERTY (B) GROSS COST OR DESCRIPTION OF PROPERTY (C) DEL PASS - PRINCIPAL PAYMENTS (B) GROSS COST OR SALES PRICE OTHER BASIS (C) DEPREC. GAIN OR LOSS (D) (E) (F) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS	_			IEK					- 		GAIN		
DESCRIPTION OF PROPERTY SOU,000 DELTA AIRLINES, INC. DEL PASS (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF DEPREC. GAIN OR LOSS 10,331. 189,873. 0. 0. <179,542 (A) MANNER DATE ACQUIRED DATE SOI DESCRIPTION OF PROPERTY (A) MANNER DATE ACQUIRED ACQUIRED DATE SOI 500,000 DELTA AIRLINES, INC. DEL PASS - PRINCIPAL PAYMENTS (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF SALE DEPREC. GAIN OR LOSS (C) (D) (E) (F) GROSS COST OR EXPENSE OF SALE DEPREC. GAIN OR LOSS COST OR EXPENSE OF DEPREC. GAIN OR LOSS		1,530.				<u>.</u>		0.	• —————	0.		1,	237.
DEL PASS (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS 10,331. 189,873. 0. 0. <179,542 (A) DESCRIPTION OF PROPERTY ACQUIRED ACQUIRED DATE SOIN DEL PASS - PRINCIPAL PAYMENTS (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS	DESCRIPT	, ,	Y									DATE	SOLD
GROSS COST OR EXPENSE OF DEPREC. GAIN OR LOSS 10,331. 189,873. 0. 0. <179,542 (A) DESCRIPTION OF PROPERTY 500,000 DELTA AIRLINES, INC. DEL PASS - PRINCIPAL PAYMENTS (B) GROSS COST OR GROSS SALES PRICE (C) COST OR EXPENSE OF EXPENSE OF EXPENSE OF DEPREC. GAIN OR LOSS (F) COST OR EXPENSE OF SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES PRICE COST OR SALES COST OR SALES COST OR SALES COST OR SALES COST OR SALES COST OR SALES COST OR COST OR SALES COST OR COST OR SALES COST OR COST			, INC	С.					PURCHASED	08/	/03/04	11/0	1/17
(A) DESCRIPTION OF PROPERTY SOO,000 DELTA AIRLINES, INC. DEL PASS - PRINCIPAL PAYMENTS (B) GROSS COST OR SALES PRICE MANNER DATE ACQUIRED ACQUIRED DATE SOI PURCHASED 08/03/04 05/08/2 (E) (F) (F) (F) DEPREC. GAIN OR LOSS		GROSS		cosi	r OR	EX	PENSE	OF		•	GAIN		SS
DESCRIPTION OF PROPERTY 500,000 DELTA AIRLINES, INC. DEL PASS - PRINCIPAL PAYMENTS (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS		10,331.		1	189,873	•		0 .	•	0.		<179,	542.
DEL PASS - PRINCIPAL PAYMENTS (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS	DESCŘIPT		Y				-						SOLD
GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS	DEL PASS	- PRINCIPAL	, INC	С.					PURCHASED	08/	/03/04	05/0	8/17
		GROSS	C	cos	r or	EX	PENSE	OF			CATN		a a
700 000 000 000 000 000 000 000 000 000		388.		1EK	388		PALE	0 .	- 	0.	GAIN	OK 10	0.

DESCRIP	(A) TION OF PROPERTY	NAME OF E	SUYER	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
BUILIDI	NG	RAZOR ENT	ERPRISES,	PURCHASED	07/01/07	08/10/17
	(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)	a	(F)
	400,000.	398,336.	32,083	DEPREC.		72,955.
DESCRIP	(A) PTION OF PROPERTY	NAME OF E	BUYER	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
OFFICE	FURNITURE	RAZOR ENT	ERPRISES,	PURCHASED	07/01/07	08/10/17
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	GAIN	(F) OR LOSS
	22,902.	79,458.	1,837	. 77,68	35.	19,292.
DESCRIP	(A) TION OF PROPERTY	NAME OF E	BUYER	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
						
OFFICE	FURNITURE	RAZOR ENT LLC	ERPRISES,	PURCHASED	08/06/07	08/10/17
OFFICE	(B)	LLC (C)	(D)	PURCHASED (E)	08/06/07	08/10/17 (F)
OFFICE	(B) GROSS	LLC	·			

DESCRIP'	(A) TION OF PROPERTY	NAME OF E	BUYER	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
OFFICE 1	FURNITURE	RAZOR ENT	ERPRISES,	PURCHASED	07/24/07	08/10/17
	(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
_	SALES PRICE	OTHER BASIS	SALE	DEPREC.	GAIN	OR LOSS
	1,494.	5,182.	120.	5,06	57.	1,259.
DESCRIP	(A) TION OF PROPERTY	NAME OF E	BUYER	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
FLOORING	G	RAZOR ENT	CERPRISES,	PURCHASED	08/28/07	08/10/17
	(B)	(C)	(D)	(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	. GAIN	OR LOSS
	462.	1,603.	37.	1,08	38.	<90.>
DESCRIP	(A) TION OF PROPERTY	NAME OF E	BUYER	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
COMPUTE	R, PRINTER AND RO	OUTER RAZOR ENT	TERPRISES,	PURCHASED	01/30/08	08/10/17
	(B)	(C)	(D)	(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	. GAIN	OR LOSS
	406.	1,408.	33.	1,40	08.	373.
NET GAI	N OR LOSS FROM SA	ALE OF ASSETS				<76,314.>
CAPITAL	GAINS DIVIDENDS	FROM PART IV				4,439.
TOTAL T	O FORM 990-PF, PA	ART I, LINE 6A				<71,875.>

FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES	2,500.	1,250.	,	0.
TO FORM 990-PF, PG 1, LN 16B	2,500.	1,250		0.
FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
WASHINGTON CNTY PROP TAX	3,443.	1,722	•	0.
TO FORM 990-PF, PG 1, LN 18 =	3,443.	1,722		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
OFFICE EXPENSE UTILITIES	9,911.	0.		0.
TO FORM 990-PF, PG 1, LN 23	12,904.	0 .		0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
4,900 SHS PIMCO INCOME OPPORT 4,894 SHS NUVEEN S&P 500 10,000 SHS EATON VANCE TAX MA 3,533 SHS NUVEEN GLOBAL HIGH 4,000 SHS EATON VANCE RISK MA 10,000 SHS OPPORTUNITIES FUNI 3,000 SHS EATON VANCE MANAGEI	ANAGED INCOME ANAGED		122,168. 96,268. 185,236. 107,066. 75,908. 98,177. 23,039.	126,959. 69,740. 121,900. 59,743. 38,520. 84,000. 35,760.

	71-0841498
121,814. 145,869. 103,121. 28,264. 130,785.	131,200. 146,020. 83,713. 27,810. 104,400. 126,900.
125,166.	131,500.
	145,869. 103,121. 28,264. 130,785. 137,757.

2017 DEPRECIATION AND AMORTIZATION REPORT

FORM	FORM 990-PF PAGE 1				ļ	6	990-PF							`	, _
Asset	Description	Date Acquired	Method	Life	No c >	Unadjusted Cost Or Basis	Bus 	Section 179 F Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation	
	(D)LEGACY BUILDLING SUITE	07/01/02	SL	39.00	MM1.7	398,336.	! 			398,336.	.066,96		6,384.	103,374.	
	12 (D)OFFICE FURNITURE	07/01/02	2000B	7.00 H	HX17	79,458.				79,458.	77,685.		0	77,685.	
	24 (D)OFFICE FURNITURE	08/06/07	2000B	7.00	HY17	33,779.				33,779.	33,026.		.0	33,026.	
	35 (D)OFFICE FURNITURE	07/24/07	200DB	7.00 H	HY17	5,182.				5,182.	5,067.		.0	5,067.	
		08/28/07	150DB	15.00 H	HY17	1,603.				1,603.	1,036.		52.	1,088.	
	(D)COMPUTER, PRINTER, &	01/30/08	200DB	5.00 H	HY17	1,408.			704.	704.	704.		.0	704.	
	* TOTAL 990-PF PG 1 DEPR					519,766.			704.	519,062.	214,508.		6,436.	220,944.	
										-					
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE					519,766.			704.	519,062.	214,508.			220,944.	
	ACQUISITIONS			-		0			.0	0.	.0			.0	
	DISPOSITIONS					519,766.	<u></u>		704.	519,062.	214,508.			220,944.	
	ENDING BALANCE					.0			0.	0	.0			ö	
											<u>, _</u> -==	_			
						-									_
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